

Injections for Chronic Pain

You will be having a:

Injections for Chronic Pain

- You and your doctor have decided that you need injections to manage your chronic (ongoing) pain. An injection is medication given using a needle.
- Injections can be used to diagnose or treat chronic pain by:
 - › Injecting freezing medication and/or cortisone into a joint:
Cortisone is an artificial version of a natural hormone called cortisol. Cortisone is used to treat inflammation (redness and swelling).
 - › Injecting freezing medication into a nerve with an anesthetic to numb or block the pain
 - › Radiofrequency lesioning (RFG):
A needle is used to place a probe. The probe uses microwaves (like your microwave oven) to heat the nerve. This can deaden the nerve ending for up to 6 months, so that you do not feel any pain.

How well do injections for chronic pain work?

- Injections for chronic pain do not last forever. Some injections only last for 6 months.

- Injections for chronic pain do not work for everyone. Some people will not feel any effect.

Are the injections painful?

- Getting an injection can hurt. Numbing medication and sometimes sedation (medication to make you sleepy and relaxed) can be used to lower the pain.
- It is normal to be sore for up to 7 days (1 week) after an injection as your body heals the injection site (where the needle entered your body).

Common types of injections for chronic pain:

Epidural steroids

Medication is injected into the spinal canal so that the tip of the needle is in the epidural space. This is similar to how pain relief is given for childbirth, but with different medications. Epidural steroids usually work best for a back problem that causes leg pain.

Facet joint injection

Medication is injected into the small joints of the lower back. This usually works best for a back problem that causes back pain and/or hip or thigh pain.

Sacroiliac (SI joint) injection

Medication is injected in the SI joint (large joint in the lower bum). This joint connects the base of the spine to the pelvis. Sacroiliac pain is felt in the lower bum and back of the thigh.

Radiofrequency lesioning (RFG)

Each facet joint in your back has a nerve above and a nerve below. In RFG of the facet joints, a heated needle is injected in the nerves to the facet joints. 2 needles are needed to treat each joint. For people with low back pain, 4 or 6 facet joints may be treated at one time.

How do I get ready for injections for chronic pain?

- **Tell the doctor doing your injection if you are taking a blood thinner. This is very important.**
 - › If you have a back injection while taking a blood thinner, you could get a blood clot in your spine. This could cause paralysis (not being able to move) of your legs, bowel, and bladder.
 - › Your doctor will help you find the right way to balance these risks and keep you safe.

- **Before your injection appointment, you must arrange for someone to drive you home. If you do not have someone to drive you home, your appointment will be cancelled. It is not safe to drive after an injection for chronic pain.**
- **Do not drive for 24 hours (1 day) after your injection.**
- An injection for chronic pain may cause your leg to feel numb or very heavy for 24 hours.

- Take your usual medication(s) on the day of your appointment (except blood thinners as mentioned on page 3).
- You may eat and drink as usual.
- Bring a list of your medications with you to your appointment.

How is an injection for chronic pain done?

- Your appointment will be on the 10th floor of the Victoria building at the VG (Victoria General) site of the QEII.
- When you arrive, register at the desk.
- A nurse will check your blood pressure and review your list of medications.

- You will be asked to change into a hospital gown. **Please keep your underwear on.**
- The doctor will assess you and ask you to sign a consent form. If you do not understand something or have any questions, please ask.
- An intravenous (IV) tube will be put into a vein in your arm using a needle. This is for your safety, in case you have any side effects that need to be treated. It can also be used to give you medication to help you relax.
- We will place a pink antiseptic solution on the injection site (area where the needle will be inserted). Your skin may turn pink from the antiseptic. This is normal, it is not a reaction or an allergy.
- You will be asked to lie on an X-ray table. For most injections, the doctor will use an X-ray machine to guide the needle into the right area. The doctor may use an ultrasound machine instead.
- After your injection, a member of your health care team will take you by wheelchair to the post-recovery area. You will rest here for about 20 minutes.

What are the possible side effects and risks?

- All injections have risks.

- This treatment is not guaranteed to help your pain. You may need another injection. This will depend on your risk, and how long and how much pain relief you get.

Common side effects:

- › Worse pain for a few days
- › Bruising at the injection site
- › Numbness
- › Swelling at the injection site

Rare risks:

- › Allergic reaction
- › Fainting or slow heart rate
- › Bleeding
- › Infection
- › Seizure (uncontrolled movements caused by unusual brain activity) from local anesthetic (freezing medication) getting into your bloodstream
- › Nerve injury causing weakness or numbness in part of your arm or leg – this may get better over months, but may be permanent.
- › Paralysis or spinal cord injury – This is the most serious risk, as you could lose use of your legs, bowel, and bladder for the rest of your life. This is rare—the chance is 1 in 200,000 for some patients and up to 1 in 2,000 for others.

