



Lumbar Epidural Steroid Injection

PATIENT INFORMATION & PROCEDURE GUIDE

Understanding Your Diagnosis

Lumbar radiculopathy, often referred to as "sciatica," occurs when a nerve root in your lower back becomes compressed or irritated. This is frequently caused by a disc herniation, degenerative changes, or spinal stenosis. This irritation leads to the sharp pain, tingling, or weakness that you may feel radiating from your lower back down into your hip, leg, or foot.

The Treatment: Lumbar Epidural Steroid Injection (ESI)

An ESI is a targeted, minimally invasive procedure where a powerful anti-inflammatory medication (steroid) is delivered directly into the epidural space of the lumbar spine.

By reducing the swelling and "calming down" the irritated nerve, this medication helps alleviate your radiating pain and improves your ability to participate in daily activities and physical therapy.

Our Approach: Transforaminal Approach

At Abilene Pain, we utilize the Transforaminal approach for maximum precision. Unlike standard techniques, this method allows Dr. Pugh to deliver medication directly into the "neural foramen"—the specific opening where the irritated nerve root exits the spine. By targeting the exact site of compression, we ensure the anti-inflammatory steroid is placed precisely where it is needed most to "put out the fire" of inflammation and maximize your relief.

Procedure Day Highlights:

- Performed under **Live X-Ray (Fluoroscopy)** for maximum precision.
- We use local numbing medication to ensure a comfortable experience.
- The entire procedure typically lasts about 15 minutes.
- You will be able to walk out and go home shortly after the injection.

Benefits

- Significant reduction in radiating down the leg.
- Reduced need for oral pain medications.
- Improved ability to perform physical therapy.

Recovery

- Return to regular activity the next
- Full relief usually develops over 3 to 7 days.
- A brief follow-up will be scheduled to assess your

Nicolas Pugh, MD | Adrienne Anders, NP | Ted Chaka, PA

Abilene Pain Locations

Main: 1925 Hospital Drive

Chaka: 6819 Memorial Dr. Ste B

Contact Numbers

Main: 325-326-3433

Chaka: 325-468-8096

Online

Email: info@abilenepain.com

Web: www.abilenepain.com



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DISCHARGE INSTRUCTIONS

Procedure Summary: Lumbar Epidural Steroid Injection

You have undergone a Lumbar Transforaminal Epidural Steroid Injection, a specialized procedure designed to treat chronic back and leg pain (sciatica) originating from the lower spine. Unlike a standard epidural, this approach targets the specific nerve root opening (foramen) where the nerve exits the spine. We have delivered a concentrated blend of anti-inflammatory medication and local anesthetic directly to the source of the nerve irritation to reduce swelling and "mute" pain signals.

Activity Restrictions

- **Driving:** No driving for 24 hours if you had IV sedation.
- **Lifting:** As tolerated
- **Exercise:** As Tolerated

Wound Care

- **First 24 Hours:** Leave dressings intact
- **Showering:** Okay to shower
- **Submersion:** Permitted after 24 hours

Pain Management Expectations

- **The Window:** You may feel immediate, temporary relief for several hours due to the local anesthetic.
- **The Flare:** Expect a potential temporary increase in localized soreness or a "bruised" sensation for 2–5 days as the steroid takes effect.
- **Management:** Use ice packs (20 min on/off) for localized soreness.
- **Results:** Peak clinical relief typically occurs between 3 to 7 days post-injection.

Red Flags

- New or worsening leg weakness, numbness, or "**foot drop.**"
- Sudden loss of bowel or bladder control.
- **Fever** >101.5°F, chills, or **drainage at the incision site.**
- **Severe headache** that worsens when sitting or standing.

Follow-Up Schedule

- **1 Month:** Formal functional assessment of procedural efficacy.

Blood Glucose

If receiving a steroid injection, expect a temporary rise in blood glucose levels, which usually resolves within a few days. Diabetic patients should monitor their sugar levels closely for 48–72 hours post-procedure.

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