

MDC Pain Centres Namibia

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Epidural Blood Patch

An epidural blood patch is used to relieve headaches caused by lumbar puncture (spinal tap). Sometimes, after a lumbar puncture, spinal fluid can leak, decreasing the pressure of the spinal fluid. This low pressure causes a headache. A headache after a lumbar puncture can cause severe pain with standing or sitting, and no pain with lying flat. If you think you have a low-pressure headache, your doctor may first instruct you to rest, lie flat, and drink plenty of fluids. If this does not help, your doctor may refer you for an epidural blood patch.

What is an epidural blood patch? An epidural blood patch places your own blood in the spinal canal close to the same site where the lumbar puncture was performed. This should seal the leak of spinal fluid and relieve the headache. An EBP is an injection of your blood into the epidural space. The epidural is not an injection into the spinal cord itself. The spinal cord and spinal nerves are in a “sack” containing clear fluid (cerebrospinal fluid). The area outside this “sack” is called the epidural space.

Why is it done? There are certain conditions under which patients will have had injections in the spinal column. Examples include an epidural during labour, a diagnostic spinal tap, CT myelogram etc. A small number of patients will experience a severe headache after these procedure, usually worse with standing and better when lying down. This is due to a persistent leak of spinal fluid into the epidural space. Although the headache itself is harmless, it can be very severe and very debilitating. The injection of a freshly drawn sample of your own blood into the epidural space “plugs the leak” and the headache goes away.

Will it hurt? All of our procedures begin by injecting a small amount of local anaesthetic through a very small needle. It feels like a little pinch and then a slight burning as the local anaesthetic starts numbing the skin. After the skin is numb, the procedure needle feels like a bit of pressure at the injection site. If you experience any pain during the procedure, your doctor will inject more local anaesthetics as needed.

How is it done? It is typically done with you lying on your stomach. Your blood pressure and oxygen levels will be monitored. The skin in the back is cleaned with antiseptic solution. A separate area where a good vein is available is also cleaned with antiseptic solution. A small intravenous catheter is placed in the vein. After your doctor has placed the epidural needle near the affected area, your nurse will draw about 20 cc of blood from your vein and give it to the doctor. The doctor will then gradually inject the blood until you feel severe pressure in the back.

What should I expect after the injection? Immediately after the injection, you may feel pressure in the back. This is due to the effect of the blood in the epidural space. After resting for about 30 minutes, you will be asked to stand up. Typically, most patients experience significant relief immediately. After a few hours, your body will have had a chance to replenish the lost spinal fluid and your headache should continue to get better.

How long does it last? The epidural blood patch is permanent. A small number of patients (usually less than 10%) may need to have a second blood patch

What are the risks and side effects? Overall, this procedure has very few risks. Commonly encountered side effects are increased pain from the injection (usually temporary), inadvertent puncture of the “sack” containing spinal fluid (may not relieve your headaches), infection, bleeding, nerve damage, or no relief from your headache.

Getting Ready

- You cannot take aspirin (this includes baby aspirin) for 1 week before the blood patch. If you take aspirin for your heart or blood vessels as prescribed by your doctor, you will need a written note from your doctor saying it is ok to stop.
- You cannot take Plavix® (clopidogrel) for 10 days before the blood patch. You will need a written note from your doctor saying it is ok to stop taking your Plavix®.
- Call your family doctor if you take blood thinners such as heparin or Coumadin® (warfarin). Your blood tests must be normal before we do the blood patch.
- You cannot take anti-inflammatory drugs 1 day before the blood patch. These include: Advil®, ibuprofen, edtodolac, indomethacin, naproxen, Aleve®, Feldene®, diclofenac, Mobic®, and piroxicam. You do not need to quit taking Celebrex®. If you are not sure about the drugs you are taking, ask your doctor.
- You cannot take herbals, fish oil, or Vitamin E for 3 days before the blood patch.
- You must be healthy on the day we do the blood patch. You cannot have a cold, flu, rashes, or other infections. If you are feeling sick or have a cold please let us know. Please try to call 24 hours or more before the procedure.
- Do not eat solid food for 6 hours or drink liquids 2 hours before your patch. You may take a sip of water if you need to take medicine.
- Take your usual medicines unless you are told not to.
- Tell us if you have any drug allergies or if you have had problems with X-ray dyes (contrast dyes), iodine, Betadine, seafood, shellfish, latex, or local anaesthetics (numbing medicine).
- Make sure someone is able to drive you home. You can not drive yourself home.
- Call (021) 683 7620/1 if you have any questions, or want to cancel the blood patch.

What to Expect

You will be brought to a prep room. You will change into a hospital gown and 2 IVs will be started in your arms. One is for medicines and fluids, and the other is for drawing your blood. You will be asked questions about your health history, current health, and current medicines. You will also fill out a pain diagram. We will go over the consent form with you. We will explain what we are going to do, why, and any side effects that could happen. If you have any questions, they will be answered at this time. Your family and friends can be with you before and after the blood patch, but not in the procedure room.

We will place the blood patch in an operating room with an X-ray machine. You may be given a drug to relax you, if needed, but you will remain awake.

You will lie face down on a table. We will watch your blood pressure, heart rate, and how well you are breathing while the blood patch is placed. We will use pillows to help position you and make you comfortable. Your back will be washed and covered with a sterile drape. Using the X-ray machine, your doctor will guide a thin needle into your back very close to where the lumbar puncture was performed. Your doctor will inject some X-ray (contrast) dye through the needle to make sure that the needle is in the right place. X-rays will be taken. A small amount of your blood will be drawn and immediately injected into your back. You will be asked to lie very still. If you feel any back or leg pain, let your doctor know. The procedure takes about 30 minutes.

After the blood patch is placed, you will go to the recovery room where nurses will watch you for about 45 min. You will lie flat at first, and then you can slowly sit up. You will be given IV fluids. The nurses will make sure you have something to eat and drink. Before you go home, you will be checked briefly to make sure you are doing OK. Most of the time, your headache will be gone by the time you leave.

You may not drive for 24 hours as you have had sedation and this will impair your reaction time and judgment. Your insurance will be voided if you have an accident..

Once home, you should take it easy. Your back may feel stiff and sore for a few days. Avoid any heavy lifting or intense physical activity for 24 hours. Drink plenty of fluids. No swimming or tub baths for 24 hours. Taking a shower is OK.

Watch for signs of infection

- Fever greater than 38° C by mouth for 2 readings taken 4 hours apart
- Increased redness, swelling around the blood patch site
- Any drainage from the site
- Severe stiff neck, problems thinking clearly

If you have any problems, new symptoms, or signs of infection, please call 081 344 5860

This information provided should not be used during any medical emergency or for the diagnosis or treatment of any medical condition. A licensed physician should be consulted for diagnosis and treatment of any and all medical conditions.

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