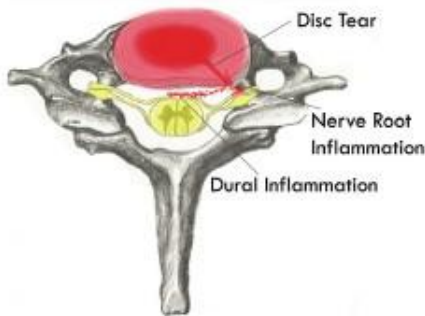


CERVICAL INTERLAMINAR EPIDURAL STEROID INJECTION

For Neck & Arm Pain



A cervical interlaminar epidural steroid injection is a simple procedure for treating **neck, upper back, shoulder, and arm pain**, commonly due to **disc bulges** and **arthritis**. Your doctor can explain if this procedure is right for you.

What is the epidural space?

The dura is a protective covering of the spinal cord and its nerves. The space surrounding the dura is called the epidural space. It contains fat and small vessels, and medications (cortisone) can easily spread when injected into this space.

What causes pain in the epidural space?

The cervical area of the spine has seven bones, called vertebrae. Soft **discs** found between these vertebrae cushion them, and control motion.

If a disc **tears** or **ruptures**, chemicals inside may leak out. This can inflame the nerve roots or the dura, and cause neck pain radiating down the arm.

The discs may also push outward towards the nerves or spinal cord, compressing roots or the spinal cord, thereby causing pain, numbness or weakness. This is called a **disc bulge** or **herniation**.

Bone spurs, called osteophytes, can also press against nerve roots and cause pain radiating into the arm.



How do I know if I have disc and nerve root pain?

If you have pain in your neck or upper back when you move your head, you may have **cervical disc pain** and dural inflammation. If pain travels into your arm when you move your head, you may have a **pinched nerve or inflammation**.

Common tests such as MRIs can show disc bulges and nerve root compression, but may not show a torn and leaking disc. A cervical epidural injection can help to determine if disc problems, or dural, or nerve root inflammation are causing your pain.

What is an interlaminar cervical epidural steroid injection?

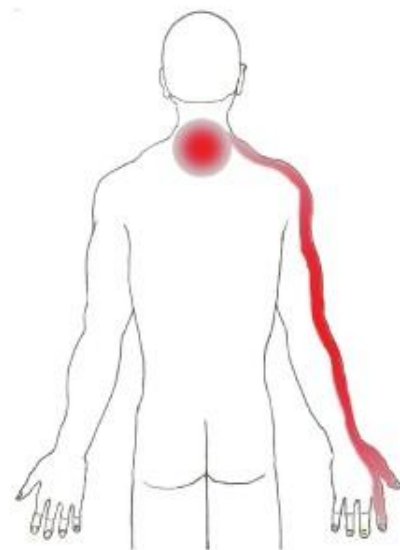
In a cervical epidural steroid injection, an anesthetic and a steroid are injected into the epidural space to reduce inflammation. The simplest way is from the back of the spine. This is called an interlaminar injection.

What happens during an injection?

The injection may start with an IV (medicine given intravenously) to help you relax. A local anesthetic may be used to numb your skin.

The doctor will then insert a thin needle directly into the epidural space. Fluoroscopy, a type of x-ray, may be used to ensure the safe and proper position of the needle. A dye may also be injected to make sure the needle is at the correct spot.

Once the doctor is sure the needle is correctly placed, an anesthetic and steroid will be injected.



For Neck & Arm Pain

What happens after an injection?

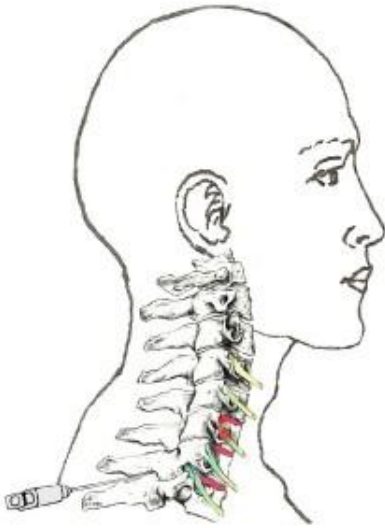
You will be monitored for up to 30 minutes after the injection. When you are ready to leave, the clinic will give you discharge instructions. The procedure typically takes no more than 5 to 10 minutes.

It may help to move your neck in ways that hurt before the injection, to see if the pain is still there, but do not overdo it. Take it easy for the rest of the day.

You may feel immediate pain relief and numbness in your neck and arm for up to six hours after the injection. This tells you the medication has reached the right spot.

Your pain may return after this short pain-free period, or may even be a little worse for a day or two. This is normal. It may be caused by needle irritation or by the steroid itself. Steroids usually take two or three days to start working, but can take as long as a week.

You can usually return to work the day after the injection, but always check with your doctor.



How long can I expect pain relief?

How long you can expect pain relief depends on the amount of inflammation. Sometimes an injection brings several months of pain relief, and then further treatment is needed. Other times, a single injection brings long-term pain relief. If your pain is caused by injury to more than one area, only some of your symptoms will be helped by a single injection. Injections are used as part of a comprehensive pain management program including physical therapy, medications and other modalities to reduce pain.

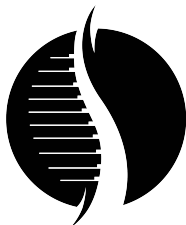
What are the possible risks and side effects?

As with all invasive medical procedures, there are potential risks. Risks are rare, but may include infection, bleeding, allergic reaction, headache, dural puncture, temporary numbness or tingling, weakness, nerve injury and stroke.

Side effects are rare and, when they occur, are usually due to the steroid itself. These include, but are not limited to, pain at the injection site, headache, increased blood sugar, water retention, facial flushing, irritability, sleeplessness, burst of energy, skin discoloration at the injection site.

You should contact your doctor or go to the emergency room if you experience any of the following symptoms: severe headaches with nausea or vomiting, fever greater than 101 degrees, loss of control of bowel or bladder function, severe pain, and loss of function or feeling in the arms or legs.

This pamphlet is for general education only. Specific questions or concerns should always be directed to your doctor. Your doctor can explain possible risks or side effects.



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