

Steroid injection information leaflet

If you need this leaflet in a different language or accessible format
please speak to a member of staff who can arrange it for you.

اگر به این بروشور به زبان دیگر یا در قالب دسترس پذیر نیاز دارید،
لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formacie,
proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotowuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil,
vă rog să discutați cu un membru al personalului să se ocupe
de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式，请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أخرى، أو بتنسيق
يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

Sanderson Suite
St Helens Hospital
Marshall Cross Road,
St Helens, Merseyside, WA9 3DA
Telephone: 01744 646089

What is a steroid injection

Today you have been given an injection of steroid and local anaesthetic, which can reduce pain and inflammation in your joint.

This is a generally safe treatment to ease your symptoms, but not everyone will benefit from this treatment.

The steroid is administered by injection into the joint or soft tissue. A local anaesthetic is often given at the same time, which helps to reduce the discomfort for a few hours and often helps with diagnosis. Some injections are given under ultrasound guidance.

How quick the injection works varies with individuals, but most people report improvements in their symptoms within 24-48 hours. However, it can take a few days to weeks for it to work in some individuals.

The pain relief a steroid injection gives you can last, for anything from a couple of weeks to a couple of months, or longer. It will depend on the type of steroid you have injected, and what condition you have.

Useful information

Sanderson Suite : 01744 646089/01744 646098

Your consultant is:

Your nurses today were:

Your follow up appointment will be in:

If you do not receive a follow up appointment in the post, please contact Whiston Hospital switchboard on:

0151 426 1600

and ask to put through to your consultant's secretary.

Risks

- Reduced immune system—this is temporary for 1 week to 2 months. This could mean you are more vulnerable to illness including COVID-19, which could result in greater complications.
- Osteonecrosis—a very rare complication, resulting in bone cell death which may cause joint damage.

Please discuss any of these factors with your surgeon.

If you experience any problems that cause you undue concern, please contact your treating consultant's secretary.

Alternatively contact your GP, walk in/urgent care centre or A&E department if you consider the problem to be urgent.

Alternatively you can ring NHS111 for advice or visit the NHS website.

Post operative advice

- At first, the pain can actually be worse than before you had the injection, as it can take a while for the steroid to start working. This is due to inflammation caused by the injection itself – sometimes called a 'steroid flare'. Rest and pain killers will help.
- You might find it helps, to put ice on the area for a few hours after your steroid joint injection. Use an ice pack or ice wrapped in a towel for 10/15 minutes, to reduce swelling and bruising. Do not apply ice directly to your skin.
- It is advised that you do not drive for a few hours following an injection that involves a local anaesthetic.
- It is best practice to rest for about 30 minutes, before leaving the hospital especially if it is your first injection.
- Continue to take your normal pain killers until the pain eases off. Always read the advice leaflet.
- Rest the injected joint for a day or two, moving gently to help the drugs get around the joint and avoid any continuous movements. Do not do anything strenuous for up to five days.
- Avoid anything that makes the pain in your joint worse and gradually get back to normal activities, but stop if this causes too much pain.

Post operative advice continued

- Keep the plaster on for 24 hours, to prevent any infection entering the injection site.
- Facial flushing can occur but usually disappears after 48 hours.
- You may be asked by your consultant to maintain a pain diary, it is important that you bring this to your outpatient appointments.
- If you have been prescribed pain killers, please take as advised. Medications containing codeine may affect your ability to drive or operate machinery. Always read the label.

If the pain remains severe or you begin to shiver and feel hot, contact your own doctor or visit your walk in centre/urgent care centre. As you may be getting an infection that needs antibiotics.

You will receive a follow up appointment in the post to attend an outpatient appointment.

Risks

Risks associated with steroid injections are rare. Those most commonly reported, although still rare, associated with these types of injections are:

- An infection – it is rare to have an infection after an injection. Symptoms may include redness, increasing warmth, increasing pain and if more serious a fever. Seek immediate (that day) medical attention if concerned.
- Damage to the cartilage within your joint or tendons around it, this may be more likely the more injections you have.
- Thinning or a change in the colour of your skin around the injection site – this tends to happen more often with stronger or repeated injections.
- Irregular periods in women, there may be a delay or change to the menstrual cycle. This will normalise by itself.
- Changes in your mood – you may feel really good or very low.
- Steroid injections can cause a rise in blood sugar levels for a few days in diabetic patients. Closer monitoring of blood sugars should be carried out and medical attention sought if unable to control.