



PATIENT & CAREGIVER EDUCATION

# Epidural Steroid Injection

This information will help you get ready for your epidural steroid injection (shot) at MSK. It also explains what to expect after your procedure.

## About epidural steroid injections

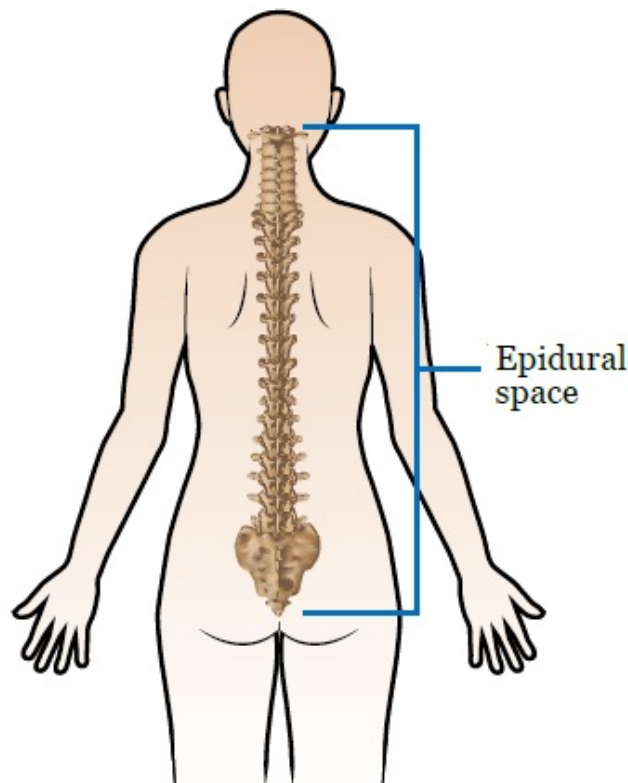


Figure 1. Your epidural space

Your vertebrae (the individual bones in your back) are separated by rubbery cushions called discs. If a disc bulges (moves out of place), it can irritate your spinal nerves. This can lead to back and nerve pain. A steroid injection can help decrease nerve irritation, which may help reduce your pain symptoms.

Your epidural space goes from the base of your head to the part of your spine that's below your hips (see Figure 1). A steroid may be injected into any area of your epidural space. Your pain doctor will decide the best location for your injection based on where your pain is.

# 1 week before your procedure

## Ask about your medicine

You may need to stop taking some medicine before your procedure. We have included some common examples below.

- If you take medicine to thin your blood, ask the doctor who prescribes it for you when to stop taking it and when you can start taking it again.

Here are some examples of blood thinners. There are others, so be sure your care team knows all the medicines you take. **Do not stop taking your blood thinner without talking with a member of your care team.**

<ul style="list-style-type: none"><li>• Apixaban (Eliquis®)</li><li>• Aspirin</li><li>• Celecoxib (Celebrex®)</li><li>• Cilostazol (Pletal®)</li><li>• Clopidogrel (Plavix®)</li><li>• Dabigatran (Pradaxa®)</li><li>• Dalteparin (Fragmin®)</li><li>• Dipyridamole (Persantine®)</li><li>• Edoxaban (Savaysa®)</li><li>• Enoxaparin (Lovenox®)</li><li>• Fondaparinux (Arixtra®)</li><li>• Heparin injection (shot)</li></ul>	<ul style="list-style-type: none"><li>• Meloxicam (Mobic®)</li><li>• Nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen (Advil®, Motrin®) and naproxen (Aleve®)</li><li>• Pentoxifylline (Trental®)</li><li>• Prasugrel (Effient®)</li><li>• Rivaroxaban (Xarelto®)</li><li>• Sulfasalazine (Azulfidine®, Sulfazine®)</li><li>• Ticagrelor (Brilinta®)</li><li>• Tinzaparin (Innohep®)</li><li>• Warfarin (Jantoven®, Coumadin®)</li></ul>
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- Steroids may temporarily increase your blood sugar levels. If you take insulin or other medicine for diabetes, you may need to change the dose. Ask the doctor who prescribes your diabetes medicine what you should do the morning of your procedure.
- If you are taking antibiotics, tell the doctor giving your steroid injection. Your procedure may need to be rescheduled.

## Arrange for someone to take you home

You must have a responsible care partner take you home after your procedure. A responsible care partner is someone who can help you get home safely. They should be able to contact your care team if they have any concerns. Make sure to plan this before the day of your procedure.

