Caudal Epidural Injection Information

**What is the epidural space, and what is an epidural injection?**
The covering over the nerve roots in the spine is called the dura. The sleevelike space surrounding the dura is called the epidural space. Nerves travel through the epidural space before they travel into your legs. The nerves leave the spine from small nerve holes. These nerves may become inflamed due to irritation from a damaged disc or from contact with a bone spur. Inflammation of these nerves may cause pain in your lower back, hips, buttocks and legs.

An epidural injection places anti-inflammatory medicine (cortisone) into the epidural space to reduce nerve inflammation and hopefully reduce your symptoms. By stopping or limiting nerve inflammation, we may promote healing and speed up mother nature, thereby reducing your pain. Although not always helpful, epidural injections reduce pain and improve symptoms in most people within three to seven days. These injections may provide permanent relief or provide a period of pain relief that will allow other treatments like physical therapy to be more effective.

Your doctor may order up to three epidural injections spaced approximately two to four weeks apart. Performing a repeat injection depends on your response to the prior injection. If you obtain excellent relief from an epidural, you do not need to have it repeated. If you have partial sustained benefit (greater than 35 percent relief), the epidural can be repeated for possible additive benefit. If an epidural injection provides minimal benefit (less than 35 percent relief), the physician may choose another injection to be performed with a change in the technique and/or cortisone used.

**What will happen to me during the procedure?**
First, an IV is started, so that you may be given medicine for relaxation if you so desire. Next, while you are lying face-down on an x-ray table, your skin will be well-cleansed with an antiseptic. The physician will numb a small area of skin where the epidural needle will be inserted. The injection will occur at the top of the buttock crease where there is a small opening to the epidural space. Next, the physician will use x-ray guidance to direct a small needle into the epidural space. There will be pressure felt with this part of the procedure. Your doctor will then inject contrast dye to confirm that the medicine spreads to the affected nerve(s) in the epidural space. After this, the physician will inject a combination of numbing medicine (an anesthetic) and a time-released anti-inflammatory (cortisone).

**What should I do and expect after the procedure?**
You may have some partial numbness in your buttocks and/or legs from the anesthetic after the injection. This may last several hours, but you will be able to function safely as long as you take precautions. You will report your remaining pain (if any) and also record the relief you experience over the next week in a “pain diary,” which we will provide. Mail or fax the completed pain diary in the envelope provided, so that your treating physician can be informed of your results, and can plan future tests and/or treatment if needed.

You may notice an increase in your pain lasting for several days. This occurs after the numbing medicine wears off, but before the cortisone has a chance to work. Ice will typically be more helpful than heat during this time. You may notice an improvement in your pain three to five days after the injection. Improvements will generally occur within 10 days after the injection.

On the day of the injection, you should not drive, and should rest and avoid any strenuous activities. You may take your regular medications at their usual times after the procedure, including your pain medicine if needed. On the day after the procedure, you may return to your regular activities. When your pain has improved, start your regular exercise in moderation. Even if you are significantly improved, gradually increase your activities over one to two weeks to avoid recurrence of your pain.