

# Having a discogram

---

**This leaflet tells you what to expect during a discogram (test to diagnose intervertebral disc problems). It explains why this procedure is performed, what it entails and the benefits and risks. If you have any other queries please call the Radiology Department on 0118 322 8368.**

---

## Why do I need a discogram?

A discogram is a test used to diagnose the cause of back pain and in particular identify which intervertebral disc is causing the problem. The intervertebral discs are gel-like cushions between the bones of the spine (vertebral bodies). You will typically have already had an MRI scan, which will probably have demonstrated some abnormalities in the intervertebral discs. If your surgeon thinks that this could be the reason for your back pain, bearing in mind there are other potential causes, he may request a discogram to prove this is the case before putting you through an operation.

## What preparation is required?

Some patients undergoing a discogram have their blood clotting and platelet counts checked beforehand to ensure that they are not at increased risk of bleeding. For this reason, any anticoagulants are also stopped or reversed in good time prior to the procedure.

If you are taking any anticoagulant such as warfarin, daily heparin injections or clopidogrel and these have not been discontinued for the discogram please contact the radiology department on 0118 322 8368 (do not discontinue unless instructed to do so). Aspirin can be continued as normal.

We also ask patients to go without food for 6 hours prior to the procedure and liquids for 2 hours prior. This enables us to administer sedation safely if required.

## How is it performed?

A discogram is performed in the Radiology Department by a doctor called a radiologist. It is carried out under continuous X-ray guidance to guide the needle and safely carry out the procedure.

The radiologist will talk to you beforehand to explain what the procedure will involve and any related risks. A very thin small plastic tube (cannula) will then be inserted into a vein in your hand or arm to allow an antibiotic injection to be given. You will be asked to put on a hospital gown and lie on a special X-ray table. You will be given a mild sedative injection via the cannula and the skin over the area of your back will then be cleaned and the needles inserted. Once a needle is in one of the discs, the radiologist will inject a small amount of X-ray dye (contrast) to try to identify the cause of your back pain and will ask you questions whilst this is happening. Usually, three adjacent intervertebral discs will be injected.

## Is it painful?

The initial anaesthetic needle will sting, but once the anaesthetic has taken effect, the skin is no longer painful. The deeper structures are not anaesthetised, however the needle is extremely thin and since patients are given a mild sedative they usually tolerate the procedure well, although, very occasionally the needle may hit a nerve causing a temporary shooting pain in the leg. Once the needles are in position, an injection is made into the disc to test whether or not it is painful, but this should be no worse than your usual back pain.

## What are the risks with having a discogram?

A discogram is a low risk procedure with very low rates of infection, bleeding or nerve injury. To minimise the risk of disc infection, antibiotics are given beforehand and the procedure is carried out in a sterile manner. Your blood clotting may be checked and blood thinning medication is stopped to minimise the already very small risk of bleeding. Very occasionally, when inserting the needle it may touch a nerve and you will feel a shooting pain in your leg. In this event, the needle will be immediately withdrawn and permanent nerve damage is very rare.

## What happens afterwards?

You will be monitored in the Radiology Department recovery unit for approximately one hour. If all is well, you will be discharged into the care of a responsible adult who should spend the next 24 hours with you. You should not drive yourself home afterwards.

The discogram site maybe slightly painful afterwards, particularly when the anaesthetic wears off. Simple painkillers such as paracetamol or ibuprofen are usually sufficient to control the pain. Keep the dressing dry and untouched for 24 hours. After this, the dressing can come off and you can shower and bath as normal

## When do I get the results?

The doctor carrying out your discogram will usually talk to you afterwards and discuss the findings. A formal report will be sent to the referring surgeon who will then send you an appointment to review you in the clinic and discuss any further treatment.

## Further information

[www.radiologyinfo.org/mobile/en/info.cfm?pg=discography](http://www.radiologyinfo.org/mobile/en/info.cfm?pg=discography)

To find out more about our Trust visit [www.royalberkshire.nhs.uk](http://www.royalberkshire.nhs.uk)

**Please ask if you need this information in another language or format.**

RAD\_0018

RBFT Radiology, September 2023

Next review due: September 2025