If you have been living with lower back pain that runs down your leg (also known as radicular lumbosacral pain) this fact sheet will provide you information for when you and your neurologist talk about the use of epidural steroid injections to decrease your pain and improve your quality of life. The information in this fact sheet does not talk about or recommend the use of epidural steroid injections for cervical pain (pain in the upper back, neck, and upper limb).

Neurologists from the American Academy of Neurology (AAN) are doctors who identify and treat diseases of the brain and nervous system (made up of the brain, spinal cord, and nerves). This is a summary of the AAN’s evidence-based guideline reviewing all available evidence on the effect of epidural steroid injections on radicular lumbosacral pain.

Will epidural steroid injections relieve or stop my pain?
When compared to injections without steroids, there is weak proof that epidural steroid injections may result in some improvement in radicular lumbosacral pain in the short term, when assessed between two and six weeks after the injection. There is good scientific proof that, on the average, epidural steroid injections result in no improvement in pain beyond three months. There is also proof that between three and six months, the pain may be no different or return and be worse than before the injection, and that pain at 12 months is no different, compared to epidural injections performed without steroids.

Will epidural steroid injections help me put off or avoid having back surgery?
Although the results of the scientific studies are not all in agreement, the better-designed studies show that epidural steroid injections do not affect the need for back surgery. Where epidural steroids are thought to have prevented the need for surgery, there is not enough information to conclude if surgery was avoided due to the treatment effect of injected steroids, or due to patient belief that the injected steroids made a difference, or because the treatment “bought time” for back pain to improve on its own. This information needs to be viewed in light of the lack of general agreement regarding the role for surgery in the long-term management of back pain.

What are the risks or side effects for epidural steroid injections?
The risk is rather low and serious side effects rare. The most common complication is a temporary headache. Increased back pain can occur as well. Among the rare complications are infections and excessive bleeding.

CONCLUSION
The guideline writers note that epidural steroid injections may provide temporary relief in back pain that runs down the leg. Patients should understand that the benefits are small and won’t last long. Patients should also know that having the injections will not change the average limitation of function and the need for surgery.

This is an educational service of the American Academy of Neurology. It is designed to provide members with evidence-based guideline recommendations to assist with decision-making in patient care. It is based on an assessment of current scientific and clinical information and is not intended to exclude any reasonable alternative methodologies. The AAN recognizes that specific patient care decisions are the prerogative of the patient and the physician caring for the patient, based on the circumstances involved. Physicians are encouraged to carefully review the full AAN guidelines so they understand all recommendations associated with care of these patients.

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