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Northamptonshire Healthcare
NHS Foundation Trust

LOCAL STEROID INJECTIONS PRE INJECTION

PODIATRIC SURGERY

INFORMATION LEAFLET

 01327 708102

 nhft.nhs.uk/podiatric-surgery



**MAKING A
DIFFERENCE
FOR YOU,
WITH YOU**

This leaflet is designed as an aid to patients, offering general information relating to corticosteroid (steroid) injections and answering frequently asked questions. It does not attempt to answer all of your concerns. You are advised to ask the podiatric surgery team about any additional questions or concerns you have about your diagnosis or treatment.

Local steroid injections (injections into an affected area, e.g. a joint or ligament) can be a quick and effective treatment for joint or soft tissue pain, swelling and stiffness. These injections have been tested and have helped many people. However, as with all drugs, some people may experience side effects.

WHAT ARE STEROIDS AND HOW ARE STEROID INJECTIONS USED?

A corticosteroid (or 'cortisone') is an anti-inflammatory medicine which can be injected directly into the tissues that are causing your symptoms. It is a safer 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 athletes.

Steroid injections into a joint are often recommended for people with rheumatoid arthritis and other types of inflammatory arthritis. They may also be recommended for osteoarthritis (a 'wear and tear' condition) if your joints are very painful.

Severe pain experienced when a nerve in the foot becomes irritated and thickened (i.e. Morton's neuroma) can also be reduced by steroid injections. They are also used for plantar fasciitis, scars and soft tissue growths. The injection reduces inflammation, which in turn will reduce pain.

WHAT STEROID PREPARATIONS ARE AVAILABLE?

A number of different steroid preparations are available for injection and your consultant will choose the preparation and the dose most appropriate to your needs. The mildest is hydrocortisone. Prednisolone, methylprednisolone and triamcinolone are stronger and tend to be less soluble (dissolve less easily), remaining in the joint / soft tissue for longer. The clinical benefit from the stronger drugs is associated with a slightly increased risk of local side-effects.

In order to make the injection more comfortable for you, local anaesthetic is sometimes used prior to the steroid injection or can be mixed with the steroid. The local anaesthetic will make the area numb within minutes and may last for up to 24 hours.

IS THERE ANY TIME WHEN I SHOULD NOT HAVE AN INJECTION?

Yes, if you:

- Do not want the injection
- Are allergic to steroids or local anaesthetic
- Have an infection in the area to be injected or anywhere else in your body
- Feel unwell (i.e. have a cold/fever)
- Are on antibiotic therapy
- Are on anti-fungal medication
- Are on anti-retrovirals (medicines to control HIV)
- Have had live vaccines (MMR, polio, yellow fever, typhoid, TB) within the last four (4) weeks or have had active TB within the last 10 years
- Have heart failure
- Are due to have surgery to the area soon
- Are under 18 years old
- Have poorly controlled diabetes

WHAT ARE THE RISKS AND POSSIBLE SIDE-EFFECTS?

COMMON SIDE-EFFECTS (MAY AFFECT UP TO 1 IN 10 PEOPLE)

- **Soreness / bruising** from a steroid 'flare' (unpredictable local reaction) at the site of injection. This can occur four to 12 (4 to 12) hours after the injection but normally wears off in less than 72 hours. Take over-the-counter painkillers (i.e. paracetamol) and apply ice to the area to ease the pain
- **Increase of pain at the injection site** (for up to seven days)
- **Small area of fat loss** (skin dimpling) at the site of injection
- **Change in skin colour** around the site of injection
- **Light headedness**
- **Temporary bruising or bleeding** at the site of injection (especially if you are taking blood thinning tablets such as aspirin or warfarin)
- **Flushing or redness of the face** for a few hours up to 24 to 48 hours

RARE

- **Diabetic patients** may notice a temporary increase (a few hours) in blood sugar levels
- **Haematoma** (localised collection of blood) at the site of injection
- **Fainting**
- **Worsening pain** – for example from irritation of a nerve by the injection needle

