Caudal Epidural Injection

You have been listed for an injection called a caudal epidural. The epidural space is the space inside the bony spinal canal but outside the covering of the spinal cord and nerves, and runs the length of the spine. Prolapsed discs, spinal stenosis, arthritic changes or scar tissue from previous spine surgeries can irritate the spinal cord or spinal nerves. You are likely to be complaining of pain in one or both of your legs, which may be caused by this irritation or inflammation of the nerves in the lower part of your spine. The injection aims to reduce your symptoms.

About the Procedure

The injection is carried out as a day-case procedure and usually takes around fifteen minutes to complete. It may be performed with you awake, or lightly sedated, in the orthopaedic operating theatres, the pain clinic or the radiology department. You will be asked to lie on a procedure table on your stomach and your skin will be cleaned with a cold antiseptic spray. A small needle will be inserted into the caudal epidural space at the base of your spine between your buttocks. Once the doctor is happy that the needle is in the right place, some local anaesthetic and steroid is injected. Occasionally this will reproduce your leg symptoms or give a warm sensation in the legs. The needle is then removed and a cold adhesive spray or a small wound dressing is applied to the skin.

Before the Procedure

Wear loose comfortable clothing and arrange to have someone accompany you to and from the hospital. On average you could be in hospital between four and six hours on the day of the procedure if it is performed in the operating theatre suite and around 1 hour if it is performed in the radiology fluoroscopy suite. Please bring a list of all your medications including homeopathic and herbal remedies. You may bring your pain medication with you to take after the procedure. You can take it up to two hours before the procedure with a sip of water. Please take all your routinely prescribed medications on the day of the
procedure including blood pressure, heart, thyroid medications etc. Patients who take Warfarin need their INR blood test to be less than 1.5 on the day of the injection. Please seek advice from your GP with regard to your warfarin dose. The procedure will only be performed pending an INR check on admission. Patients who take Clopidogrel or Aspirin must stop taking it ten days prior to their injection. Again, please liaise with your GP regarding the safety of this. You must let us know if you are taking other forms of anticoagulation medicine. If you are diabetic you may eat breakfast and take your morning dose of medication up to 6:00 am. Do not eat or drink for two hours prior to the procedure time (i.e. if your procedure time is 9 am, you can eat a light snack up until 07:00 am). If you have had an MRI, CT scan or other imaging, outside the NHS, please bring copies with you. Without films, the physician will NOT perform the procedure. You must be healthy on the day of the procedure. You cannot have a fever, infection, sore throat or cough.

**Following the Procedure**

You will be allowed home soon after the procedure but will need someone to take you. Please make sure you take any outside imaging (MRI / CT) home with you. You will need to be off work for 24 to 48 hours and you should not drive for at least 48 hours after the injection. Sometimes after the injection your back and / or leg may feel stiff or numb for a few hours and it should return to normal. It is important to gradually return to your normal activities. A follow up appointment will be made for you to find out if the procedure has helped. This is usually six to eight weeks after the injection. It is important to keep a record of your symptoms and pain both on the day it was performed and over the following weeks.

**Risks of the Injection**

Caudal epidural injections have very few risks. Uncommon complications include infection, injury to the nerves or coating around the nerves, headache, temporary low blood pressure, bleeding and allergic reaction. Low blood pressure usually results in temporary light-headedness, but very rarely it causes heart problems and stroke like symptoms. Very rarely a spinal anaesthetic can occur, which results in numbness and weakness in the legs, bladder and bowel. This usually wears off with no lasting side effects. The steroid can affect blood sugar levels in people with diabetes, so blood sugar should be monitored more closely for a few days after the injection. Please contact a healthcare professional, the ward or your surgeon’s secretary if you develop redness or swelling around the injection site, a high temperature or if you feel generally unwell.

**Will it work?**

The effectiveness of caudal epidurals is variable and can depend on the underlying condition. For some people it can get rid of their leg pain permanently, and for others they can last for weeks or months. Unfortunately, no treatment is guaranteed to work, and for some people the injections are not helpful. It can take a few weeks for the injection to work, so please be patient. It is very important to understand that as your leg pain improves, after the injection, you will need to start a regular exercise program in order to strengthen the muscles around the spine, to work on your fitness, and to begin normal movement again. This combination of injection and exercise gives the best chance for long term improvement in your back complaint.

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