Castle Mead Medical Centre and Pine Close Surgery Patient Information Leaflet- Steroid Injections

Thank you for taking the time to read this leaflet. We hope it provides some useful information prior to your joint injection appointment with the GP. Two GPs at Castle Mead Medical Centre currently offer joint injections: Dr Squires May and Dr Abraham. All GPs, however, will be able to counsel you on the proposed procedure. If you do have any further questions after reading this leaflet, please contact the surgery, who will be able to point you in the right direction. Please note that the GP will only do one injection at each appointment.

What is a steroid injection and why are they used?

Steroid injections, also called corticosteroid injections, are anti-inflammatory medicines used to treat a range of conditions. The aim is to reduce inflammation and pain in joints or localised areas of pain. It can treat conditions like osteoarthritis or a tendon issue.

What does a steroid injection contain?

Although there are different types of steroid that can be injected, the GPs at Castle Mead Medical Centre use a longer acting steroid to give you pain relief over a longer period of time. For most injections, the GP will also use a local anaesthetic. This will not reduce inflammation but may give you temporary relief from the pain. It usually wears off after an hour or so. The local anaesthetic is mixed in with the steroid, so there is only one injection.

How often can I have a steroid injection and how long does it last?

If effective, steroid injections normally last 3-4 months, but perhaps up to 6 months. If there is no effect on your pain after 6 weeks or the relief seems short lived, please contact your GP to discuss next steps. We would not normally do more than 2-3 injections a year in that joint/ area.

How long does the steroid injection take to work?

You should start to notice an improvement in your pain after one week, but it could take longer.

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

We would recommend you take it easy for at least 48 hours after your steroid injection. Please use the joint as normal but would avoid anything too strenuous. You can take some simple pain killing medication such as paracetamol, your usual prescribed medication or cold packs after the injection.

Can I leave the surgery after my steroid injection?

Yes. As with all medication, there is a small risk of an allergic reaction to the contents of the injection – even if you have had it done before and the injection has the same components. You should wait in the surgery for 10 minutes after the procedure. If you start to feel unwell, please alert a member of the reception team and they will ask a clinical team member to see you. Some people may ask a relative or friend to bring them to the surgery rather than driving, but there is no strict rule on this.

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

- The GP will discuss these with you again when you attend.
- Fortunately, side effects from the injection are rare. Not uncommonly, people notice a flare in their joint pain in the first 24-48 hours of having a steroid injection. This is called a 'steroid flare' and will settle down in the following few days and the benefits from the injection should be apparent.
- A very rare side of a steroid injection is infection in the joint or tissue. For every 20,000 patients who receive 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.
- Occasionally you may get a small amount of bleeding or bruising. The GP will ensure any bleeding has settled before you leave.
- Facial flushing and it can interfere with your periods.
- People sometimes notice dimpling or pigmentation change over the site where the steroid injection is given.
- Rarely, the injection can cause some damage to the tendon within the joint. This tends to occur when a tendon is already weakened or damaged.

What if I am diabetic or have high blood pressure?

If you are a diabetic the steroid may increase your blood sugars for a week after the injections. Your blood sugar levels should be monitored more closely than normal. Your blood pressure may also go up for a few days after the procedure. Please keep an eye on this, if you have a machine at home and are able to use it.

What if I take blood thinning medication?

If you are on blood thinning medication, the GP will need to take extra consideration and care, but this does not mean the procedure cannot be done. Please tell the GP if you are taking warfarin or a DOAC especially.

Other things to consider

Please tell the GP if you are;

- pregnant or trying for a baby
- have had a steroid injection in the last few weeks you usually need to wait at least 6 weeks between injections or you've had 3 steroid injections in the last year.
- have had an allergic reaction to steroids in the past
- have a current infection
- have recently had, or are about to have, any vaccinations
- have a weakened immune system.

Again, these factors do not mean the GP will not do the injection, but it needs to be weighed up.