

Epidural steroid injections tied to small surgery-sparing effect

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(HealthDay)—For patients with low back pain, epidural steroid injections (ESIs) could reduce the need for surgery, but the evidence is limited, according to research published in the Feb. 1 issue of *The Spine Journal*.

Mark C. Bicket, M.D., from Massachusetts General Hospital in Boston, and colleagues conducted a systematic review and meta-analysis to examine whether ESIs have a [surgery](#) sparing effect in [patients](#) with spinal pain. Data were included from 26 studies.

The researchers found that only those studies that assessed the effect of ESIs on the need for surgery as a primary outcome examined the same patient cohort; based on these studies, there was moderate evidence that patients receiving ESI versus control treatment were less likely to

undergo surgery. For studies examining surgery as a secondary outcome, there was a trend toward reduction in the need for surgery for short-term (less than one year) outcomes (risk ratio, 0.68; 95 percent confidence interval, 0.41 to 1.13; $P = 0.14$), but not long-term (at least one year) outcomes (risk ratio, 0.95; 95 percent confidence interval, 0.77 to 1.19; $P = 0.68$). Low-level evidence was seen in secondary analyses suggesting that between one-third and one-half of patients considering surgery could avoid surgery with ESIs.

"Epidural steroid injections may provide a small surgery-sparing effect in the short term compared with control injections and reduce the need for surgery in some patients who would otherwise proceed to surgery," the authors write.

One author disclosed financial ties to the medical device and medical technology industries.

More information: [Abstract](#)
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