

Patient information

Imaging Guided Steroid Injections

Radiology Department

Introduction

This leaflet tells you about the procedure known as imaging guided steroid injections, explains what is involved and what the possible risks are. It is not meant to replace informed discussion between you and your consultant or family doctor (GP) but can act as a starting point for such a discussion. You will have a chance to ask questions and you should have had sufficient explanation before your injection.

What is a steroid injection?

Steroid can be injected into joints, around tendons or nerves. It is usually done for pain control and occasionally to reduce inflammation. This is done through the skin using image guidance with ultrasound, computerised tomography (CT) or x-ray machine (fluoroscopy). If the injection is done with CT or fluoroscopy, a contrast dye containing iodine may be used to confirm correct needle position.

Why do I need it?

Your doctor referred you for a steroid injection, which may help reduce your pain or help the doctor find the cause of your symptoms.

Important

If you have any allergies, you must let your consultant and the radiologist know.

If you are on anticoagulation (medication to thin your blood) - please discuss with your referrer regarding if any action that may need to be taken.

How is the procedure done?

The procedure will take place in the X-ray department.

The radiologist will decide on the most suitable point for performing the injection.

The radiologist will keep everything sterile, your skin will be cleaned with antiseptic, and a sterile drape will be placed on you.

The radiologist will inject local anaesthetic (numbing medicine) into your skin, this may sting initially but it will numb the area quickly. You may be able to feel touch and pressure during the procedure, but you should not feel sharp pain.

If you do feel sharp pain, let the radiologist know and more local anaesthetic can be given.

You may feel some fullness as the joint is filled with steroid and local anaesthetic.

If you are getting an injection around a nerve, occasionally you may feel shooting pain which is temporary.

After the procedure, a sterile dressing will be applied over the injection site.

What are the risks?

If you are on anticoagulants (medication to thin the blood like warfarin, clopidogrel or aspirin) the small risk of bleeding is slightly raised but the radiologist performing the procedure will ensure that any bleeding has stopped before you leave the department.

Although there is a small theoretical risk of infection, the procedure is done with a sterile technique and the risks are very minimal.

There is a very small risk that the local anaesthetic used may occasionally cause side effects such as blurred vision, dizziness, or drowsiness but the amount used is very small.

If you are getting an injection into your hip or back, your leg may feel heavy, numb, or weak – **you must not drive home**. This should improve as the local anaesthetic wears off.

If you are unwell or prefer to defer your injection, please contact the Imaging department on Tel: 0151 706 2730 and let your consultant or GP know.

After the procedure

If you are getting an injection into your hip or around the nerves in your back, you must not drive home. Please arrange for someone to take you home after the test.

It is normal to have discomfort in the joint for up to two days, you may take over the counter painkillers such as paracetamol.

If you feel unwell, have fever and chills, skin changes or severe pain after the injection despite taking painkillers, please see your doctor or ring the telephone numbers below for advice. Out of hours please contact your doctors (GP) surgery or NHS 111.

If the pain is severe and you have been unable to obtain advice from your GP or NHS 111 please attend your nearest Emergency Department (A&E Dept).

You may keep a pain diary to record your pain relief and activity levels. This may help your consultant or GP decide on further treatment.

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further information

For any further information please contact the radiology department of the hospital you will attend

Radiology Department

Royal Liverpool Hospital

Tel: 0151 706 2730

Aintree Hospital

Tel: 0151 529 8988

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