What is a Spinal Injection?

The spinal injection you will have is also known as a block. Following your evaluation, a determination will be made using objective findings, such as our physical examination, test results (EMG, lab work), and radiology studies (X-Ray, MRI, CT Scan, Bone Scan) as well as subjective information (the actual symptoms and pain you are experiencing). We then decide whether to do an injection and, if it is to be done, which specific block you should get.

The injection is performed under x-ray guidance, also known as fluoroscopy. This enables the physician to visualize your spine to ensure accurate needle placement. The benefits of having the injection done under x-ray guidance are, reduced risk of complication and improved chances of positive results.

What Medication Do I Get During the Procedure?

Generally there are substances injected during the block procedure. They are local anesthetic (to numb the area), contrast agent or dye (to outline the structures in your spine) and steroid (the medication used to reduce inflammation and decrease your pain). You should report any known allergy to one of these substances to a clinical staff member immediately.

Are There Different Types of Injections?

All of the injections fall under two general categories: **diagnostic block**, (test injections where only a contrast agent and local anesthetic are used) and **therapeutic blocks** (where a contrast agent, local anesthetic, and steroid are used).

Therapeutic injections differ from diagnostic injections in only one way. In addition to a local anesthetic and a contrast agent, a therapeutic block utilizes a steroid. The steroids used in these injections do not build muscles; they are not the kind of medicine the body builders and athletes take. The purpose of the steroid is to reduce inflammation, thereby decreasing pain. The therapeutic injection will not give you immediate relief of your symptoms. The steroid effect begins anywhere from 4 to 6 hours to one week after your block. It provides gradual but steady relief of your symptoms. It is not a “quick fix”.

What Can I Expect?

The most common side effect of the procedure is a transient increase in pain for the first 24-72 hours after the injection. This typically occurs because the substances injected are placed in an area where there is already inflammation. You should not be alarmed by this. Your symptoms should gradually diminish in the days following the block.

There may also be some tenderness at the needle insertion site. Should you experience this problem, you can place an ice pack on the area to reduce the discomfort, as often as you require.

The expected success rate for these injections depends on your diagnosis. You should be aware that the procedure might be ineffective. It should also be noted that the duration of the procedures effectiveness is unpredictable.

Can All Spine Problems Be Treated by a Block?

The injections we perform are not appropriate for everyone. It is conceivable your condition cannot be treated with non-surgical measures. If this applies to your situation, surgery may then be recommended. Likewise, if there are not medical remedies for your condition, you will be apprised of that opinion at the time of your initial evaluation.

Should I do Anything to Prepare for the Procedure?

If your procedure is scheduled in the morning, you should have a light breakfast such as toast and cereal, nothing heavy.

Those patients scheduled for afternoon procedures should eat a normal breakfast (i.e. cereal, toast, etc.) and a light lunch, such as a sandwich and soup. You should not have any caffeine or product containing caffeine. You may take your regularly scheduled medications, however, there are some exceptions. **HOLD ANY ANTICOAGULANT**, such as Coumadin, Plavix or Asprin for a few days prior to your procedure.

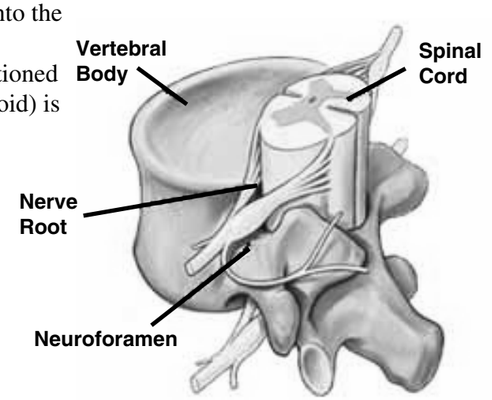
What are Trigger Point Injections?

Trigger point injections are injections of local anesthetic (numbing) medication, saline, and/or cortisone into the trigger point(s). A “trigger point” is the focal spot or location of pain. Many times injections are performed in a series. Trigger point injections can be done in the office **without** radiographic aid. The site of the injection is usually near the sacroiliac joint and can be easily palpated by the physician.

What is an Epidural Injection?

An epidural injection places anti-inflammatory medicine into the epidural space to decrease inflammation of the nerve roots, hopefully reducing the pain in the back or legs. The epidural injection may help the injury to heal by reducing inflammation. It may provide permanent relief or provide a period of pain relief for several months while the injury/cause of pain improves.

The patient is placed on the x-ray table and positioned in such a way that the physician can best visualize the low back using x-ray guidance. Next, the physician numbs a small area of skin with numbing medicine. This medicine stings for several seconds. After the numbing medicine has been given time to be effective, the physician directs a small needle, using x-ray guidance into the epidural space. A small amount of contrast (dye) is sometimes injected to insure the needle is properly positioned in the epidural space. Anti-inflammatory (cortisone/steroid) is then injected.



For What Reasons Should I Call the Office?

- A temperature of 100 degrees or more
- Excruciating pain
- Headache in the standing or sitting position, which is fully relieved by lying down

Who Should I Call if There is a Problem?

- Weekdays, 8:30 a.m. - 5:00 p.m. 908-782-0600 x 2218 or 2219.
- Evening and Weekends, 908-782-0600, our answering service will direct you to the on call physician.

Follow-Up

Follow-up is generally scheduled 2 weeks after your last injection of the series for reevaluation.

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Guide to Spinal Injection Procedures

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