



## 1. What is a Pain Block?

A Pain Block is an injection that gives temporary relief from pain. It may also help in locating the source of the pain.

A mixture of a local anaesthetic and steroid medication may be injected. Steroids are anti-inflammatory medications.

Pain relief from the injection can be long lasting or temporary.

Pain Blocks performed in medical imaging are done with guidance from imaging machines such as CT. For more information on CT and the risks involved in its use, please read the **CT Patient Information Sheet** (if you do not have this information sheet please ask for one).

## 2. Will there be any discomfort, is any anaesthetic needed?

This procedure will require the injection of local anaesthetic. It is used to prevent or relieve pain, but will not put you to sleep.

## 3. Preparation for the procedure

The medical imaging department will give you instructions on how to prepare for your procedure.

- Please tell the staff if you are or suspect you might be pregnant.
- If you take Aspirin, Warfarin, Clopidogrel (Plavix and Iscover) or Dipyridamole (Persantin and Asasantin) or any other drug that is used to thin your blood ask your doctor/health practitioner if you should stop taking it before the procedure as it may affect your blood clotting.
- List or bring all your prescribed drugs, those drugs you buy over the counter, herbal remedies and supplements.
- Do not drink any alcohol and stop recreational drugs 24 hours before the procedure. If you have a drug habit please tell your doctor.

## 4. During the procedure

Pictures will be taken of the injection site.

The doctor will inject local anaesthetic.

Using CT imaging as a guide the doctor will insert the needle. Pictures are repeated every time the needle is moved.

You must remain as still as possible. At times, you may be asked to hold your breath.

You must let the doctor know if you have any sharp pains in your back or down your limbs.

Iodinated Contrast may be injected to check the needle is in the correct place.

The medication is inserted and the needle is taken out.

If you are having multiple levels of the spine treated then this process will be repeated.

At the end, a dressing will be applied to the puncture site/s.

## 5. After the procedure

Take care when you first stand, as temporary leg weakness can occur.

Staff will discuss with you what level of activity is suitable after your procedure.

## 6. What are the risks of this specific procedure?

The risks and complications with this procedure can include but are not limited to the following.

### Common risks and complications include:

- Bleeding or bruising may occur. This is more common if you take Aspirin, Warfarin, Clopidogrel (Plavix and Iscover) or Dipyridamole (Persantin and Asasantin).
- Backache due to the muscle being aggravated by the insertion of the needle. It is usually mild and temporary.
- Sciatica pain due to the 'pressure effect' from the injection volume on the nerve. It is usually mild and temporary.
- Minor pain, bruising and/or infection from injection site. This may require treatment with antibiotics.
- Failure of local anaesthetic which may require a further injection of anaesthetic or a different method of anaesthesia may be used.
- Nerve damage is usually temporary, and should get better over a period of time.

### Less common risks and complications include:

- Infection, requiring antibiotics and further treatment.
- Damage to surrounding structures such as blood vessels, organs and muscles, requiring further treatment.
- An allergy to injected drugs, requiring further treatment.
- Adverse effects from the injected steroids including insomnia, nightmares and nervousness. This is usually temporary.
- The procedure may not be possible due to medical and/or technical reasons.

### Rare risks and complications include:

- Injury to the spinal cord. This may require surgery.
- Permanent nerve damage with possible paralysis.



- An increased lifetime cancer risk due to the exposure to x-rays.
- Seizures and/or cardiac arrest due to local anaesthetic toxicity.
- Death as a result of this procedure is *very rare*.

### 7. What are the safety issues when you leave the hospital?

*Take care not to injure or bump the area that has been numbed with the local anaesthetic as you will not be able to feel it.*

Go to your nearest A&E (Accident and Emergency) department or GP if you become unwell or have;

- pain, unrelieved by simple pain killers
- unexplained numbness in your legs
- continuous bleeding or swelling at the puncture site
- redness or inflammation at the puncture site
- fever
- other warning signs the doctor may have asked you to be aware of.

### Notes to talk to my doctor/ health practitioner about:

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