



Having a steroid nerve root injection

This leaflet explains what happens during a nerve root injection in the Radiology (X-ray) Department at the Royal Berkshire Hospital. The procedure is carried out by a radiologist (specialist X-ray doctor). Please read this leaflet fully before signing the consent section at the end if you wish to go ahead with the procedure. After reading the information, sign and bring the consent section on page 4 with you to your appointment.

What is a steroid nerve root injection?

This procedure involves an injection of steroid and local anaesthetic into the affected nerve root in your spine. The nerve root is the part of a nerve that branches out from the spinal cord, connecting it to different areas of the body. Where in your lower spine the injection is given will depend on which limb is affected by pain.

Why do I need this procedure?

Your doctor or Community Musculoskeletal Service has referred you for this procedure to help diagnose or treat pain caused by irritation of or pressure on a nerve root. Conditions like a herniated disc or sciatica may cause this pain. The steroid reduces inflammation, and the local anaesthetic provides temporary pain relief.

How long will it take?

Please arrive a few minutes before your appointment time. The procedure itself takes about 20–30 minutes.

What does it involve?

- You will be taken into the X-ray room where the radiologist will talk to you about the procedure, confirm your symptoms and the area to be treated.
- You will lie on your front on the X-ray table and the skin over the injection site will be cleaned with antiseptic.
- A local anaesthetic will be injected into the skin to numb the area.
- X-ray contrast (dye) is injected to confirm the position of the needle tip before the steroid and local anaesthetic injection.
- A fine needle will then be guided to the affected nerve root using X-ray images. Once the correct position is confirmed with the contrast, the steroid and local anaesthetic will be injected around the targeted nerve.
- Despite the local anaesthetic, some people feel mild discomfort, pressure, pins and needles, shooting pain or a replication of their symptoms for a few seconds during the injection.
- The needle is then removed, and a small plaster is placed over the injection site.

Before the procedure

There is no preparation required before you attend for the procedure. However, if you are taking any medications that thin the blood (e.g. apixaban, warfarin, aspirin), you weigh over 30 stone (200kg) or you have any allergies to any medicines, especially iodine, please contact us beforehand by telephoning 0118 322 7991 or email rbft.radiologyadmin@nhs.net. If you have diabetes, see advice on page 3 regarding blood sugar levels.

If you are pregnant or think you may be pregnant, please inform us before the procedure.

Will the procedure hurt?

As with any injection into the skin, you will feel a short, sharp scratch and then possibly an achy feeling during the steroid injection, which lasts less than a minute.

Are there any risks?

Please read this section carefully before signing the consent section.

While this injection (called a fluoroscopic-guided nerve root injection) is a generally safe and commonly performed procedure, like any medical treatment, it carries certain risks, including:

Common risks

- **Mild discomfort at the injection site:** You may experience mild pain or bruising where the needle was inserted. This should go away on its own within a few days.
- Steroid flare (approximately 10% of patients): Some patients experience temporary worsening of symptoms due to irritation from the steroid crystals. This usually occurs within the first 48 hours and resolves on its own. You can take over-the-counter painkillers, such as paracetamol or ibuprofen, to help with the pain.

Uncommon risks

• **Temporary nerve irritation:** You may feel temporary tingling, numbness or shooting pain down your leg or arm (depending on the nerve being treated). These sensations are usually short-lived and resolve on their own.

Rare risks

- Infection (1 in 10,000 cases): There is a very small risk of infection at the injection site or deeper in the limb. Signs of infection include redness, swelling, warmth or discharge at the injection site, fever, or worsening pain after 3-5 days. If you suspect an infection, contact your GP or go to the Emergency Department (A&E) immediately.
- **Bleeding:** Patients on blood-thinning medications or with clotting disorders are at a slightly higher risk of bleeding at the injection site. This risk is minimised by stopping certain medications before the procedure, if advised.
- **Allergic reactions:** Rare allergic reactions can occur to the local anaesthetic, steroid, or iodine contrast dye. Symptoms may include itching, rash, difficulty breathing or swelling. If this occurs, it will be managed promptly by the Radiology Team.

Very rare risks

- **Nerve damage:** In extremely rare cases, there may be direct injury to the nerve, resulting in prolonged numbness, weakness or altered sensation.
- **Spinal fluid leak (dural puncture):** Accidental puncture of the membrane surrounding the spinal cord can lead to a spinal headache. This headache usually resolves within a few days, but occasionally further treatment may be required.

Risks associated with radiation exposure

- This procedure involves the use of X-rays for guidance. The radiation dose is very low and equivalent to a few weeks of background radiation from natural sources. The benefits of the procedure outweigh the minimal risks from radiation exposure.
- **Pregnancy:** Radiation exposure is potentially harmful to an unborn baby.

How effective is the procedure?

While nerve root injections can be very effective for many patients, the procedure may fail to relieve symptoms in 20-30% of cases (up to 3 in 10). If there is little to no pain relief after two weeks, it suggests that the underlying cause of your symptoms may not be related to inflammation around the nerve root and further investigation or alternative treatment may be necessary. If this is the case, your clinical team will discuss next steps with you.

Steroid injections and blood sugar levels

- **Blood sugar levels:** Steroid injections can temporarily raise blood sugar levels, which is a concern for people with diabetes. Please inform your referring doctor about your diabetes management **before the procedure** if you have poorly controlled diabetes.
- Managing diabetes: You may need to adjust your medication or insulin around the time of the procedure. Discuss this with your GP or diabetes specialist to ensure proper management.
- **Temporary effects:** Blood sugar levels typically return to normal within a few days. If symptoms like excessive thirst, frequent urination, or fatigue persist, contact your GP.

Are there any alternative procedures?

There are no alternative options for this procedure but CT scans can be used instead of X-ray to guide the injection.

After the procedure

- We advise against driving home and recommend that you do not drive for 24 hours. Please arrange for someone to collect you or use public transport or a taxi.
- Avoid strenuous activity for at least 24-48 hours.
- You can eat and drink as normal after the procedure.
- The steroid takes about 2-7 days to start working and up to 2 weeks to take full effect. Relief may last for several months, but this varies between patients.
- Your referring doctor will receive a copy of the X-ray report. Your referring doctor will either
 arrange a letter to inform you of your results or a follow up appointment in the outpatient
 clinic.

Contacting us

Radiology Department Tel 0118 322 7991. Email: rbft.radiologyadmin@nhs.net.

Consent

By signing this form, you confirm that you have read and understood the information provided in this leaflet regarding the fluoroscopic-guided nerve root injection. You consent to the procedure being performed and understand the associated risks, benefits, and alternatives.

Please ensure that you have fully understood the details of the procedure and have had sufficient time to consider your options before signing. If you have any further concerns, you may contact the Radiology Department (see page 3) or your referring doctor before your appointment.

Signature:			
Print name	:		
Date:			

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RAD 0140

RBFT Radiology Department, May 2025. Next review due: May 2027.