# Before your injection Please inform us if any of the following apply:

- You are, or may be, pregnant or breastfeeding
- You have any infections
- You are allergic to anything
- You have had any recent trauma near the area to be injected
- You have had any joint replacement or internal metalwork
- You have had any previous steroid injections
- You are diabetic
- You have any bleeding disorders
- You are taking any medication to thin your blood, such as warfarin (INR over 3)
- You are taking any oral steroids
- · You have any problems with your immune system
- You have been diagnosed with complete heart block or have a pacemaker.

To be completed by injector after your injection:		
Date of injection:		
Site of injection:	Approach:	
Injection of:		
Triamcinolone □	Methylprednisolone $\square$	Lidocaine□

#### Further information on steroid injections can be found at:

NHS choices website: <a href="www.nhs.uk/Conditions/steroid-injections">www.nhs.uk/Conditions/steroid-injections</a>
Arthritis research UK website: <a href="www.arthritisresearchuk.org">www.arthritisresearchuk.org</a>

The Trust endeavours to ensure that the information given here is accurate and impartial.



If you require this information in another language, large print, audio (CD or tape) or braille, please email the Patient Information team at <a href="mailto:patient.information@ulh.nhs.uk">patient.information@ulh.nhs.uk</a>

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# Musculoskeletal Injection Therapy

#### **Physiotherapy Departments**

County Hospital Louth: 01507 631234 Grantham District Hospital: 01476 464253 Lincoln County Hospital: 01522 573945 Pilgrim Hospital Boston: 01205 445359 www.ulh.nhs.uk

# Why have an injection?

Steroid injections have been scientifically shown to be very helpful for certain soft tissue and joint disorders. They are used to help calm down inflamed or irritable joints and soft tissues.

## What is in the injection?

Corticosteroids are hormones naturally produced by the body. They have a number of different actions including an anti-inflammatory effect. Synthetic corticosteroids have been produced to mimic this effect.

## How many injections will I need?

You may need more than one injection if the symptoms persist, or it may be decided to try another injection in a slightly different place. There is, however, a maximum number of times that the affected area/tissues should be injected and this will be discussed with you if it is necessary.

## Would I continue taking my painkillers?

Yes, there is no danger of taking painkillers at the same time as receiving an injection and it may help with any post-injection flare (see side effects).

# What if the injection does not work?

As previously discussed there is a maximum number of times an area should be injected. You should feel the benefit of the injection fairly soon, if you don't other treatment and management options will be discussed with you.

# Are there any side effects?

Side effects are very rare, we aim to minimise them through the best possible practice.

#### Possible side effects:

- Post-injection 'flare' (a temporary increase in pain) can occur 6 to 12 hours after the injection. This normally resolves itself in less than 72 hours. You can take painkillers to help.
- Facial flushing, where your face goes red, happens in about 1 in 20 people. This usually resolves within a couple of days. There are no long-term side effects.
- As well as the anti-inflammatory effects steroids also have an
  effect on the strength of some soft tissues and in some
  situations an increased risk of tendon rupture. For this
  reason, we ask you to take care and not to strain the affected
  area for 2 weeks following the injection.
- There is the slight possibility of a small dimple and skin colour change appearing at the injection site. This usually lasts for between 6 weeks and 3 months, but can be permanent.
- Infection. This is rare but one which needs immediate attention. If the area which was injected becomes hot, red, swollen and painful you should consult your GP immediately.
- Menstrual disturbance or a missed period can happen in some women who have had an injection of a large dose of steroid.
- In people with diabetes steroids can result in a slightly raised blood glucose level; we advise you to check your blood sugar more frequently for 24 hours after the injection.
- Allergic reaction. This is very rare, but if it occurs can involve a
  rash, facial swelling and difficulty breathing. If this happens in
  the department you will be treated immediately, if it happens
  once you have left seek immediate medical assistance.
- Some people can faint during medical procedures.

If you do experience any of the following please inform your doctor or injecting clinician.