

Epidural injections for lumbar back pain

CRITERIA BASED ACCESS

Lumbar interlaminar, transforaminal and caudal epidural injections for adult patients with radicular pain are commissioned when the following criteria are met:

- The patient has radicular pain (below the knee for lower lumbar herniation, into the anterior thigh for upper lumbar herniation) consistent with the level of spinal involvement;

OR

- There is evidence of nerve-root irritation with a positive nerve-root tension sign (straight leg raise-positive between 30° and 70° or positive femoral tension sign); AND
- Symptoms persist despite some non-operative treatment for at least 6 weeks (e.g. analgesia, physical therapy, rest etc)

Patients may receive up to three injections to diagnose and achieve therapeutic effect. If therapeutic effect is achieved, patient may receive up to six injections in total, minimum 2-3 months apart as part of a comprehensive pain management programme (including physiotherapy, psychological support, medication and patient education).

Occasionally, epidural injections may be the only effective treatment for a cohort of patients. These patients may be considered for prior approval for further epidural injections if they demonstrate sustained benefit from the procedure objectively evidenced and

- must have participated in a comprehensive back pain programme including psychology and physiotherapy e.g Coping with pain course and
- must have been considered for denervation procedures and
- must have had a surgical review and must participate in self directed physiotherapy.