

Corticosteroid / local anaesthetic injections

Other formats

If you need this information in another format such as audio CD, Braille, large print, high contrast, British Sign Language or translated into another language please contact the PALS desk on 01271 314090 or at rduh.pals-northern@nhs.net.

What is a corticosteroid injection?

A corticosteroid (or 'cortisone') is an anti-inflammatory medicine, which can be injected directly into the tissues that are causing your symptoms. It is an alternative to taking anti-inflammatory medication by mouth. It acts directly in the area injected and is not the same as the steroids taken by bodybuilders or prohibited in athletes.

What are the benefits – why should I have a corticosteroid injection?

The injection can help to relieve swelling, pain and stiffness caused by inflammation. This may in turn help you to start your rehabilitation and return to normal activities sooner by 'breaking the cycle' of pain and inflammation. It can also be helpful to aid in the diagnosis of your condition if it is not clear which structures are responsible for your pain. You may also have a local anaesthetic injected at the same time, which may provide temporary pain relief.

What are the risks?

The possible **side effects** of the injection include:

- An increase in pain or 'flare' reaction in the immediate 48 hours.
- A red face or facial flushing for a few days.
- A small area of fat loss or change in skin colour at the injection site (depigmentation).
- Temporary bruising or bleeding. The effect may be increased if you are taking blood thinning tablets such as Warfarin, Clopidogrel or Aspirin. Please inform the practitioner.
- Diabetic patients may notice a temporary increase in blood sugar levels.

- Females may notice inter-menstrual bleeding or an irregular cycle.
- Nerve / blood vessel injury

The possible serious complications from injection are:

- **Infection** – If the area becomes hot, swollen and painful for more than 24 hours, or if you feel generally unwell, you should contact your practitioner immediately. If they are unavailable, you should seek advice from any GP doctor or Emergency Department.
- **Allergic reaction** to the drug(s) – Please let us know about any allergies. You may be asked to wait for a short time following your injection to check for any sensitivity.
- It is advisable **not to drive or operate machinery** immediately following the procedure.

You should **not** have the injection carried out if you:

- Have any infection in the area or anywhere else in your body.
- Are allergic to local anaesthetic or cortico-steroid.
- Feel unwell.
- Are due to have surgery in that area soon.
- Are pregnant or breast feeding.
- Have poorly controlled diabetes or are being closely monitored for blood sugar levels.
- Have a history of tuberculosis or myasthenia gravis.

Are there any other alternatives?

Alternatives to injection include the possible use of anti-inflammatory medicines, physiotherapy, and lifestyle changes.

What happens during the injection?

The benefits and risks of the injection will be explained to you in detail. You will then be placed in a comfortable position. The skin is cleaned with antiseptic. A needle is gently positioned into the affected area and the solution is injected through the needle. A plaster will be placed over the site.

Will I feel any pain?

The injection is not particularly painful. However, a sharp pain will be experienced as the needle punctures the skin. If local anaesthetic is used, this may help to reduce any discomfort.

What happens after the procedure?

If local anaesthetic has been included, pain may start to reduce immediately. It may return as the local anaesthetic effect wears off (similar to when you visit the dentist). The cortisone starts to work in 24–48 hours and can sometimes take a little longer. It remains active for approximately 14 days and this anti-inflammatory effect can last much longer. It does not necessarily mean that you will need any further injection. It is important to follow any advice given to you. You may be asked to keep a note of symptoms or to keep a pain diary.

What do I need to do after I go home?

Depending on the cause of your symptoms, you may be asked to rest the limb for a short period. This does not usually mean total rest, but refraining from activities that make any pain worse. Following this 'relative' rest, try to gradually return to full function. Any rest is to maximise the benefits of the injection. If you are having other medical treatment within six weeks, you should inform them you have recently received a corticosteroid injection.

Will I have a follow-up appointment?

You may be offered a follow-up appointment a few weeks after your injection to check your progress. Occasionally, more than one injection is needed and this can be discussed at this appointment.

Further information

If you have any questions or concerns about corticosteroid injections, please contact the department or practitioner who referred you for the injection either by telephone or on MY CARE.

PALS

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answers questions and resolves concerns as quickly as possible. If you have a query or concern call 01271 314090 or email rduh.pals-northern@nhs.net. You can also visit the PALS and Information Centre in person at North Devon District Hospital, Barnstaple.

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Tell us about your experience of our services. Share your feedback on the Care Opinion website www.careopinion.org.uk.

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