

Corticosteroid and Anaesthetic Injections



Important Information

Patient Name:

Drugs injected:

Injection sites:

Clinician Name:

Date:

Direct Contact Number: 01249 456442

What are corticosteroid and anaesthetic injections?

Corticosteroid and anaesthetic injections can help with pain relief when tissues are inflamed, painful or swollen or may be used to help with diagnosis.

If an anaesthetic is injected, it will temporarily numb the area. The steroid has an anti-inflammatory effect. You may experience some early symptom relief, due to the anaesthetic, for a few hours. The slow release steroid takes approximately 2-4 weeks to take full effect and may last for months or longer. In some cases no symptom relief occurs and a further review with your clinician may be required to discuss other options.

When should I not have an infection?

- Current or recent infection. Feels unwell.
- Immunosuppressed.
- Allergic to local anaesthetic or steroid or any excipients. Patients must make the clinician aware of any known allergies.
- Recent non-investigated trauma to the area.

Working in partnership
Great Western Hospitals NHS Foundation Trust
Royal United Hospitals Bath NHS Foundation Trust
Salisbury NHS Foundation Trust

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- Metalwork in the joint being injected.
- Intra-articular fracture.
- Bleeding disorders.
- Poorly controlled diabetes.
- Damaged/inflamed skin.
- Inflamed acute joint.
- Are due to have surgery.
- Unable to avoid aggravating activity for 2 days after injection.
- Do not want an injection.
- On certain medications – to be discussed in clinic prior injection.
- Previous TB or osteomyelitis
- Heart block or sinus bradycardia (anaesthetic only).

Are there any side effects?

The following are possible side effects which are rare and temporary, while others, although rare can be life threatening.

- An increase in pain can be experienced for up to 48 hours after injection. Should this occur, take your usual or prescribed pain medication (seek advice from your pharmacist or GP if necessary).
- Changes in skin pigmentation (small pale area) or a loss of sub-cutaneous fat from under the skin around the injection site. This may be permanent. No treatment is required.
- Infection is rare (approximately 1 in 50,000). If you notice any swelling or redness and worsening pain around the injection site or develop a temperature and feel unwell you should contact your GP or local A&E.
- Allergic reaction is extremely rare (1 in 70,000). You will be asked to wait for 20-30 minutes following your injection to monitor for this reaction.
- Tendon rupture but is extremely rare (tendons attach to bone). Your clinician must be contacted if suspected.
- Facial flushing (redness) - *
- Menstrual irregularity or vaginal bleeding - *
- Changes in mood - *
- Raised intraocular/eye pressure causing altered vision, eye or head pain (steroid only) - *
- Dizziness, light headedness, vomiting, blurred vision, tinnitus and hypersensitivity (anaesthetic only) - *

*This is usually temporary for 1-2 days but if concerned or continue then discuss with your GP.

Breastfeeding or pregnant – Currently we do not offer injections to these patients in our service.

Patients who are on certain anticoagulants might either need a blood test 48 hours prior to the injection to check their INR is below 3 or will need a written prescription from their GP to proceed (if required this will be arranged by your clinician).

What happens after the injection?

- You may only need to be seen again if you experience side effects or if there has been no improvement.
- Inform any health professional you are seeing that you have had a cortisone injection for up to 3 months post injection date.
- Corticosteroid injections can reduce your immunity so it is advised to avoid contact with known cases of chickenpox, measles or shingles whilst receiving steroid treatment.
- Vaccination response can be reduced by steroids.

How many injections can I have?

This depends on the area that is injected. Usually one injection is sufficient, but if the pain persists further injections can be offered by your clinician. Generally a minimum of 3 months is required between injections.

What does the injection involve?

The clinician will explain the process including risks, gain your consent for the procedure and answer any questions you may have. You can withdraw your consent at any time. Any potential drug interactions will be discussed and explained.

The skin area will be prepared with antiseptic. The needle is gently put into the affected area and the solution is injected through the needle. There may be some pain during the injection, if it occurs, it subsides quickly. Most injections are painless.

References:

Saunders S & Longworth S (2006) Injection Techniques in Orthopaedics

Sports Medicine (3rd Ed) Churchill Livingstone , Edinburgh

Safeguarding

Wiltshire Health and Care has a strong commitment to care that is safe, of a high quality and that upholds our patients' rights. All our patients have the right to live lives free from abuse or neglect and, where they are able, to make or be supported to make informed decisions and choices about their treatment, care and support. Where patients are not able to make their own decisions, Wiltshire Health and Care staff are committed to ensuring that treatment, care and support is undertaken in accordance with the person's best interests.

In order to fulfil these commitments, Wiltshire Health and Care follow the Safeguarding principles and responsibilities laid out in Sections 42-46 of the Care Act (2014) and are informed by, and apply, the guiding principles and provisions of the Mental Capacity Act (2005). If you or your carer have any concerns about abuse, neglect or your rights in relation to care provided by Wiltshire Health and Care or any other agency or individual, please raise this directly with any Wiltshire Health and Care staff or contact the Safeguarding Adults Team by telephone on: 0300 4560111.

Regarding children, WHC is responsible for providing services in accordance with Section 11 of the Children's Act (1989) and works under the principles of Working Together to Safeguard Children (2018).

Wiltshire Health and Care Patient Advice and Liaison Service (PALS)

You are entitled to support in your decision making. Please feel free to talk to your Link Worker or any member of the team looking after you. Alternatively, you can contact our Patient Advice and Liaison Service on 0300 123 7797 or by email on pals.wiltshirehealthandcare@nhs.net

Please contact PALS if you require this leaflet in a different format.

Find information about health and social care in Wiltshire at www.yourcareyoursupportwiltshire.org.uk

Advocacy may also be available via Rethink

Telephone: 07484 001862

Email: wiltsadvocacy@rethink.org

