

Occasionally you may feel faint following the procedure which is easily remedied by lying down. Should you develop symptoms which you are concerned about or you experience severe pain following an injection, please do not hesitate to contact us.

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Blackrock Clinic



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A PATIENT'S GUIDE TO
*CT Guided
Facet Joint/
Nerve Root
Injections*

Welcome to Blackrock Clinic Outpatients Department

What is a CT guided spinal injection?

A spinal injection is an injection of local anaesthetic and steroid (anti-inflammatory medication) into or around a part of your spine (neck, back, or lower back) which will hopefully relieve the pain and/or symptoms which you are experiencing. The injection will either be into the facet joints or around the nerve roots of the spine. Facet joints are located in the spine at each vertebral level. They are paired (left and right) and are surrounded by a joint capsule. Nerve roots exit the spine from the spinal cord and are also found at each vertebral level. Depending on the nature of your symptoms, the doctor will know whether to inject at the facet or the nerve root. The steroid injection reduces inflammation at the site and thus reduces pain and the associated symptoms in the medium to long term.

Is there any necessary preparation?

Medications: It is important to make us aware of any medications you may be taking before coming in for the injection, e.g. any blood thinners such as Aspirin, Warfarin, or Plavix. We will advise you if you need to cease any medications at the time of making the appointment.

What to bring: All insurance details are required on the day of your procedure as on arrival, you will be requested to fill in the appropriate insurance forms. Depending on policy type, there may be a shortfall or excess to pay on the day. Any relevant scans should be brought for the procedure.

What to tell us: It is important to make us aware of any allergies you may have. Woman of child bearing age must inform us of any chance of pregnancy or if currently breastfeeding.

What to wear: You may wear anything you feel most comfortable in, depending on the area to be scanned and injected, you may be asked to remove items of clothing and jewellery and put on a gown provided. You may eat as normal, however, please do not eat a heavy meal before the procedure.

What to expect during the procedure

Each patient is individual and will receive a different injection. The radiologist will provide each patient with a detailed explanation of what will happen and an informed consent will be signed only after it is agreed that you understand and are happy with the examination.

You will then be positioned on the scanning table. You will lie either on your side or face down. **It is very important that you do not move until the end of your examination.** An external marker will then be placed over the region of interest and a limited scan will be taken of that area to find the correct position for the injection. The skin is then marked and the area cleaned.

The radiologist will then inject a small amount of local anaesthetic to numb the area. Once this has taken effect, he will place a longer needle into the site under image guidance. He will guide the needle into the exact location. A steroid medication, which is related to Cortisone, and long acting local anaesthetic will follow.

You may feel some pressure at the site of the needle, or extending into the limbs, depending on the site and type of injection.

Aftercare instructions

It is not unusual to feel some discomfort or pain. This may take up to 48 hours to pass. Should you experience discomfort you may take any pain-killer or anti-inflammatory medication following your doctor or pharmacists instructions. It may take up to 3 weeks before you start to notice real relief from the injection.

Travelling: It is advisable to have somebody to drive you home. The local anaesthetic may cause you to feel a residual numbness. You should not drive for the remainder of the day.

Activity: Instruction should be sought from the referring doctor as to what level of activity can begin post injection.

Complications/risks: This procedure is well-established and safe when performed in a controlled setting. However, with any interventional procedure there are risks, side effects and a possibility of complications. Complications include haematoma at the site of injection, worsening of symptoms, bleeding, sleep disturbance, flushing, transient increase in blood sugars in patients with diabetes and infection. For patients undergoing a cervical spine injection there is a risk of vertebral injury.

Signs of infection include sweats, shakes and fever with possible redness and heat at the injection site and worsening of symptoms.

Infection is rare, occurring in approximately 1 in 10,000 cases but can be serious and will require intense antibiotic treatment.

The local anaesthetic occasionally causes numbness or slightly diminished power in the buttocks and legs for a short period.