

arizonapain**treatment**centers

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Epidural steroid injections

In this approach, a steroid is injected directly around the dura, the sac around the nerve roots that contains cerebrospinal fluid (the fluid that the nerve roots are bathed in). Prior to the injection, the skin is anesthetized by using a small needle to numb the area in the low back (a local anesthetic).



Epidural injections help reduce inflammation

Injecting around the dural sac with steroid can markedly decrease inflammation associated with common conditions such as spinal stenosis, disc herniation or degenerative disc disease. It is thought that there is also a flushing effect from the injection that helps remove the inflammatory proteins that cause pain.

Epidural steroid injection success rates

An epidural steroid injection is generally successful in relieving lower back pain for approximately 50% of patients. While the effects of the injection tend to be temporary (one week to one year), an epidural can be very beneficial in providing relief for patients during an episode of severe back pain and allows patients to progress in their rehabilitation.

Frequency for epidural steroid injections

There is no definitive research to dictate the frequency of the epidural steroid injections; however, a limit of three injections per year is generally considered reasonable. There is also no general consensus in the medical community as to whether or not a series of three injections need always be performed. If one or two injections resolve the patient's back pain, some physicians prefer to save the one or two additional injections for any potential recurrent low back pain.

Risks and Side Effects

Although rare, the most common risk is that of infection. Other remote risks include the needle penetrating the dural sac resulting in a CSF leak and a spinal headache. A Common side effect is flushing or reddening of the skin.

Patients who should avoid epidural injections

Epidural steroid injections should not be performed on patients whose pain is from a tumor or infection, and if suspected, an MRI scan should be done prior to the injection to rule out these conditions.