

# Paravertebral block

An information guide



# Paravertebral block

If you are on blood thinning medications such as Warfarin, Nicoumalone (Sinthrome), Aspirin, Clopidogrel (Plavix), Ticlopidine (Ticlid) then please contact the Booking and Scheduling Department on 0161 778 2288.

## What is a paravertebral block?

It is an injection of steroid (anti-inflammatory) medication and possibly a local anesthetic (medication to temporarily numb the nerves) into the paravertebral space.

The paravertebral space is a small area that lies about 4 inches on either side of the vertebrae (bones which make up the spine). The space at the back of the chest is called the thoracic paravertebral space and lower down it is called the lumbar paravertebral space.

Nerve fibres carrying pain signals to the spinal cord and the brain pass through this space. Other nerves called sympathetic nerves, which control temperature, blood flow, sweating and the action of internal organs also pass through this space.

A mixture of steroids (anti-inflammatory medication) and possibly local anesthetic is used for the injection. The local anaesthetic acts on the nerves and temporarily blocks their function. The steroid decreases inflammation and improves the chances of longer term relief. The anti-inflammatory injection should not be confused with the anabolic steroids that athletes have used for building up body mass.

Unfortunately no company actually produces a steroid specifically licensed for use in the paravertebral space. However, using standard steroid preparations, paravertebral injections have been used for many years/decades and are considered to be very safe by the national and international pain organisations.

## **Why is the injection given?**

The block or injection is done to help to test and treat if the pain is due to the nerves in your chest, abdomen or leg.

## **How is the injection done?**

You will be asked to come to the Day Services Unit.

A cannula (plastic tube) will be placed at the back of your hand. The procedure is done under local anaesthetic (medication to numb the skin). In some circumstances sedation (medication to relax) and other medication such as pain killers can be given through the cannula.

You will be asked to either lie on your side or sit up. Local anaesthetic solution is injected to numb the skin and a thin needle is introduced to administer the injection. Sometimes a special dye is used in combination with an x-ray machine to confirm the correct position of the needle.

A mixture of steroid and possibly local anaesthetic medication is then injected into the paravertebral space and the needle is removed.

## **What are the beneficial effects?**

The injection may reduce pain, redness and sweating in the upper or lower limbs and may help in improving mobility.

Injections given in the thoracic (chest) region are useful for the management of pain in long-standing angina (chest pain) which is not responding to other treatment.

## **What are the possible immediate effects after the injection?**

If the injection is in the thoracic (chest) region, your arm may feel warm and heavy. Your eyesight may be a little blurred, your voice may become hoarse and your nose may feel a little blocked up.

If the injection is in the lower back, your leg may feel slightly warm.

## **What are the side effects?**

Typically there is some pain in and around the injection site after the procedure. It is usually self limiting and easily controllable with painkillers. There may be some bruising and tenderness on your skin.

Infection, bleeding or excessive spread of the numbness and nerve damage are other extremely rare side effects, which may require special treatment.

## **Potential side effects with use of steroids**

There are very few side effects associated with single or occasional use of steroid injections.

Hot flushes, feeling sick or having mild abdominal pain are sometimes felt. Control of diabetes may be difficult and menstrual irregularities may occur. These settle in a few days.

Repeated and frequent use has the potential to lead to more serious side effects, but it must be kept in mind that the dose used in the injection is very small compared to those people who take steroids by mouth on a daily basis for conditions such as asthma or arthritis.

In those circumstances, side effects such as increase in appetite, weight gain, thinning of the bones (osteoporosis), thinning of the skin, eye problems (glaucoma, cataract), weakness, depression, rounded face, high blood pressure and water retention have been seen. Oral contraceptive pills may alter the level of steroids in the blood.

## **Advice/precautions**

- You will be required to stay in the hospital for sometime after the procedure
- If there is excessive or persisting numbness, you may be required to stay in hospital overnight
- A follow-up appointment will be arranged so that the doctor or nurse can review the effects of the block
- You should carry on with your normal activities, try to increase the exercises and aim to reduce your painkillers if the effect of the injection appears to be successful
- If there are any concerns or queries please contact the pain clinic.

**It is very important that you inform the doctor or secretary in the pain clinic at least one week before the injection if:**

- You are allergic to any medications
- You have an infection near the injection site
- You have had a recent steroid/cortisone injection by another doctor or nurse, or if you are on regular steroid joint injections
- You think you may be pregnant
- You are a diabetic on insulin. Your blood sugar may be difficult to control for a few days, tending to be high
- Caution should be exercised if you have had a recent heart attack or vaccination.

## **Contact Details:**

### **Oldham**

Day Surgery - 0161 627 8212

Pain Secretary - 0161 656 1211

### **Fairfield**

Day Surgery - 0161 778 2503

Pain Secretary - 0161 778 3622

### **Rochdale**

Day Surgery - 01706 517132/517133

Pain Secretary - 01706 517705

### **NMGH**

Day Surgery - 0161 720 2240

Pain Secretary - 0161 720 2520



**If English is not your first language and you need help, please contact the Interpretation and Translation Service**

Jeśli angielski nie jest twoim pierwszym językiem i potrzebujesz pomocy, skontaktuj się z działem tłumaczeń ustnych i pisemnych

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**For general enquiries please contact the Patient Advice and Liaison Service (PALS) on 0161 604 5897**

**For enquiries regarding clinic appointments, clinical care and treatment please contact 0161 624 0420 and the Switchboard Operator will put you through to the correct department / service**

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