

# Steroid Injections

Following your Orthopaedic appointment, it has been agreed that a steroid injection could help your condition. This leaflet is intended to answer any questions you may have.

## Why should I consider a steroid injection?

A steroid injection can be given to help reduce pain in a joint or soft tissue.

## Will it be painful?

There may be some pain but this usually wears off within a couple of hours. Local anaesthetic will sometimes be injected at the same time as the steroid, which may ease the pain at the time of injection, but the pain may return when the anaesthetic wears off. Very occasionally, patients may experience a flare up of their pain within the first 24 to 48 hours after the injection. This is nothing to worry about and normally goes away within a couple of days.

## How quickly will it work?

Most patients report feeling less pain within the first 24 hours to one week. You may find your pain improves for a few weeks to several months and in some cases the injection can allow your pain to resolve completely.

## Are there any side effects?

### Side effects can include:

- thinning of skin at the injection site can make your skin more fragile.
- some loss of skin colour or bruising at the injection site.
- absorption of fat underlying the skin; this can result in an indentation or dimple at the injection site.
- an alteration in sugar levels in people with diabetes. You will be advised to monitor your blood sugar levels (if appropriate).
- facial flushing (redness of the cheeks). This will pass without treatment, usually within 48 hours.
- rarely an infection can occur as the steroid can lower your immune system response. If you experience pain at the injection site that does not improve, or the area is red, feels hot and swollen, or you develop a fever, consult your GP immediately or visit A&E if a GP is not available.
- rarely soft tissues may weaken or tear. You may be advised to rest for a time afterwards to reduce this risk.

- extremely rarely an allergic reaction - you will be monitored for up to half an hour immediately after the injection.
- occasionally female patients may experience some temporary menstrual disturbance. If this persists, seek your GP's advice.
- extremely rarely blurred vision.
- if on blood thinning medication there is an increased risk of bleeding; if you experience any increase in pain, swelling and/or heat you should attend A+E
- risk of adrenal suppression; if you experience symptoms of muscle weakness/fatigue, muscle joint or abdominal pains, decreased appetite or weight loss you should present to A+E.

## Do I need to do anything after the injection?

You should modify your activity for ..... days after the steroid injection. Take things easy; keep moving but avoid heavy and repetitive activities or things that you think may aggravate your symptoms.

You will be given advice on resuming your normal activities and what you can do to help prevent recurrence of this problem. If you are given some exercises to do, it is important that you follow these instructions to get the most benefit from your treatment.

The sticking plaster (or similar dressing) may be removed when any bleeding has ceased.

If you have any further questions please ask a member of staff.

Doncaster & Bassetlaw MSK Clinical Assessment & Treatment Service (CATS).

**Tel:** .....

**Injection given:** .....

**Dose:** .....

**Date/time:** .....

## Patient Advice & Liaison Service (PALS)

The team are available to help with any concerns, complaints or questions you may have about your experience at the Trust. Their office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email.

## The contact details are:

**Telephone:** 01302 642764 or 0800 028 8059. **Email:** dbth.pals.dbh@nhs.net