



PAINLESS

PATIENT FACTSHEET

TITLE

Disc Injections for Spinal Disc Pain

SUMMARY

A disc injection is a diagnostic procedure used to determine whether the intervertebral discs are contributing to your pain. This factsheet explains how and why you may consider a disc injection procedure, as well as the potential risks and recovery requirements.

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SPINAL DISC PAIN

The intervertebral discs are the rubbery padding that sit between each bony vertebra. They reduce friction and allow for mobility of the spine.

Pain can arise from discs due to inflammation, injury or degeneration. Pain associated with the discs can be felt in the back and, sometimes, the legs.

DIAGNOSTIC PROCEDURES

Imaging studies can't reveal disc pain. For this reason, a diagnostic procedure must be performed to confirm the diagnosis. The most commonly used procedure for diagnosing disc pain is a disc injection.

INTERVENTIONAL PROCEDURES

Once we have determined whether a significant proportion of your pain is coming from the discs, we can use an interventional procedure to provide longer lasting relief. Traditionally, a spinal fusion surgery has been used for disc pain. However, spinal fusion surgery is highly invasive and has a low success rate.

At Painless, we prefer to treat disc pain with physiotherapy and lifestyle changes. These approaches have been shown to be more effective than fusion surgeries, with significantly fewer long-term risks.

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DISC INJECTIONS

A disc injection is a diagnostic procedure used to determine whether the intervertebral discs are contributing to your pain. Depending on your requirements, disc injections can be performed at a single level (into one disc) or multiple levels (into multiple discs).

The injections contain a mixture of local anaesthetic and long-acting steroids. The local anaesthetic numbs the discs for a few hours, while the steroids gradually decrease inflammation over four to six weeks.

If your pain reduces by 50% or more, we can conclude that this percentage of your pain is originating from the disc(s).

The risk of infection following disc injection is much higher than it is with other spinal pain procedures. For this reason, we prefer to use other therapies whenever possible. As a preventative measure, we will also administer prophylactic antibiotics at the time of your procedure.

HOW IT WORKS

1. You are placed under light anaesthetic sedation.
2. Imaging is used to place the needle into the disc.
3. The anaesthetist will reduce your sedation so you can answer questions

while we inject the local anaesthetic into the disc.

4. If you experience your usual pain when we inject into the disc, we can determine that a portion of your pain is arising from that disc.
5. You are then put back under sedation while we inject the steroid into the disc.
6. The procedure is completed, and you are moved to the recovery room.

EFFECTS

The local anaesthetic will numb the disc for a few hours. The steroids will take effect after 24 hours. Their impact will gradually over the following four weeks. The steroids work by reducing inflammation in the affected area. Some people get medium to long term relief – however, this is considered a fortuitous outcome.

SIDE EFFECTS & RISKS

Common Side Effects: Local tenderness, bruising or swelling over the needle site. Low blood and facial flushing. Heavy legs or trouble passing urine for several hours. Increased pain for several days (occasionally weeks). Possible increased sensitivity to pain that may last for one to four weeks.

Rare Side Effect: The following are very rare but serious complications. If these happen to you, please call our

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office or the hospital where the procedure was performed. If we are unavailable, go immediately to a hospital emergency department.

Infection of the disc, called discitis, can cause symptoms such as significant worsening of your pain, fever, chills or shakes. Immediate treatment with intravenous antibiotics is essential. Left untreated, discitis can cause paraplegia or death.