Steroid injections for back and neck pain are usually not necessary but here are some general recommendations.

Steroids are powerful drugs that can weaken spinal bones, muscles and cause other side effects if used too frequently. So care for neck or back problems should focus on physical treatments first. Steroid injections should only be considered if the physical treatments are not progressing as expected. As a guideline, prior to considering any injection, 4 to 6 weeks of exercise care should be completed.

A STEROID INJECTION CAN MAKE SENSE:

- For diagnostic purposes
- If justified by patient history
- For physical exam
- For imaging studies
- For help in guiding further treatment

If there is radiating pain into the arms or legs can a steroid can be justified by referral to a specialist to perform the procedure. Specialists include orthopedic surgeons, neurologist, anesthesiologist, physiatrist or a radiologist.

There’s no definitive research to dictate frequency of epidural steroid injections. If no improvement is seen after a first injection, a second injection is occasionally recommended. If that’s not helpful, no further injections should be used - unless needed to support physical treatments. In that case, a limit of three injections per year is generally considered acceptable.

WHEN A STEROID INJECTION CAN PROVIDE TEMPORARY RELIEF:

- When there is inflammation or damage to a nerve, usually in the neck or the low back, it can help a patient engage in exercise therapy.

- In cases of spinal stenosis, which can cause pain in the buttocks or legs while walking. An injection can relieve pain to allow for exercise therapy.

Questions? Text: #IQuestion or call 1.800.531.0987