VERY RARE

- **Infection at the site of injection.**
If the area becomes red, hot, swollen and painful for more than 24 hours, or if you feel generally unwell, you should contact your Podiatric Surgery Team immediately. If they are unavailable, you should seek advice from your GP or Accident and Emergency (A&E) department
- **Convulsion (fits)**
- **Cardiac arrest** (stopping of the heart)
- **Anaphylactic reaction** for example a serious allergic reaction)
- **Slight vaginal bleeding / menstrual irregularities.** If it lasts longer than one cycle you should see your doctor
- **Tendon rupture**

FREQUENTLY ASKED QUESTIONS

IS THERE AN ALTERNATIVE TREATMENT TO LOCAL STEROID INJECTIONS?

The only alternative to a local injection is to take anti-inflammatory pain killing tablets however you may well have already been using these to help with your pain. These tablets often do not reduce the pain to a point where your foot is comfortable, which is why an injection is then the treatment of choice.

WHO WILL DO THE LOCAL STEROID INJECTION?

A specially trained podiatrist will do the injection after you have given your verbal consent.

HOW TO PREPARE FOR THE LOCAL STEROID INJECTION?

Your appointment for treatment will be arranged after a consultation in our clinic. You should eat and drink normally and arrive for your treatment on time and accompanied by an adult (a relative or a friend). You should take a shower before your treatment and you **must not apply** cosmetic products on your feet.

You should not apply any cream or rub which you might have been prescribed for reduction of your pain.

HOW IS THE LOCAL STEROID INJECTION DONE?

Most injections are quick and easy to perform. In some cases fluid will be removed from the area (i.e. joints or ganglions) before the injection is given.

For the steroid to be injected into a precise spot, an ultrasound scan or an x-ray may be used. You will not be required to wear protective x-ray covers. Sometimes you may be referred to have the steroid injection done under ultrasound.

WHAT HAPPENS ON THE DAY?

1. You will be taken to the treatment room and your blood pressure and heart rate will be checked
2. You may be asked to remove some clothes
3. You will be positioned either sitting or lying down on a couch
4. Your skin will be wiped with a sterilising solution
5. A needle will gently be positioned into the affected area and the steroid solution will be injected through the needle. During the injection you may have a sensation of stinging, pressure and slight discomfort for a very short while
6. After the injection, the site will be covered with a small dressing, usually a plaster. The dressing protects the area from infection and needs to stay on your skin for 24 hours.
During that period you should not wet the injection site.

WHAT HAPPENS IMMEDIATELY AFTER THE LOCAL STEROID INJECTION?

You may be asked to rest for up to 30 minutes after the injection before you can go home. It is advisable to have someone who can drive you back home and accompany you to this injection appointment.

You should try and rest for the first 12 to 24 hours after the injection and avoid any activities that normally make your symptoms worse. This reduces the chance of a post-injection flare and will help the steroid work.

WHAT TO EXPECT AFTERWARDS?

Local anaesthetic and steroid injections are usually very well tolerated and you can go back to work the next day. You may have a sensation of numbness in the treated area

immediately after the injection which may last for up to two (2) hours. You may be sore at the site of injection for up to 48 hours and you should take your usual painkillers or anti-inflammatory tablets as advised by your doctor. Make sure you refrain from strenuous work and extreme heat such as saunas or steam rooms for 48 hours.

A general principle is to move the joint injected as normal but do not lift or push heavy objects after the injection.

HOW QUICKLY WILL THE LOCAL STEROID INJECTION WORK?

This varies with individuals but most people report improvement of their symptoms within 24 to 48 hours. It can, however, take a few days or even weeks before any change is noticed and some patients gain little if any benefit from their use. In this case, a repeat injection may be recommended.

CAN I DRIVE AFTERWARDS?

