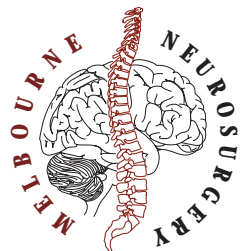


## PROCEDURE INFORMATION

# LUMBAR NERVE ROOT BLOCK



### WHAT IS A NERVE ROOT BLOCK?

A Nerve Root Block is where a special needle is inserted into back around the outside of the spine to deposit steroid and local anaesthetic around a nerve as it leaves the spine.

### WHAT ARE THE REASONS FOR HAVING A NERVE ROOT BLOCK ?

1. To block the nerve as a diagnostic test to see if this is the cause of your pain
2. To deposit steroids around the nerve to take the swelling away and improve your pain in the short term.
3. To break the long term cycle of your pain to try to prevent the need for surgery.

### WHAT INFORMATION CAN BE GAINED ?

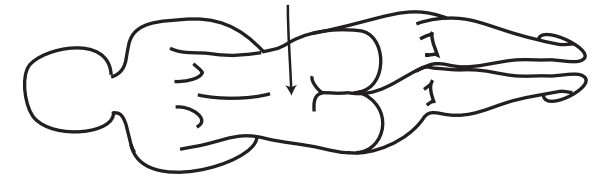
Sometimes it can be difficult to identify the nerve that is giving pain if there are lots of nerves involved on your Xrays. By block nerves at different times and looking to see if your symptoms clear up we can work out which nerve may need surgery if the block does not cure your symptoms.

### HOW IS IT PERFORMED ?

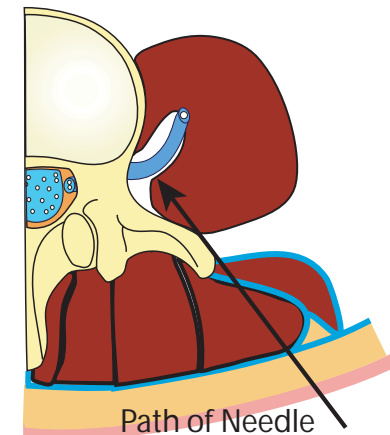
The test is performed by a doctor and happens in the radiology (Xray) department a hospital. The needle is guided either with a CAT scan or plain Xray.

You will be either face down or lying on your side, if you are on your side then your knees may be tucked up under your chin. The place for the needle is prepared with antiseptic to prevent infection .

Local anaesthetic may be injected into the area to numb it prior to the needle being inserted.



The needle is then pushed through the layers of the back around the outside of the spine to the point that it is needed next to the lumbar nerve root. This may sting a little but it is important not to move. The needle may enter the nerve and give pain down the leg. If this happens tell the radiologist and he will move the needle back.



## HOW WILL THIS AFFECT YOU?



The needle is very thin and stiff

He then injects some contrast to identify the nerve and check he is in the correct position.

Once correct local anaesthetic and steroid is injected down the needle. You will commonly get immediate relief from the anaesthetic. The needle is then removed.

A bandaid is all that is needed to cover the wound.

1. You may get no relief at all.
2. You may get no relief initially but the symptoms may improve over the next few weeks.
3. You may get immediate relief with a return of symptoms in two weeks. The symptoms may improve after this.
- 4 The symptoms may disappear and not return.
5. The symptoms may be partially relieved and then slowly settle over the next month or so.

YOU WILL BE ASKED TO SIGN A CONSENT FORM TO SAY THAT YOU UNDERSTAND THE RISKS . IF YOU ARE NOT SURE ASK BEFORE YOU SIGN.

## WHAT SHOULD YOU DO AFTER ?

You will usually rest in bed for 4 hours to reduce the risk of headache from the fluid leaking.

You will then be able to go home.

Somebody should drive you home.

Until the next day it would be advisable not to exercise.

## WHAT ARE THE RISKS?

The risks are very small

With the needle going in a nerve may get caught and this may give pain or tingling down the leg. This is transient and disappears when the needle is removed.

Infection is a theoretical risk but almost never seen.

If you have a bleeding problem or are taking a medication to thin your blood then there is a risk of bleeding at the area and developing weakness in the legs. It is important to tell the doctor if you are on blood thinning tablets such as aspirin/ warfarin /anti- inflammatory drugs.

Headache is a side effect because a small hole may be left if the needle injures the nerve. The fluid may leak into the tissue around the nerve, dropping the pressure in the head. This usually resolves in 24 hours or less.

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## WHAT SHOULD YOU NOTIFY YOUR DOCTOR OF AFTER ?

1. **INCREASING LOCAL PAIN**
2. **WEAKNESS IN LEG/S**
3. **FEVER**

Disclaimer. This brochure is to provide general information and does not replace a consultation with your doctor.

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