

Soft tissue and joint corticosteroid injections

Introduction

The information in this leaflet will help you understand why you have been offered an injection into a joint or the soft tissue surrounding a joint and what to expect when the injection is given. The leaflet also answers some of the commonly asked questions.

Why do I need an injection?

A corticosteroid injection has been suggested as part of the care of your condition. These injections are often used to help joint pain and swelling that has not responded to simple anti-inflammatory medication. Corticosteroid injections are also used for treating tendon problems that are painful. In some circumstances an injection may not be the best treatment and in these cases, other treatment options will be discussed.

What is injected?

A corticosteroid is a medication that helps to reduce inflammation and pain in the joint or soft tissue. The corticosteroid is often mixed with a local anaesthetic to reduce the pain associated with your condition. An injected corticosteroid acts mainly in the area injected and does not have the same effects as taking oral steroids.

What are the precautions/risks of having the injection?

You will not be offered an injection if you have any signs of infection, feel unwell or plan to have surgery or dentistry work within 3 weeks. You may find that having a steroid injection will delay you proceeding to joint surgery by up to 6 months.

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Patient Information

You should not have the injection if you have a known allergy to either the corticosteroid or local anaesthetic. It is important to let your clinician know if you have had a previous reaction to corticosteroid or local anaesthetic. It is also important to let your clinician know if you have any other known allergies.

Patients who have diabetes may find that their blood sugar levels need closer monitoring over the few days following a corticosteroid injection.

If you are pregnant, you should let the clinician know as you may not be able to have the injection.

Corticosteroid injections can cause tendons to rupture. The injection may also make your pain worse which could be for a few days or a few weeks or more but it is impossible to be exact.

If the injection is near a tendon and you are known to have a tendon tear there is a small increased risk of causing a complete tendon rupture. However, there is still a small risk of complete tendon rupture in patients without tendon tears.

The injections may also affect your mood. If you suffer with a mental health condition, corticosteroids may affect this for a while but it is difficult to be precise. This can be discussed with your clinician.

Post-menopausal bleeding can happen after a corticosteroid injection. This is usually short lived and is not a cause for concern.

In some cases, the area of skin around the injection site will appear discoloured and dimpled after the injection. This is usually permanent. If you are concerned, please discuss this with your doctor, nurse, physiotherapist or hand therapist.

Patient Information

There is a small risk of infection associated with a corticosteroid injection as it involves a needle piercing the skin. Therefore, you should look for the following signs around the injection site:

- Heat
- Swelling
- Excessive tenderness
- Redness
- Increased pain

If you have any of these symptoms or you feel unwell as a result of the injection, then please contact your GP or, if out of hours, contact NHS 111 for advice.

Severe symptoms after an injection such as an anaphylactic reaction are very rare. Signs of this may include:

- Flushing of the face and neck
- Difficulty swallowing or feeling a lump in the throat
- Difficulty breathing
- Itchy skin
- Nausea and/or vomiting
- Feeling faint

If you have any of the symptoms listed, you should seek medical help immediately by telephoning the Emergency Services on 999 or attending your local Emergency Department.

How is the corticosteroid injection given?

If you agree to have the injection, you will be asked to sit or lie down on a couch or chair. The area to be injected will then be cleaned with antiseptic. The clinician will check the medication and dose to be injected then draw up the corticosteroid and local anaesthetic into the syringe. This will then be injected into the joint or soft tissue as needed. Corticosteroid injections can also be given without local anaesthetic.

A plaster is then placed over the injection site to keep it clean. This can be removed the following day.

**Patient
Information**

What can I expect after having the injection?

The procedure takes a few minutes but you may be asked to wait in the department for 30 minutes to check that you do not have an allergic reaction to the corticosteroid.

The local anaesthetic, if used, works within a few minutes and you may feel some numbness. This will last for a few hours. Some patients report an increase in pain after their injection. This is normal and is due to the local anaesthetic wearing off and the corticosteroid starting to work. Simple pain relief such as paracetamol can help.

You can expect the injection to start working over the next few days and continue to work for a few months. The effects may not last forever. Some patients report a good effect for up to 6 months after the injection, while others feel their symptoms return after a few weeks. Other patients have reported that they did not notice any benefit from the injection or that the pain is worse.

Will I be able to drive home afterwards?

Some doctors and nurses may recommend that you avoid driving for 24 to 48 hours following an injection in your knee or ankle. In other cases, as long as you feel safe to do so, there is no reason why you cannot drive home afterwards.

Can I eat and drink?

You can eat or drink as normal, before and after the injection.

Can I take my usual medication?

In most cases you can take your usual medication as normal but some patients may be advised to stop taking certain medications before and/or after the injection for a period of time. Your doctor, clinician or therapist will have already discussed this with you.

**Patient
Information**

What do I need to do after having the injection?

You will be advised about what is most appropriate for you. The advice may include exercises which will be fully explained to you. In order to gain the best effect from the injection, please follow the instructions you are given.

What happens next?

You may need to be seen in clinic or you will receive a telephone call to review the effects of the injection. An appointment will be made for you if needed.

Corticosteroid name: _____

Dose: _____

Local anaesthetic name: _____

Dose: _____

Injection site: _____

Date of injection: _____

Contact information

If you have any further questions about corticosteroid injections, please contact the person below.

Name: _____

Tel: _____

**Patient
Information**

Further information

For more information, please contact:

Therapy Department

Cheltenham General Hospital

Tel: 0300 422 3040

Email: ghn-tr.physiotherapy@nhs.net

Gloucestershire Royal Hospital

Tel: 0300 422 8527

Email: ghn-tr.physiotherapy@nhs.net

Orthopaedic Outpatient Department

Cheltenham General Hospital

Tel: 0300 422 3863

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