

What is a joint/soft tissue injection

We offer joint injections for a number of conditions where you have not responded to other forms of treatment.

A steroid injection is usually given into a joint or soft tissue to help reduce pain when joints may be swollen and tender. We usually use a steroid and local anaesthetic mix and inject around the affected area/joint. The injection helps reduce pain and as a result improves mobility and function.

Joint injections are done for a number of conditions – osteoarthritis, frozen shoulder, carpal tunnel and many other conditions.

What's in the injection and to expect from the procedure:

We normally inject a small amount of steroid and depending on the situation add some local anaesthetic into the mixture. The anaesthetic does not reduce inflammation but gives pain relief within a few minutes lasting 1-2 hours. The steroid takes longer to work and, in many cases, you will only notice a difference after 2 days. While waiting for the steroid to work you may need to continue taking pain killers like paracetamol and ibuprofen and use cold packs. Hopefully the injected area will feel better for months and years to come however many will only notice an improvement for up to 3 months.

After the injection:

Normally we ask patients to sit in the waiting area or 10-15 minutes just to ensure they are not feeling unwell after the injection but generally you will be able to leave straight after the injection. Rarely people can have an allergic reaction to the drugs. If you have an allergic reaction to the injection you may get a rash on your skin, feel your face swell or feel short of breath. If any of this happens we will be able to treat you immediately. If you feel any of these symptoms later or at home you should call 999, stating 'anaphylaxis'. For milder allergic reactions please contact the surgery or go to your nearest Accident and Emergency department. It is recommended to rest the joint after the injection for 48 hours as this helps the injection work better. If this is unavoidable then we advise to avoid any strenuous exercise for the following 48 hours. A general principle is to move the joint injected as normal but do not lift or push heavy objects for a week after the injection.

Diabetes patients:

Steroids make your sugar levels go higher and we normally ask patients to improve their diabetes control before the injection. After the steroid injection it may be that you need to test your sugars more or increase the diabetes medications after discussion with your GP.

Risks and side effects:

Side effects are rare but you may notice that the pain flares up for up to 48 hours after the injection. A very rare side effect is an infection of the joint; less than 1 in 700 people who have an injection get an infection of the joint. If the joint pain is severely worsening after the injection and not responding to painkillers please contact the practice. If you have a fever (more than 37.8C) and your joint is red, swollen and painful then please contact the practice or attend an Accident and Emergency department.

Skin changes – very occasionally you may see some thinning of the skin or de-pigmentation (discoloration) around the injection site. This may settle with time but can be permanent in cases. You can also at times get a localised skin infection. If you get any redness to the injection site, the area feels warm, there is pus or you are feeling unwell, please seek medical help.

Local reaction – some people can get local irritation around the injection site and some patients may get facial flushing. These symptoms settle within a few days. Please contact the GP if you are concerned about any reaction.

Menstrual cycle – women may have some changes in their normal cycle after an injection. This is more likely if you have more than one joint injected. If it lasts longer than one cycle you should contact your GP.

COVID-19 – There are some suggestion that if you have a joint injection and then suffer from COVID-19 you may have more complications from the illness. As a result, we had stopped all joint injections until July 2020.

How often can you have a joint injection?

We do not hope to give you too many injections. The most we may offer you is 2-3 injections per year. Too many injections may damage the cartilage in weight bearing joints. Your clinician will be able to advise you more specifically about this risks.

If you would like any further information about steroid injections you can view this on the following website www.nhs.uk/conditions/steroid-injections