

Original Research Paper

Orthopaedics

EFFICACY OF EPIDURAL STEROID INJECTION IN LUMBOSACRAL RADICULOPATHY

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ABSTRACT Epidural injections with or without steroids are used extensively in the management of chronic spinal pain. However, evidence is contradictory with continuing debate about the value of epidural steroid injections in chronic spinal syndromes. The objective of this systematic review is to determine the effectiveness of epidural injections in the treatment of chronic spinal pain.

KEYWORDS: Epidural steroid injection; Low back pain; Radicular pain

BACKGROUND:

Epidural steroid injections (ESI) have been in use for management of low back pain and radiculopathy, however, there is still variation in literature regarding their utility and effectiveness. We wanted to study the usefulness of ESI for pain relief in a developing country where resource constraints are a challenge in seeking surgical care.

METHODS:

It was a retrospective review of patients . After obtaining ethical exemption data, including demographics, symptoms, number of injections, extent of pain relief and duration of relief were recorded on a performa. All patients had been administered ESI with local anesthetic Bupivacaine by a single orthopaedic surgeon in the operating room under fluoroscopy guidance.

RESULTS:

Sixty three patients were included in the study. Low back pain was common symptom in all patients and Forty nine patients (77.8%) had radicular symptoms as well, most commonly in the L5 distribution. Forty five patients (71.4%) had significant relief in pain after ESI. The median duration of symptom relief was 7 months. Only two patients had complained of headaches requiring medical attention following injections. We did not find any significant predictors of pain relief after ESI in our study.

CONCLUSION:

We recommend ESI as an effective tool of pain management for low back pain and radiculopathy. It can be offered to patients who are not willing for surgery or have significant medical ailments increasing general anesthesia risks, and also for patients in low- and middle-income countries as a cost-effective treatment.

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