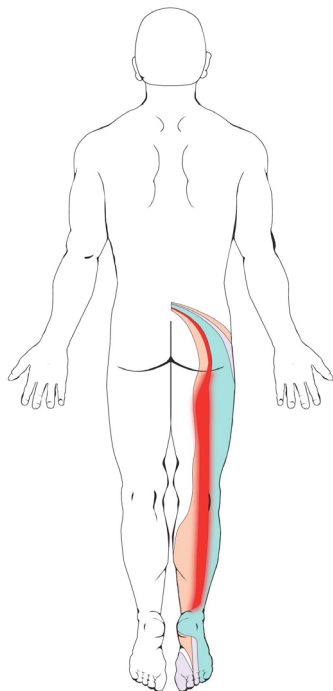
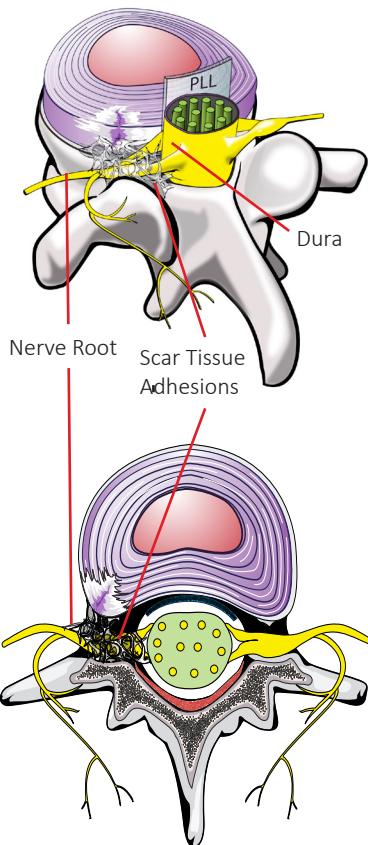


LUMBAR EPIDURAL LYSIS OF ADHESIONS

For Low Back & Leg Pain



A lumbar epidural lysis of adhesions (LOA) is an outpatient procedure for treating low back and leg pain.

What are epidural adhesions?

Adhesions develop from scar tissue. They can adhere to the nerve roots so the nerves cannot move normally. This can cause severe back and leg pain.

The dura is a protective covering of the spinal cord and its nerves. The space surrounding this dura is called the epidural space. When an adhesion forms in the epidural space it is called an epidural adhesion. If that epidural adhesion forms in the lower back area, known as the lumbar region, it is called a lumbar epidural adhesion.

How do epidural adhesions form?

The lumbar area of the spine has five bones, called vertebrae. Soft discs found between these vertebrae cushion them, hold them together, and control motion. If a disc tears, chemicals inside may leak out. If this happens over a long time, an epidural adhesion can form.

Adhesions may also develop after surgery. In low back surgery, scar tissue often forms around the nerves of the low back. An adhesion can develop from this scar tissue, preventing movement of the lumbar nerves and causing severe leg pain.

Lysis means breaking up the scar tissue so it no longer causes tissues to stick together. This can relieve your pain.

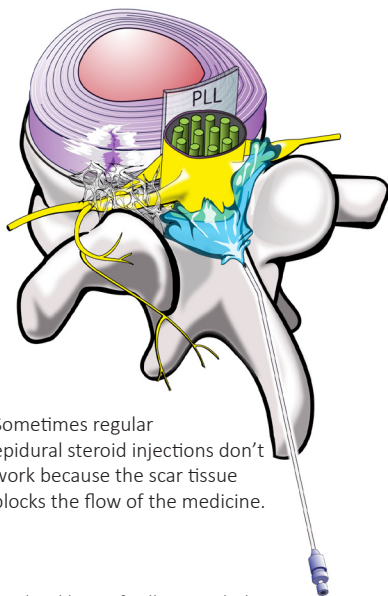
How do I know if I have an epidural adhesion?

If you have constant pain in one or both of your legs and you have had it for a long time, you may have an epidural adhesion. If you have had low back surgery you may also have an epidural adhesion.

Common tests such as simple MRIs and CT scans may show disc bulges and nerve root compression, but they do not always show scar tissue. Lumbar epidural injections can help to determine what is causing your pain, but an MRI with contrast is usually needed to see scar tissue. The contrast makes scar tissue more visible.

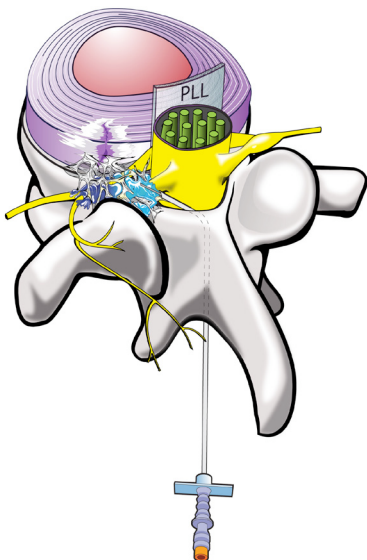
What is an epidural LOA procedure?

In a lumbar epidural LOA procedure, several medications are injected into the epidural space. A local anesthetic (numbing medicine) is used to decrease pain. A corticosteroid (anti-inflammatory medicine) is used to reduce inflammation. Other medicines may be used to help break up the scar tissue. The injections are done through an opening in your tailbone.



Sometimes regular epidural steroid injections don't work because the scar tissue blocks the flow of the medicine.

Epidural lysis of Adhesions helps break soften and break down the scar tissue to decrease nerve inflammation.



What happens during the procedure?

The procedure may start with IV (medicine given intravenously) to help you relax. A local anesthetic may be used to numb your skin.

The doctor will then insert a small needle directly into the epidural space. Fluoroscopy, a type of x-ray, is used to ensure the safe and proper position of the needle. Dye is injected to make sure the needle is at the correct spot.

Once the doctor is sure the needle is correctly placed, the medicine will be injected.

What happens after the procedure?

You will be monitored for up to 30 minutes after the injection. When you are ready to leave, the clinic will give you discharge instructions. You will also be given a pain diary. It is important to fill this out because it helps your doctor know how the procedure is working.

It may help to move your back in ways that hurt before the injection, to see if the pain is still there, but do not overdo it. Take it easy for the rest of the day. You may feel immediate pain relief and numbness in your back and leg for up to six hours after the procedure. This tells you the medication has reached the right spot.

Your pain may return after this short pain-free period, or may even be a little worse for a day or two. This is normal. It may be caused by needle irritation or by the corticosteroid. You can usually return to work the day after the injection, but always check with your doctor.

How long can I expect pain relief?

Sometimes you may have several months of pain relief, and then more treatment is needed. Other times, you will have long-term pain relief. If your pain is caused by injury to more than one area, only some of your symptoms will be helped by a single procedure.

This pamphlet is for general education only. Specific questions or concerns should always be directed to your doctor. Your doctor can explain possible risks or side effects.

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