

## **Patient information leaflet: Steroid Injection**

### **Why have I been prescribed a steroid injection?**

Steroid injections are used to reduce inflammation in joints or areas of pain. They can be used as part of the treatment for joint pain and soft tissue problems. Your doctor, nurse or physiotherapist has made an assessment of your condition and feels that a steroid injection may offer you some symptom relief and help your pain.

### **What does a steroid injection contain?**

There are different types of steroids that can be injected. We normally use the steroid 'Depo-medrone' for joint injections and combine this with a local anaesthetic called 'Lidocaine'. Together the steroid and local anaesthetic can effectively reduce inflammation and pain allowing you to feel more comfortable and function more easily.

### **How long does the steroid injection take to work?**

You should start to notice an improvement in your pain after one week. Some patients have a beneficial effect prior to this.

### **Do I need to take any precautions after my steroid injection?**

You should rest for 1-2 days after your steroid injection. During this time you should use the joint as you normally would but avoid heavy lifting or strenuous exercise of the area that has been treated. You can take your regular pain killing medications such as paracetamol. If you already have a physiotherapy exercise programme in place for your condition it is normally fine to continue this soon after your injection and the effects of the injection will often make your physiotherapy exercises easier to do.

### **Can I leave the surgery after my steroid injection?**

As with all medications there is a small risk of an allergic reaction to the contents of the steroid or local anaesthetic. Allergic reactions can still occur even if you have had the steroid injection previously. It is advised that you sit in the waiting room for 15 minutes after your injection. If you feel unwell in this period please inform a member of staff.

### **What are the risks or side effects of having a steroid injection?**

Side effects from the injection are rare. Occasionally people notice a flare in their joint pain in the first 24-48 hours of having a steroid injection. This normally settles down within a couple of days and then the pain should start to improve.

A very rare side effect of a steroid injection is infection in the joint or tissue. For every 20,000 patients given an injection only one patient is likely to suffer from an infection following a joint injection. If your joint becomes more and more painful, is red, swollen and hot, or if you develop a temperature then you should seek medical help. Do not wait for this to settle down.

Occasionally a blood vessel can be ruptured after having a joint injection.

Steroid injections may cause facial flushing and interfere with your periods.

Steroid injections may cause a change in your mood. This is unusual but you are more at risk if you suffered with mood disturbance before your injection. Please discuss this with your GP if you are concerned.

People sometimes notice dimpling or pigmentation change over the site where the steroid injection is given.

Another rare side effect to having a steroid injection can be damage to the tendon within the joint. This tends to occur when tendons are already weakened or damaged.

### **What else should I know about steroid injections?**

Repeating a steroid injection to the same joint too many times can have a negative effect on the joint and cause deterioration of the cartilage or soft tissues. The general rule of thumb is to limit the number of repeat injections to a maximum of 3-5 times for a single joint. You should have a discussion with your GP or Physiotherapist about the pros and cons of repeating an injection as the number of repeat injections can depend on what part of the body is being injected.

If you are a diabetic the steroid may increase your blood sugars for a week after the injection. Your blood sugar should be monitored more closely than normal after an injection of steroid.

We don't recommend the use of steroid injections during pregnancy. However steroid injections should not affect your fertility.

If you are on blood thinning medications we may not be happy to inject you with steroid. Your referring GP, nurse or physiotherapist will have discussed this before recommending a steroid injection to you.

Steroid injections may delay healing from a wound or post-surgery. It is therefore not advisable to receive them during this time of healing.

It is not advisable to have a steroid injection within 2 weeks before a planned COVID-19 vaccination/booster OR sooner than 2 weeks after the vaccination/booster.

It is also not advisable to have a steroid injection until 4 weeks after testing positive for COVID-19. You should have made a good recovery from COVID before having a steroid injection.

### **References and further information**

Arthritis Research UK <https://www.versusarthritis.org/about-arthritis/treatments/drugs/steroid-injections/>

Patient UK [www.patient.co.uk/doctor/joint-injection-and-aspiration](http://www.patient.co.uk/doctor/joint-injection-and-aspiration)