No. You will not be allowed to drive on the day of your treatment. It is advisable to have someone who can drive you back home and accompany you to this injection appointment.

CAN I GO STRAIGHT BACK TO WORK?

No. It is advisable to take a day off work. You should rest for 12 to 24 hours after the injection. If your work involves heavy lifting, then try to reduce the workload over the next seven (7) days.

HOW LONG WILL THE EFFECTS LAST?

Your steroid injection is part of your treatment plan and it aims at breaking your pain circle. The effects vary from person to person. The less soluble steroids may take around a week to become effective but improvements can last for weeks or months, and in some cases longer or permanently.

However, there is no guarantee the injection will work for you. If you have had previous injections and they have not lasted, then your condition will be reassessed and a new treatment plan will be decided with your clinician.

WILL I HAVE A FOLLOW-UP APPOINTMENT?

You will be reviewed six (6) weeks after the steroid injection.

HOW MANY LOCAL STEROID INJECTIONS WILL I NEED?

You may need more than one (1) injection. If symptoms persist, your clinician may decide to inject again. There are a maximum number of times (usually 3 injections spaced over one year) that soft tissues or joints should be injected and, if necessary, the clinician will discuss this with you.

CAN I TAKE OTHER MEDICINES ALONG WITH THE LOCAL STEROID INJECTION?

You can take other medicines with local steroid injections. However, if you are taking a drug that thins your blood (an anticoagulant) such as warfarin, you may need an extra blood test to make sure your blood is not too thin to have the injection. This is because of the risk of bleeding into the joint.

You should mention you take anticoagulants to the person giving the injection to make sure they are aware. If you discuss this beforehand, you may be advised to adjust your warfarin dose before having the steroid injection.

If you are having other medical treatment within six (6) weeks of the injection you should inform the treating clinician.

CAN I DRINK ALCOHOL IF I HAVE BEEN GIVEN A LOCAL STEROID INJECTION?

Yes. There is no particular reason to avoid alcohol after an injection.

WHAT HAPPENS IF I HAVE DIABETES?

You will need to keep a closer eye on your blood sugars for 48 hours as the sugar levels often rise and you may need more insulin than normal (if you use insulin).

Contact your diabetes specialist for advice if your blood sugar is high.

I AM ON BIOLOGIC THERAPIES - DOES THAT MATTER?

You can still have a steroid injection in your foot if you are taking anti-TNF (tumour necrosis factor) therapy or other biologic therapies. You must be especially quick to let us know if you have any signs of infection. The infection could be worse because you are taking a medication that affects your body's natural defences against infection.

WILL THE LOCAL STEROID INJECTION CAUSE SIDE-EFFECTS THROUGHOUT MY BODY (I.E. WEIGHT GAIN, OSTEOPOROSIS)?

No. The injection contains a very low dose of steroid and because of its special preparation it will not spread significantly through the body.

CAN I HAVE IMMUNISATIONS AFTER A LOCAL STEROID INJECTION?

Yes.

CAN I HAVE A LOCAL STEROID INJECTION IF I AM PREGNANT, TRYING TO GET PREGNANT OR BREASTFEEDING?

Current guidelines state steroids are not harmful in pregnancy or breastfeeding so single steroid injections should not affect fertility, pregnancy or breastfeeding. However, if you are pregnant or breastfeeding, you should discuss with your clinician before having a local steroid injection.

CONTACT US

If you have any questions or concerns about local corticosteroid injections, please contact the podiatric surgery team.

e-mail: podiatric.surgery@nhft.nhs.uk

telephone: 01327 708102

If you feel it is urgent and you need to contact someone outside of these hours, telephone your GP, Out of Hours service or attend Accident and Emergency (A&E) at your local hospital.

PLEASE ASK IF YOU HAVE ANY FURTHER QUESTIONS REGARDING YOUR SURGICAL CARE.



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Inspected and rated

Outstanding ☆



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