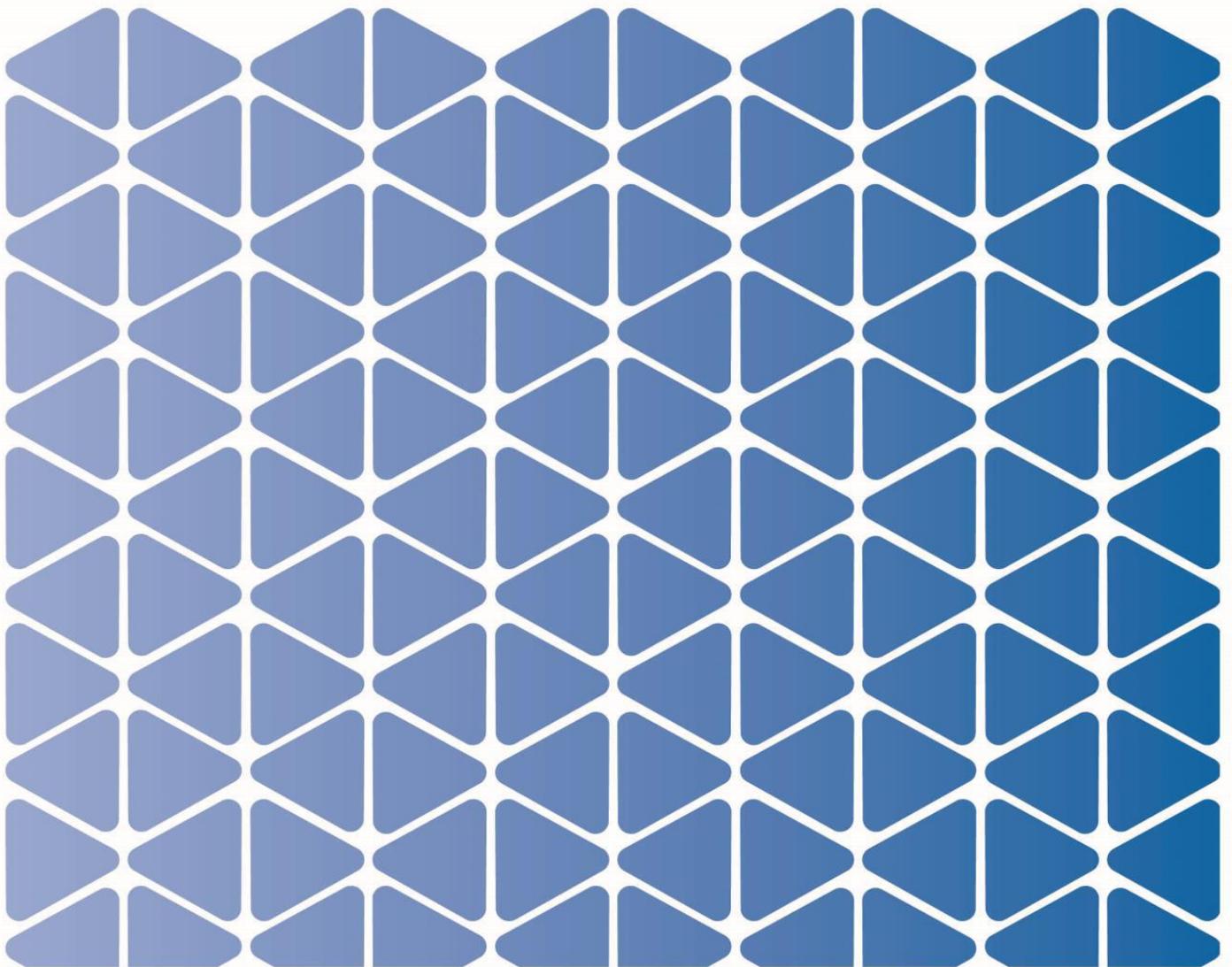




PATIENT INFORMATION

## Physiotherapy

# CORTICOSTEROID INJECTION





The Orthopaedic Physiotherapy Specialist/Advanced Physiotherapy Practitioner feels that a corticosteroid injection may be beneficial to your condition by helping to reduce your pain. This leaflet is designed to help you decide if you want to have a corticosteroid injection.

## **Procedure**

A small dose of corticosteroid and local anaesthetic is injected into the affected tissues, for example, joint, tendon or bursa.

## **How fast does the injection work?**

If local anaesthetic is used the pain should lessen quickly depending on the type of local anaesthetic used although it may return after a few hours, just like a visit to the dentist. The steroid usually starts to work by reducing inflammation within 24-48 hours but may take longer.

## **How long does the effect last?**

This can vary from person to person and the condition being treated. However, on average, a minimum of four to six weeks relief is expected.

## **How many injections can I have?**

This depends on the part of the body involved and will be decided by your therapist and yourself. If the pain is severe or has been there for a long time you may need more than one injection over a period of time.

## **What happens before the injection?**

- The injection will be explained and you will have the opportunity to ask questions
- You are free to delay your decision or decide not to have the injection
- Before the injection you will complete a checklist with the therapist to minimise the risk of harmful effects
- If you decide to go ahead with the injection you will be asked to sign a consent form.

