

Dr Rajesh Munglani MB. BS. DA. DCH. FRCA. FPPMRCA
Consultant in Pain Medicine

Spire Cambridge Lea Hospital
30 New Road
Impington, Cambridge CB24 9EL
Appointments: 01223 266990/5

BMI Healthcare Hospital
St Mary's Square
Bury St Edmunds, Suffolk IP33 2AA
Appointments: 01284 716700/701371

Nuffield Health Cambridge Hospital
4 Trumpington Road
Cambridge CB2 8AF
Appointments: 01223 479024

All Enquiries & Correspondence to:
Sue Sanalitra, PA/Secretary
Spire Cambridge Lea Hospital, address as above
Tel/Fax: 01223 479024/479125 Email sue.sanalitra@googlemail.com

Patient Information Leaflet

EPIDURAL INJECTIONS (DORSAL ROOT GANGLION BLOCKS)

What is an epidural or dorsal root ganglion injection?

These procedures are performed to help reduce pain, particularly where there is a strong neuropathic element. This means that the source of the pain is thought to be arising from the nervous system, particularly the nerves that carry sensation. These nerves come out of the spinal cord and branch out to the different parts of the body.

The dorsal root ganglion is a little swelling on the nerve at the place where it joins the spinal cord. It is the place where impulses from the nerves are transmitted through to the spinal cord. An epidural is an injection into the epidural space which is a specific space found in your back.

Usually a mixture of local anaesthetic and steroid is injected, although other agents may occasionally be added. Steroids have been used for this type of procedure for decades, although they are not licensed for it. Other drugs that have been injected epidurally include Clonidine, Ketamine and Magnesium Sulphate and if these are used the purpose will be explained to you.

Although these injections may help your pain, initially the effect may wear off. This procedure is performed as a test to find out the exact area causing problems. If you get relief from your pain, it will help Dr Munglani to decide which procedure to do next.

It is very important that you inform Dr Munglani if you are taking drugs to thin your blood, for example, Warfarin and Clopidogrel. He will then provide guidance as to whether there is a need to temporarily stop any blood-thinning drug.

The day of treatment:

You will arrive at the hospital you have chosen to attend at the time given to you by Dr Munglani's office. You stay will be as a Day Case Inpatient admission (and very occasionally as an overnight stay). On arrival at the hospital the staff will ensure that your paperwork is all in order and will then show you to your room or the Day Care Centre, as appropriate. You will be provided with the necessary theatre gown but if you wish you may bring your own dressing gown and slippers. Routine tests will be carried out by a nurse prior to your procedure such as blood pressure, pulse etc. Following this Dr Munglani will visit with you to discuss your procedure, following which you will be asked to sign a Consent Form.

The procedure will be carried out under x-ray screening. Once in the treatment room a small needle will be placed in the back of your hand. This is essential for safety reasons and allows Dr Munglani to give you sedation. You will feel relaxed and drowsy.

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Once you are in the correct position on the x-ray table, Dr Munglani will clean the treatment area with an antiseptic fluid – this can feel cold on the skin.

The injection will then take place. You may feel a pushing sensation and some discomfort at this stage. Contrast liquid is injected to make sure that the needle tip is in the correct position as seen on the x-ray. Drugs can then be injected and a feeling of tightness may be felt.

Following your injection:

After the procedure you will be taken to the recovery area before returning to your room/Day Care Unit. You may feel a little drowsy and wish to sleep. You will be offered light refreshment. Your blood pressure and pulse will be checked again prior to discharge and you may/may not have a visit from either Dr Munglani or his Pain Nurse Specialist.

PLEASE ENSURE THAT YOU HAVE ARRANGED FOR SOMEONE TO COLLECT YOU AFTER THE PROCEDURE. FAILURE TO DO SO WILL RESULT IN YOUR PROCEDURE BEING CANCELLED.

FOLLOWING SEDATION WE RECOMMEND THAT YOU ARRANGE FOR SOMEBODY TO STAY WITH YOU OVERNIGHT AND THAT YOU DO NOT DRIVE FOR 24 HOURS.

Benefits:

Although this procedure does not tend to give long-term pain relief some patients can have dramatic responses when few other therapies have helped. In some studies use of such procedures reduces the subsequent requirement for any surgical operations on the spine. In other patients, it may delay the need for such a procedure. In individuals in whom surgery is not an option, the procedure, if helpful, can be repeated at intervals as part of an overall pain management strategy.

Risks:

Normally after this procedure there may be some odd feelings in the affected part followed by an increase in pain for a day or two before beneficial effects are hopefully experienced.

The risk of minor events such as significant headaches due to a spinal tap is in the order of 1% or less. A spinal tap means that the layer beneath the epidural space becomes punctured causing a spinal fluid leak. In a small number of cases a blood patch procedure is required to seal the hole. If you experience a severe and persistent headache please contact Dr Munglani.

More commonly, some patients may experience low blood pressure or numb bottoms/legs initially and occasionally difficulty in passing urine can occur. All these are a predictable effect of the local anaesthetic and will usually wear off in 24 hours.

Unfortunately no procedure is risk free. Although long-term side effects and complications, including increase in pain are uncommon the possibility cannot be excluded. Short-term side effects of any procedure may include commonly, pain at the site of injection, increase in pain generally and far less commonly infection, bruising, bleeding and injury of body structures with the injection procedure. The chances of any major adverse events after an epidural are in the order of 1 in ¼ million. The risk of long lasting minor neurological event is 1 in 5,000 and the risk of infection is 1 in 2,000.

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What to expect afterwards:

Although some rapid relief of your pain may be noticed due to the effect of the local anaesthetic, it could be several days before the steroid becomes effective. Please remember that it is a good idea to take things easy for the rest of the day and avoid any strenuous activity.

Take your regular painkillers as normal. It is important not to stop any drugs prescribed for pain relief suddenly. You should gradually reduce your medication, as you feel better.

Try to keep on the move about the house but do not do anything too strenuous. As your pain decreases you should try to gently increase your exercise. Simple activities like a daily walk, using an exercise bike or swimming will help to increase your muscle tone and strengthen your back. The best way is to increase your activity slowly.

Try not to overdo things on good days so that you end up paying for it with more pain the following day.

If a severe headache does develop following your injection it is advisable to take some Paracetamol, drink plenty of water and to lay flat. If the headache continues for more than 24 hours, please contact your GP or Dr Munglani.

Dr Munglani will write a letter to your GP and/or referring consultant, advising them of the procedure you have had carried out, and a follow up appointment will be made for you to be reviewed in due course.

Points to Remember:

1. Nothing to eat for 4 hours prior to your procedure but you can have small quantities of clear fluids until the time of the procedure. If you are diabetic please ask Dr Munglani for advice.
2. Please bring your glasses if you need them for reading.
3. Please bring either your actual medication or a list of all current medication (tablets).
4. Continue taking all your regular medication on treatment day.
5. If there is any possibility that you may be pregnant, please inform Dr Munglani as soon as possible.
6. You will be admitted to the hospital you have chosen to attend as a day case patient. You will be discharged after midday on the same day as the procedure (however, if you have been requested to stay overnight, you will be discharged early the following morning).
7. Please ensure that you have somebody to drive you home and that someone is available to stay with you on the evening following your procedure if you are discharged on the same day.
8. Please note that you should not drive for 24 hours following your procedure.

Additional Information:

Having read this leaflet, if you require further information or have any questions, please do not hesitate to contact Sarah Kelly, Dr Munglani's Pain Nurse on 079123 57430.

If you have any administration queries please contact Dr Munglani's PA Sue Sanalidro on 01223 479024