



CT guided nerve block injection

This factsheet provides information about having a CT guided nerve block injection. It includes the benefits, risks, any alternatives and provides information on what you can expect when you come to hospital. If you have any further questions, please speak to a doctor, physiotherapist or nurse caring for you.

What is a CT scan?

CT stands for computerised tomography. A CT scanner takes a series of pictures of your body using x-rays. The pictures show cross-sections or slices of your body. They are put together by a computer and can be viewed on a screen. The scan shows a very detailed image of the inside of your body.

What is a facet joint or nerve block injection?

Facet joint or nerve block injections are performed to treat pain – most commonly in the back and legs. The effect of these injections is different for each individual.

The procedure involves an injection either directly into the joint or to the path of the small nerve which supplies sensation to the joint. The injection consists of a mixture of local anaesthetic (to numb the area) and corticosteroid (steroid). The steroid injected reduces inflammation at the site which reduces pain and other symptoms caused by inflammation.

The procedure takes place in the CT suite because the CT scan is used to guide the needle precisely to the right area that needs to be treated.

What are the benefits of having a CT guided nerve block injection?

A CT guided nerve block injection can help alleviate the pain related to the nerves in your neck, lower back or legs.

What if I no longer have pain?

This procedure may no longer be necessary or of benefit to you if your pain has disappeared or has become more manageable. If this is the case please discuss further with the referring clinician or bookings department before your appointment on 01851 708224.

What are the risks of having a CT guided nerve block injection?

As with x-rays, CT scans use radiation. The dose of radiation used is very small and the benefits of the procedure are believed to outweigh any risks. However, if you are, or think you could be, pregnant or have had an allergic reaction to corticosteroids or local anaesthetic in the past, then you must tell your referring clinician or the x-ray team.

This procedure is well-established and safe when performed in a controlled setting. However, as with any injection there are risks, side effects and a possibility of complications.

Risks include infection, worsening of symptoms and bleeding. The most common side effect is temporary discomfort and numbness in the area injected. Side effects related to the steroid are very rare when given as a single dose and include: fluid retention, weight gain, increased blood sugar (mainly in people with diabetes), raised blood pressure and mood swings.

Please bear in mind that your specialist/treating clinician has recommended this procedure because they think that the potential benefits of an injection outweigh any potential complications. If you have any questions or concerns, please do not hesitate to speak with your clinician.

Are there any alternatives?

Your specialist feels that a CT guided nerve block injection is the best option for you. A fluoroscopy (x-ray) guided nerve block injection was previously used but this gave a higher dose of radiation and was not as accurate.

Giving my consent (permission)

We will ask for your consent to have a CT guided nerve block injection as we want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves. If you would like more information about our consent process, please speak to a member of staff caring for you.

How can I prepare?

Please contact your referring clinician, if you are taking any antiplatelet medicines (for example, aspirin, clopidogrel or ticagrelor) or any medicines that thin the blood (for example, warfarin, apixaban, rivaroxaban), as these may need to be withheld for a few days before the procedure.

The procedure may be cancelled if these medications have not been stopped for long enough.

What do I need to wear?

Metal fastenings like zips, poppers and hooks and eyes will show up on the scan, so we will ask you to change into a hospital gown.

What happens when I arrive?

When you arrive in the CT department (located within the X-ray Department) you will be asked to fill out a CT safety checklist in the waiting room.

This is so we can determine if there are any allergies or other medical reasons why you can't have scans to identify exactly where the injection will go. The clinician will explain the procedure and ask you to sign the consent form.

Coronavirus measures

Given the current COVID-19 pandemic, there are measures in place in our hospitals and at all

healthcare appointments to ensure the safety of you, other patients and our staff.

You are asked to:

- please arrive at your appointment on time
- attend alone where possible, unless you require support
- not attend your appointment if you have any symptoms of COVID-19, if you have tested positive for COVID-19, or if you have been asked to self isolate by Test and Protect or via the Protect Scotland app.

You will be required to follow our safety instructions at our premises. For example, you must wear a clinical face mask on entry to the Hospital (which we will provide) unless you are medically exempt. If you are medically exempt, you must present a Scottish Government Exemption Card (visit www.exempt.scot or tel. 0800 121 6240 for details of how to get one].

You will be required to hand sanitise at several points when you attend, including on entry to the premises.

You will also be required to keep a safe two metre distance from others at all times, with the exception of when one of our clinicians is providing direct clinical care, or an examination.

If you have COVID-19 symptoms, you must immediately self-isolate and book a test (tel. 01851 601151 or email: wi.covid19queries@nhs.scot) Please remember FACTS and stay safe.

What happens during the procedure?

The scanning machine is like a large hoop. You will need to lie on a motorised bed. This moves slowly through the hoop as the scan is taken. The CT scanner is not enclosed.

If the nerve block injection is on your lower back (lumbar spine) we will ask you to lie on your front. An external marker will then be placed over the affected area and a limited scan will be taken of that area to find the correct position for the injection. The skin will then be marked and the area cleaned. After this it is very important that you do not move until after the injection has been given.

The clinician will then inject a small amount of local anaesthetic to numb the area. Once this has taken effect, they will place a longer needle into the site and another scan is taken. If the needle needs repositioning then a further scan will be taken.

Once the clinician is happy that the tip of the needle is in the correct place, the injection will be given. This may briefly cause a strange and uncomfortable stretching sensation.

How long will the procedure take?

The procedure usually takes between 30 and 40 minutes. You will need to stay in the CT department for another 30 minutes or so after your injection so that we can make sure you feel comfortable enough to leave the department.

We will try to keep to your appointment time but occasionally we are delayed. We will let you know if there is a delay.

What happens afterwards?

Immediately after the nerve block injection, you may feel that your pain has gone or is significantly

reduced. This is due to the local anaesthetic and will last for a few hours. You may resume normal activity as soon as you feel able. However, you may feel numbness and tingling on the affected side for up to 12 hours after the procedure. For this reason you **must not** drive for 12 hours after the procedure.

After the local anaesthetic has worn off you may experience a worsening of your usual symptoms. This is due to the mechanical process of needle insertion, as well as an initial irritation caused by the steroid. This may last for a couple of days. You should start noticing pain relief on the third or fourth day after your procedure when the steroid begins to take effect.

If pain persists beyond this time, an anti-inflammatory drug such as ibuprofen can be very effective at relieving the pain.

Notes

(Please write any notes or questions you may have below)

Further information

For further information please contact:

- Innes Morton, Extended Scope Practitioner, Western Isles Hospital, tel. (01851) 704704
- Radiology Department, Western Isles Hospital, tel. (01851) 708224

We are listening - how did we do?

We welcome your feedback, as it helps us evaluate the services we provide. If you would like to tell us about your experience:

- speak to a member of staff
- visit our website: www.wihb.scot.nhs.uk/feedback or share your story at: www.careopinion.org.uk or 0800 122 31 35
- Tel. 01851 704704 (ext 2408) on a Tuesday and Friday afternoon between 1pm and 4pm.

Disclaimer

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