## What happens after the injection?

- We advise you to remain in the waiting area for 30 minutes after the injection to make sure you feel well before going home
- Local anaesthetic may reduce your pain up to 8 hours so avoid anything you would be unable to do if you were in pain during this time
- Please keep your follow up appointment so that your response to the injection can be recorded for future reference
- Your therapist may give you additional special instructions if indicated (see box next page)

## What are the possible side effects?

The following, although rare, can occur after a joint injection:

- **An allergic reaction:** This is most likely to appear within 30 minutes of the injection. This is why we ask you to wait afterwards. However if you develop a rash, unusual swelling or have difficulty breathing within a few hours of the injection you should seek urgent medical advice, inform them of the injection and give them this leaflet.
- **Infection:** Signs of infection include gradually worsening pain and swelling over several days. Contact your GP in working hours if this happens and you also feel unwell or develop a temperature. Out of hours you can call NHS direct. If you become severely unwell call the primary care emergency service or attend A&E taking this leaflet with you
- **Raised blood sugar in diabetic patients:** Corticosteroid injections can cause an increase in blood sugars. Diabetic patients should monitor their blood sugar for one week following injection
- **Post injection pain:** The steroid injection can cause a flare of pain within 48-72 hours in a small number of patients. This should resolve with cold, heat or simple painkillers but do not exceed the recommended dose
- **Skin depigmentation and loss of fat around the injection site:** This can occasionally be caused by steroid injections. The skin may appear pale or thinner and can be temporary or permanent
- **Facial flushing/dizziness:** Harmless facial flushing or dizziness can occur within minutes or up to 2 days after injection but it is self-limiting and does not require medical treatment
- **Uterine bleeding:** This is again rare and should settle without medical treatment
- **Tissue weakening:** We normally recommend relative rest for a couple of weeks following the injection to improve the chance of success

## Consent

- You will be asked to sign a form to consent to the injection. It is Trust policy that before you give consent to the injection you have the opportunity to read this leaflet. If you do not understand any of the information **please** ask any questions before making your decision.
- It is not currently known whether the use of corticosteroid may decrease your ability to fight infection with Covid-19 if either:

a: you have no symptoms but are infected with Covid-19 at the time of the injection, or

b: you become infected in the two-week period following your injection.

This should be considered when balancing out the potential risks and benefits of having corticosteroid injection therapy.

### **Are there any times I should not have an injection?**

- If you have a skin infection or infection anywhere else for example a throat infection
- You have previously been allergic to local anaesthetic or steroids
- You feel unwell
- You are due to have surgery soon in the same area
- You are pregnant
- You are under 18
- You do not want an injection or are afraid of needles
- You are on anti-coagulation e.g. Warfarin – discuss with your therapist
- You have unstable Diabetes – discuss with your therapist

**Steroid:**

**Dose:**

**Local Anaesthetic:**

**Volume:**

**Date and time of injection:**

**Lot Number:**

**Expiry Date:**

## **SPECIAL INSTRUCTIONS:**

### ***Post-Procedure***

- Encourage scrupulous hygiene on the part of patient and household including hand and surface cleaning.
- Advise use of face coverings for two weeks when in enclosed, non-household spaces.
- Advise avoidance of social gatherings outside household 'bubble' for two weeks.
- High risk individuals advise two weeks shielding in household as per post-injection shielding advice.

Should you notice any of the following symptoms please contact your GP or Accident and Emergency Department, depending on severity, and tell them about this injection: severe pain, swelling, redness or warmth around the injection site or if you feel generally unwell.

If you have an appointment with another medical professional within the next 2-3 weeks it is important to tell them that you have had this procedure.

### **Contact details**

If you have any specific concerns that you feel have not been answered and need explaining, please contact the Orthopaedic Physiotherapy Specialist/Advanced Physiotherapy Practitioner at the relevant hospital:

- **Physiotherapy Department, Worcestershire Royal Hospital (phone 01905 760622)**
- **Physiotherapy Department, Alexandra Hospital, Redditch (phone 01527 512114)**
- **Rheumatology Helpline, Worcestershire Royal Hospital (phone 01905 760461)**

**If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.**

### **Other information**

The following internet websites contain information that you may find useful.

- [www.worcsacute.nhs.uk](http://www.worcsacute.nhs.uk)  
Worcestershire Acute Hospitals NHS Trust

- [www.patient.co.uk](http://www.patient.co.uk)  
Information fact sheets on health and disease
- [www.rcoa.ac.uk](http://www.rcoa.ac.uk)  
Information leaflets by the Royal College of Anaesthetists about 'Having an anaesthetic'
- [www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)  
On-line health encyclopaedia

## **Patient Experience**

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

## **Feedback**

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

## **Patient Advice and Liaison Service (PALS)**

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

## **How to contact PALS:**

**Telephone Patient Services: 0300 123 1732 or via email at: [wah-tr.PALS@nhs.net](mailto:wah-tr.PALS@nhs.net)**

## **Opening times:**

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.