

## **Commonly Asked Questions about Injections?**

### **PLEASE READ**

#### **1. What should I expect?**

You will be evaluated by Dr. Benny and then will be asked to sign a consent for this procedure.

You will be placed in the prone position (on your stomach) on the X-Ray table and the area of interest will be sterilely prepared with betadine solution and a blue sterile drape. Several images will be taken in order to localize the site of needle entry. The needle entry site will be anesthetized with lidocaine, then the needle will be carefully but swiftly moved into position under X-Ray guidance. A non-ionic contrast dye will be used to confirm proper positioning of the needle, and then the steroid lidocaine mixture will be injected in the specific area of interest. You will have vitals taken during the procedure and will then be discharged back to your recovery room.

#### **2. Will the Injection hurt?**

This is a relatively variable answer, as different people tolerate pain and injections differently. I always use a local anesthetic to numb up the injection site prior to the needle entry and I always talk you through the procedure as it goes along. The whole procedure usually takes about 5-10 minutes. You will then remain in recovery for up to 20 minutes just to make sure things are well before you leave.

In my experience, most patients have left reporting “It really wasn’t bad at all.”

#### **3. Why do I need a driver?**

This is simply a safety precaution. Often patients may feel warmth, or numbing sensation in their legs after the injection for up to 6 hours due to the local anesthetic used, which may impede driving.

#### **When can I resume normal activities after the injection?**

After the injection you should not operate a motor vehicle or heavy machinery for the remainder of the day of the procedure. You can ambulate as tolerated on the day of procedure (you may be quite sore), and can resume all normal activity by the next day.

#### **4. How will I know if the injection worked?**

On the day of the procedure you can expect to have about 2-4 hours of numbness in the back and lower legs (or arms) due to the local anesthetic effect. Even the feeling of **“numbness, warm feeling, and difficulty moving my legs”** is normal for the first 2-4 hours after an epidural steroid injection due to the local anesthetic component. Once this wears off, you will have quite a bit of soreness at the injection site for about 24 hours. Make sure to ice the injection site for 20 minutes every hour, for 3-4 hours on evening after the procedure, this will significantly decrease the soreness. You may need to take over the counter Tylenol or Ibuprofen as well the evening after the procedure to help with post-procedure soreness. You may also need to take over the counter benadryl (tablet or lotion) to help with minor itchiness at the injection site (Most likely from the betadine sterile preparation used)

**The steroid medication will begin working in 48-72 hours, and its effects may last up to 3-6 months.**

You should monitor and record the extent and duration of relief (a pain diary) you have received for the next 1-2 months. You can expect a call from our office in 1 month, and depending on the extent and duration of steroid effect we will discuss if another injection is warranted.

## **5. What should I expect immediately after the Injection?**

*Short term side effects of the steroid* include nausea, dizziness, fatigue, irritability, difficulty sleeping, high blood sugar, and fluid retention. If diabetic, you will need to monitor your blood sugars more closely for 48 hours. If you have renal dz. or heart disease you will need to contact your primary doctor prior to the procedure to monitor your fluid retention more closely after the procedure.

**The steroids will take effect in 48-72 hours.**

Warmth and numbness in the legs (or arms), and paresthesia in the legs (lack of feeling or movement in the leg) may last up to 2-4 hours after the injection due to the local anesthetic mixed with the steroid injection.

You may have significant tenderness and pain at the needle entry site after the numbing medication wears off in 3-4 hours. Make sure to ice the area for 20 minutes every hour for 3-4 hours which should take care of any swelling.

You may have minor itching and redness around the needle entry site due to the betadine sterile preparation we had used. Please wash this area off thoroughly and take an over the counter anti-histamine (Benadryl ointment or tablet) to help with the itching.

## **6. How often can these injections be done?**

On average we do no more than 3 injections within 6 months. Other factors include age, amount of steroid used, site of injection, and diagnosis. There is research to support doing a second ESI if you have no relief from the first injection. There is no evidence to support doing more than 2 injections if you have no relief from either of the injections. The number of injections done will be determined on an individual basis.

## **7. Why do I have to stop my anti-clotting agents before the injection?**

Medications such as **Coumadin, Plavix, Heparin, Aspirin, Aspirin like products** prevent clotting of blood at the procedure site as well as within the spine itself which could lead to unnecessary complications. Please check with your primary doctor before stopping these medications. Keep in mind your injection procedure is only elective and may take second priority to your cardiac disposition. If your doctor does allow you to be off coumadin for the necessary 5-7 days, you will need an INR of 1.5 or less on the day of the procedure. (We can phone prescriptions to your local blood draw lab if needed, let us know.)

**8. What Medications can I continue to take?**

You do not need to stop any other medications outside of anti-clotting agents mentioned above for the procedure including muscle relaxants, anti-depressants, blood pressure meds, insulin, or Tylenol, Vicodin, Darvocet, Tramadol or other narcotics. **We ask that you do not take NSAIDS (Ibuprofen, Alleve, Excedrin) for 3 days prior to the procedure, but you can take it immediately afterwards.**

**9. When can I begin my medications after the injection?**

You can begin all medications except for blood thinners right after the injection. This includes any pain medications or NSAIDS. You can begin taking your blood thinners (Coumadin, Plavix, or Aspirin like products) four hours after the injection.

**10. When should I call the clinic or the Emergency room after the injection?**

If you have any symptoms of bowel/bladder incontinence (Cannot feel when you are having bowel movements or urination), high fever, chills, severe pain, or headache within 48 hours of the injection, please call us at the clinic so we may assist you.

**11. What are the contra-indications to this procedure?**

**Please cancel the procedure** if you are PREGNANT, or have an active INFECTION and are on anti-biotics. We can wait or discuss alternatives to the injection.

**Please let your doctor know** if you are diabetic (Your BLOOD SUGAR WILL BE HIGH FOR 48 HRS), have cardiac or renal disease (You will have FLUID RETENTION).

**Please let us know** if you have betadine allergies, iodine contrast dye allergies, or latex allergies so we may take the necessary precautions for your safety.