

Epidural Injection for Leg Pain

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Your doctor, nurse or specialist physiotherapist has recommended an epidural injection. This injection is done to help relieve pain in your leg.

What is an epidural injection?

A slow release steroid is injected into the 'epidural space' in your spine. The epidural space runs from your neck along the full length of your spine. The steroid works by reducing swelling and inflammation around the nerves to reduce pressure and pain. Local anaesthetic is used to numb the area temporarily to make the injection less uncomfortable.

What are the benefits?

The injection will be done at the level in your spine that your pain comes from. It can relieve pain for days, weeks or months.

Are there any side effects?

The epidural injection can take three to ten days to relieve your pain. For some people it may not help the pain at all.

Very occasionally (1 in 100 cases) people can get a severe headache after an epidural. If this should occur once you are home contact the pain management team on the number overleaf.

If you have diabetes the steroids may temporarily raise your sugar levels.

As with any injection, there is a very slight chance of getting an infection or collection of blood where the needle is placed. In rare cases this may cause an abscess, meningitis or nerve damage.

Permanent nerve damage is rare (1 in 100,000 cases).

What happens before my procedure?

You will have the opportunity to discuss the procedure and alternative treatments. We will also discuss your general health, any specific preparations, what happens during the procedure and your recovery. Please mention any concerns that you have and we will answer your questions.

Do I have to give consent for my procedure?

Yes. We are required by law to obtain your consent for the procedure. Staff will explain the risks, benefits and alternatives before you decide whether to proceed. You will be given the opportunity to ask any questions before deciding whether to go ahead.

What should I do before my procedure?

If you have any long term illness for example, diabetes or epilepsy, or if you are unwell (cough, cold) you must tell a member of the Pain Management Team.

Should I take my blood thinning treatment?

You will need to tell your doctor, nurse or specialist physiotherapist well in advance so that we can give you the exact instructions in writing about when to stop this before your injection. Some of the medications need to be stopped seven days before the injection and some require a blood test on the day. If this has not happened then the steroid injection would need to be cancelled.

What about my other medications?

Take all of your usual medications, except blood thinning medication, on the morning of your procedure. Please bring a complete list of all your medicines with you.

What happens when I arrive in hospital?

We advise you DO NOT drive yourself to or from the appointment as your driving insurance may be invalid. Please come to the Pain Management Department or the X-ray department as stated on your appointment letter. Your personal details will be checked. The doctor will talk with you prior to the procedure to ensure that you understand what will happen, you are happy to proceed, and that it is safe to do so.

What happens during the procedure?

You will be taken to a clinic room where the injection will take place. An X-ray machine is sometimes used. If there is any chance that you may be pregnant, please tell us beforehand.

You will be asked to lie or sit in a position, the skin will be cleaned and local anaesthetic injected into the skin in your back to make the process less painful. Another needle will then be placed into the epidural space and the steroid injected. A plaster will be placed over the injection site. You be allowed to move position and be requested to sit in the waiting area for up to 15 minutes after the procedure before you can leave.

What should I do when I get home?

We advise you to rest for the remainder of the day. During this time you should not drive or operate machinery, sign any legal documents or drink alcohol. You should continue with your normal medication.

You will be given individual advice how to re start blood thinning medication.

You may take a bath or shower and remove any plasters the day after.

We recommend that you do not stop any pain medication suddenly even if you do feel that your pain has resolved.

Please seek the advice of the Pain Management Team or your GP about how to reduce your pain medication.

To get the best out of your epidural injection you should increase your activity gradually and start your physiotherapy exercises, if given, or increase your fitness and wellbeing with gradual appropriate exercise such as the gym or swimming.

Will I have a follow-up appointment?

Your follow-up will take the form of a telephone consultation with an experienced nurse or your specialist physiotherapist four weeks after your injection.

Contact us

Pain Management Clinic Reception (Appointment queries)

01493 452383

Pain Management Nurses (Clinical queries)

01493 452082

There is an answering machine on both lines. Please leave a message and we will return you call as soon as we can. If your query is urgent, please contact your GP.

Feedback

We want your visit to be as comfortable as possible. Please talk to the person in charge if you have any concerns. If the ward/department staff are unable to resolve your concern, please ask for our Patient Advice and Liaison (PALS) information. Please be assured that raising a concern will not impact on your care. **Before you leave the hospital you will be asked to complete a Friends and Family Test feedback card.** Providing your feedback is vital in helping to transform NHS services and to support patient choice.

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Attentively kind and helpful

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IN TRAN
communication for all

The hospital can arrange for an interpreter or person to sign to assist you in communicating effectively with staff during your stay. Please let us know.

**For a large print version
of this leaflet, contact
PALS 01493 453240**