



# INTRADISCAL INJECTION

*Understand your condition.  
Know your next steps.*

## **Introduction**

At times it is difficult for a physician to determine what is causing a patient's low back or leg pain. If a physician suspects that an intervertebral disc is causing a patient's pain, an injection into the disc may be recommended to help identify the cause of the pain and possibly treat the disc pain. This injection may help the physician determine the next course of treatment.

## **Degenerative disc disease.**

This is a broad term used to describe wear and tear changes within a disc or discs. This can be hereditary or a result of the aging process to some degree. It may also be caused by trauma or repeated injury. As a result, narrowing of the intervertebral disc space, abnormal spinal movement, and possibly spinal nerve root compression can occur. Degenerative disc disease is a common problem; however, it is not always painful.

## **The intervertebral discs**

The intervertebral discs are the cushions that separate the vertebrae in the spine. Each disc is made up of a firm outer ring called the annulus fibrosis and the "jelly-like" center is called the nucleus pulposus.

## **The purpose of intradiscal injection**

Intradiscal Injection can be performed for diagnostic and/or therapeutic purposes.

**Diagnostic:** A local anesthetic is used to determine if the pain is coming from a specific disc by attempting to temporarily block pain sensation within the disc. This pain relief only lasts until the anesthetic wears off.

**Therapeutic:** A steroid is injected to decrease inflammation that may be present within a disc. It is hoped that decreasing the inflammation will reduce the patient's pain. The steroid usually starts to work in 2 to 3 days, but the optimal effects are not known until 1 to 2 weeks after the injection. The duration and extent of pain relief from therapeutic intradiscal injection varies from person to person.

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APPOINTMENTS (651) 968-5201

# INTRADISCAL INJECTION

## *How should I prepare?*

- » Please shower/bathe with antibacterial soap, if possible, the evening before the injection.
- » You need to arrange for a driver to be present and take you to and from the medical facility. If you do not have a driver with you, your procedure may have to be rescheduled.
- » While the procedure usually takes less than an 30 minutes, you will need to allow for at least 1 to 2 hours at the surgery center.
- » If you are taking prescription blood thinners such as Coumadin (warfarin), Ticlid (ticlopidine), or Plavix (clopidogrel bisulfate), please inform your doctor's patient care coordinator. These medications will need to be stopped before the procedure, *but only after you receive permission from the doctor who is prescribing these medications.*
- » If you are on high doses of aspirin (more than 2 per day), inform your doctor's patient care coordinator.
- » Please inform us if you have any known allergies, since medications and dye will be administered before and during the procedure.

- » If you develop a fever, night sweats, or an active infection, your procedure will need to be rescheduled. Please contact our office at (651) 968-5201 immediately to inform us of your change in condition.

## *The procedure*

Prior to the procedure, an IV is placed in the arm for intravenous antibiotics and mild sedation over the course of the procedure. The patient is placed in the prone (lying face down) position with a pillow underneath the abdomen.

The skin is sterilely prepared, and using fluoroscopic (X-ray) guidance, the safest path into the appropriate disc(s) is determined. The skin is anesthetized and a thin needle is advanced under fluoroscopic guidance into the central portion of each disc to be injected.

A small volume of contrast solution is injected to prove that the medication will flow into the disc. Anesthetic solution, steroid solution, or a combination of both is then injected, depending on the intent of the procedure. Following the procedure, the patient is cared for in the recovery area for approximately 30 to 45 minutes.

## IF YOUR PROCEDURE INCLUDES SEDATION

- » You should have no solid foods for 6 hours before your procedure.
- » You may have clear liquids up to 2 hours before your procedure. Examples include: water, broth, clear fruit juices such as apple, cranberry, and grape juice. These juices should not include pulp. Tea, black coffee with *no cream*, and carbonated beverages are also allowed.
- » Nothing by mouth, including throat lozenges, mints, and all hard candy.
- » No gum for 2 hours before your procedure.
- » You must have a responsible adult arrive with you to our facility. If you use a taxi or volunteer ride service, you still must have a responsible adult with you in order to help take care of you after your sedation procedure.
- » Please take your regular medications the day of your procedure, especially any **heart or blood pressure medications**.
- » If you are on medication for **diabetes**, be sure to take it the day of the procedure.

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## ***After the injection***

Follow the specific instructions given to you by the nurses at the procedure center.

- » Plan to rest for the remainder of the day. Resume activity as tolerated.
- » After the anesthetic wears off, you may have some soreness at the injection sites for 1 to 2 days from needle insertion. For discomfort, apply ice packs to the area for 15 minutes several times a day.
- » Do not soak in a tub for 24 hours after the procedure. You may take showers.
- » Report any signs of infection or other unusual symptoms, including redness and warmth at the injection site, increasing pain, swelling, drainage, chills, night sweats, or fever that reaches above 100° F.
- » Keep a record of your pain and symptoms after the injection, and report your results as instructed by your doctor's patient care coordinator.

*Remember that your usual pain may go away for a few hours, but after the local anesthetic wears off, it is normal for your pain to return. You may also have some temporary discomfort at the puncture site. The full effects of the steroid may take 2 days to 2 weeks to work, and its lasting effects vary from person to person.*

## **CAUTION**

**Driving while sedated is illegal and can result in serious accidents. Please be sure to use your driver to get you home safely!** If using medical transportation or a taxi, another responsible party must accompany you.

### ***Possible side effects of the steroid***

Possible side effects include facial flushing, fluid retention, insomnia, low-grade fever, temporary changes with menstruation, and headache. These side effects usually are minimal and resolve 1 to 3 days after the procedure. If you have diabetes, your blood sugars may be temporarily elevated.

### ***Potential risks of intradiscal injection***

This study is considered invasive and does have potential risks. These include, but are not limited to:

- » Infection in the disc. This is uncommon because strict sterile techniques are used in the procedure.
- » A slight risk of nerve injury.
- » Allergic reaction to medications used or contrast dye. *Be sure to inform us before the injection if you have any known allergies.*