If you don't have a responsible care partner to take you home, call one of the agencies

below. They'll send someone to go home with you. There's a charge for this service, and you'll need to provide transportation. It's OK to use a taxi or car service, but you still need a responsible care partner with you.

#### **Agencies in New York**

VNS Health: 888-735-8913

Caring People: 877-227-4649

#### **Agencies in New Jersey**

Caring People: 877-227-4649

## **1 day before your procedure**

Call the doctor who scheduled your steroid injection if you:

- Have a fever of 100.5° F (38° C) or higher.
- Have an infection.
- Are taking prescribed antibiotics.

## **The day of your procedure**

### **Things to remember**

- Wear something comfortable and loose-fitting.
- If you're between the ages of 11 and 50 and able to get pregnant, your doctor will ask you to take a urine (pee) pregnancy test before your procedure. This is because you'll be exposed to radiation from the fluoroscopy (type of x-ray) machine.

### **What to bring**

- A list of all the medicine you're taking, including prescription and over-the-counter medicine (medicine you get without a prescription), patches, and creams.
- Any pain medicine you're taking.

### **Where to go**

Your procedure will take place at 1275 York Avenue (MSK's main hospital building) on the 3<sup>rd</sup> floor in Suite A341.

Visit [www.msk.org/parking](http://www.msk.org/parking) for parking information and directions to all MSK locations.

## What to expect

Once you arrive at the hospital, you will be asked to say and spell your name and birth date many times. This is for your safety. People with the same or a similar name may be having a procedure on the same day. You may be asked to change into a hospital gown and remove any necklaces, chains, and earrings you are wearing. A pain doctor will review the procedure with you and answer your questions.

When it is time for your procedure, you will be helped onto the procedure table. You will lie on your stomach with a pillow under you. Using fluoroscopy (a type of x-ray), your doctor will find the right place to give you your injection.

When the right location is found, you will get an injection of local anesthetic (medicine to make an area of your body numb). You may feel a small pinprick and then a burning sensation. The doctor will then place the epidural in the area where the local anesthetic was injected. Once the needle is placed, they will inject the steroid. Your doctor will take out the needle and place a bandage over the injection site.

This procedure takes 15 to 30 minutes.

## After your procedure

### At home

For the first 24 hours (1 day) after your procedure:

- Do not drive or do any other task where you need to be alert or operate heavy machinery.
- Do not take off the bandage from your injection site. You can take it off 24 hours after your procedure. You can shower when you remove your bandage.
- Take your pain medicine as prescribed.
- Take caution when drinking alcohol. Alcohol can affect your balance and increase your risk for falling. Talk with your care team if you have any questions.

You may have temporary relief of your pain for a few hours after your injection until the local anesthetic wears off. Your pain may increase for up to 24 hours after your injection. It's normal to feel pain again for up to 5 days while the steroids start to work. Talk with your pain doctor for recommendations on how to take your pain medicine to help relieve your symptoms. If you have severe pain or if feel pain for longer than 48 hours (2 days), call your pain doctor.

## Side effects

Some people have side effects after getting an epidural steroid injection. The most common side effects are:

- Headaches.
- A temporary increase in blood pressure, blood sugar, or both.
- Some soreness at your injection site.
- A feeling of fullness or pressure in your back or neck.
- Restlessness or sleeplessness.

## When to call your healthcare provider

Call your healthcare provider if you have:

- A fever of 100.5° F (38.5° C) or higher.
- Pain that gets worse after 48 hours or changes locations.
- New symptoms such as shooting pain, burning, or tightness in your back or legs.
- New numbness or weakness in your arms or legs.
- Leakage, redness, or swelling at your injection site.
- New loss of control of your bowel or bladder.
- Any unexplained or unexpected problems.

If you have questions or concerns, contact your healthcare provider. A member of your care team will answer Monday through Friday from 9 a.m. to 5 p.m. Outside those hours, you can leave a message or talk with another MSK provider. There is always a doctor or nurse on call. If you're not sure how to reach your healthcare provider, call 212-639-2000.

For more resources, visit [www.mskcc.org/pe](http://www.mskcc.org/pe) to search our virtual library.

Epidural Steroid Injection - Last updated on October 3, 2024

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### Last Updated

October 3, 2024

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Was this information easy to understand?

Yes

Somewhat

No

What could we have explained better?

Please do not write your name or any personal information.

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