

## PATIENT INJECTION INFORMATION

### What is a corticosteroid?

A medicine which can relieve swelling, stiffness and pain by reducing inflammation

### Is this the same drug that athletes and bodybuilders take?

No. The steroids we inject are completely different and are safe to use when clinically indicated.

### Why do I need a steroid injection?

Because it should help to reduce your pain. You can then start rehabilitation sooner, need fewer treatment sessions and return to normal activities more quickly

### Why don't I just take anti-inflammatory pills?

You can, but the side effects of these are much more common particularly those affecting the stomach. These injections do not have the same effect on the stomach and are directed to the specific site of pain and inflammation bypassing the stomach

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

Yes, if you:

- Have an infection near to the site of the injection or anywhere else in your body
- Are allergic to Lidocaine (Local anaesthetic) or steroid
- Feel unwell
- Are due to have surgery in the area soon
- Are pregnant or breastfeeding
- You have a replacement joint in the area to be injected
- Are under 18
- You have poorly controlled diabetes
- You have poorly controlled hypertension
- Do not want the injection

\*\*it is important that you inform your clinician if you have any of the issues noted above.

### What are the possible side-effects?

These are unlikely and your clinician will discuss them with you. They include the following and a more detailed list can be found on the manufacturer's information which your clinician can provide:

- Flushing of the face for a few hours
- Small area of fat loss or a change in colour of the skin around the injection site
- Increased pain, although this is generally temporary
- Numbness, tingling or increased pain if a nerve has been touched by the needle
- Tendon rupture
- Slight vaginal bleeding
- Diabetic patients may notice a temporary increase in blood sugar levels and should monitor blood sugar levels in the immediate post injection period and seek medical advice as needed.
- Change in mood, low mood. This is a risk if you or your family have a history of psychosis.
- Blood pressure can increase although this is unlikely to result in any symptoms that you will notice if your blood pressure is well controlled and the response to medication for the same is well established.
- If you are taking blood thinning drugs there may be some temporary bruising

*NB: This leaflet is intended for general advice only and you should discuss any specific concerns with your treating clinician.*

- If a blood vessel is touched by the nerve you may experience increased pain and bruising.
- Infection: if the area becomes hot, swollen and painful for more than 24 hours you should contact the clinician who injected you or your GP.
- Anaphylaxis, is a life threatening allergic reaction which is extremely rare in response to injected steroid medication. It is more likely if local anaesthetic is used in your injection although the overall risk remains extremely low and your clinician will discuss any identifiable factors that put you at risk for an allergic response. You will be asked to wait for 30 minutes after the injection to ensure there is no allergic reaction to the drug

### How is the injection done?

The skin is cleaned with antiseptic. A small needle is gently put into the affected part and the solution is injected through the needle.

### Is the injection painful?

There may be some discomfort, the clinician performing the injection has had intensive training in the technique. Sometimes it can be sore for a few hours, and you will be told what to do about this.

### How fast does the injection work?

If local anaesthetic is also used the pain should be less within a few minutes, though it may return after about an hour, just as when you visit the dentist. The steroid usually starts to work within 24-48 hours and you may start to notice some improvement, but it can take some weeks to notice an improvement.

### How long does the effect last?

This varies from person to person and the condition being treated, but the steroid usually continues working for 3 to 6 weeks and most people will experience a lasting reduction in their symptoms after this period of time. It is important to remember that in most instances the injection is intended to reduce your pain to make it easier to do exercise which will allow the tissue to get healthier and cause less pain as such it is very important to follow the advice provided by your clinician.

### How many injections can I have?

This depends on the part of the body involved and will be decided by your therapist and yourself. Usually one injection is sufficient, but if the pain is severe or has been there for a long time, you may need more

### What should I do after the injection?

Immediately after the injection your clinician will advise you to wait in the clinic to monitor for any immediate side-effects.

If the problem was caused by overuse, you will probably be told to rest the area for about a week; if it is joint pain, you may start early gentle movement. Your clinician will provide aftercare advice specific to your problem.

If you develop any signs of infection or unexpected side-effects seek emergency medical advice. This is very rare and your clinician will have assessed and discussed the risks with you to make the injection as safe as possible.

### Will I have to be seen again?

Some people will need a follow up appointment where they attend a clinic, others will be reviewed by telephone. Mostly this will happen after a month, occasionally we will ask to see you after 7 - 10 days. Your clinician will discuss with you the most convenient and appropriate way to follow up on your injection, and if this is not clear please ask for clarification. Appropriate advice on further management, and probably some exercises for you to do at home, will be given at the time of the injection and at your follow up appointment.

## Consent to injection

**Statement of Health Professional** - to be completed by health professional with appropriate knowledge of proposed procedure

*I have explained the procedure to the patient. In particular, I have explained:*

*The intended benefits:*

*Serious risks as described in the patient information leaflet and any specific risks related to the patient based on their medical history or interacting medications:*

*I have provided the patient with the information leaflet on the procedure and provided the opportunity to clarify any questions or particular concerns of those involved.*

*I have also discussed what the injection is likely to involve, relative benefits and risks of alternative treatments (including no treatment).*

**Signed:** \_\_\_\_\_ **Job Title:** <<PRACTITIONER-TITLE>>

**Name (PRINT):** <<PRACTITIONER>> **Date:** <<FULLDATE>>

**Statement of Interpreter** - where appropriate

*I have interpreted the information above to the patient to the best of my ability and in a way in which I believe they can understand*

**Signed:** \_\_\_\_\_ **Name (PRINT):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Statement of patient**

*I have read and understood the information above, been offered the manufacturer's information leaflet, and had the opportunity to ask questions which were answered, regarding the likely effects and side-effects of a corticosteroid injection for my condition. I have decided to proceed with the injection.*

**Signed:** \_\_\_\_\_ **Name (PRINT):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Confirmation of consent** - to be completed by a health professional when the patient has signed the form in advance.

*I have confirmed the patient has not further questions and wishes to proceed with the injection.*

**Signed:** \_\_\_\_\_ **Job Title:** <<PRACTITIONER-TITLE>>

**Name (PRINT):** <<PRACTITIONER>> **Date:** <<FULLDATE>>