Improved Function and Sustained Pain Relief Following Transforaminal Epidural Steroid Injections

Kyle Wentz DO, Nasser Ayyad DO
UT Southwestern Medical Center

Case Diagnosis

Severe Multilevel Lumbar Stenosis With Radiculopathy And Neurogenic Claudication

Case Description

A 72 year old male presented to clinic with a two month history of insidious low back and left leg pain. The pain radiated to his left posterolateral calf and inner thigh with associated numbness and tingling. He described the pain as 9 out of 10 with ambulation. He stated inability to walk more than 50 meters due to pain. His initial Oswestry score was 36. His initial PROMIS-29 physical function and pain interference scores were 9 and 15 respectively. He was taking NSAIDS and Gabapentin with mild relief of the pain.

Lumbar Spine Exam: Increased lumbar lordosis with antalgic gait. Pain with thoracolumbar rotation, flexion, or extension. Positive left straight leg raise. Impaired sensation to left lateral foot to soft touch. Bilateral Patella and Achilles DTRs 1+. Strength 5/5 bilaterally.

Lumbar Spine MRI: Left severe neuroforaminal narrowing with probable compromise of the left L3 and S1 nerve roots.

Discussions

Given his L3 and S1 radicular pattern the patient received left L2-3 and L5-S1 transforaminal epidural steroid injections one time. Flow migrated to L3-4 and L4-5 levels from these two injection levels. To avoid iatrogenic Cauda Equina syndrome the injection was not performed at L4-5, given its severe narrowing.

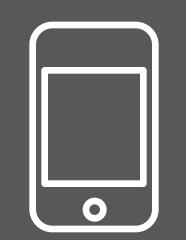
After the injections, he discontinued all pain medications. At two week and two month followups he reported 100% relief of pain that was 0 out of 10 on VAS pain scale, reduced from baseline pain score of 9 out of 10 prior to injections. Given his relief he deferred formal physical therapy. He continued pool exercises only. On physical exam he exhibited full and non-painful range of motion of his lumbar spine.

Conclusions

He was seen in clinic by neurosurgery who recommended continuing conservative management without surgical intervention. This case demonstrates sustained complete pain relief and improved function following epidural steroid injections in a patient with severe lumbar stenosis with neurogenic claudication.

Transforaminal Epidural Steroid Injections providing sustained pain relief and improved function in a patient with severe lumbar stenosis





Take a picture of the QR code with the link to our abstract

Lumbar Spine T2 Weighted Sagittal MRI



Initial Promis-29 Physical Function

Without	With a	With	With
any	little	some	much
difficulty	difficulty	difficulty	difficulty
			X
			X
			X
			X
	any	any little	any little some

