

For further information about this service contact:

General Enquiries: 0300 555 0123

Physiotherapy Dept, Hinchingsbrooke Hospital, Hinchingsbrooke Park, Huntingdon, Cambs PE29 6NT

Physiotherapy Dept, Brookfields Campus, 351 Mill Road, Cambridge, CB1 3DF

Physiotherapy Dept, Princess of Wales Hospital, Lynn Road, Ely, Cambs, CB6 1DN

Physiotherapy Dept, Doddington Hospital, Benwick Road, Doddington, Cambs, PE15 0UG

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Advice after your Steroid Injection

If you require this information in a different format such as in large print or on audio tape, or in a different language please contact the service on the details above.

To find out how we use what we know about you (Privacy Notice) or how to access our buildings (AccessAble), please visit www.cambscommunityservices.nhs.uk and follow the links or please contact us.



If you have any compliments about this service or suggestions for improvements, contact our Patient Advice and Liaison Service on 0300 131 1000 (charges may apply depending on your network) or email: ccs-tr.pals@nhs.net.

For free, confidential health advice and information 24 hours a day, 365 days a year please contact NHS 111.



Some of the more common side effects

- ◆ You may feel very hot in the face over the first day or so.
- ◆ You may feel some local soreness or pain at the joint/injected structure.
- ◆ If you are diabetic please be aware your blood sugar levels may rise for up to 4 weeks following the injections.
- ◆ You may also notice localised lipoatrophy (fat loss in the area of injection) or localised skin depigmentation (lightening or darkening of the skin in the area of injection).

Rare side effects that require immediate action

- ◆ There is a very small chance (1 in 10,000) of an infection happening where the injection is placed. If you have a hot or swollen joint for 3 days after the injection, let us know, or go to your GP. If it's a weekend, you should go to A&E. To prevent infection, we use sterile techniques.
- ◆ Allergic reactions to the medication are very rare and we monitor you directly afterwards to make sure you are ok.

How does the steroid work?

- ◆ It works to reduce the inflammation or swelling inside your joint and soft tissues.
- ◆ When a joint or structure is painful and swollen, it is difficult to keep the muscles strong around the joint. These normally support the joint, and prevent little stresses and strains building up. If we can reduce the pain, it is then a good time to work your muscles gently to support the joint again.
- ◆ Start gently moving the part after a few days and build up muscles gradually. Ask your physio for the right exercises for your problem, but remember too much activity too soon means you'll get less benefit from the injection.

Things to be avoided:

- ◆ Please do not take anti-inflammatory (NSAIDS) medication for 6 weeks following your steroid injection (it can increase your risk of a gastric bleed).
- ◆ You should not have a live vaccine in the 3 months following your steroid injection.

If you do not understand anything on this sheet, please ask.

We would expect your symptoms to improve, although it is normal to have some residual symptoms. We have not arranged a follow-up but if you are struggling to manage your symptoms or have any concerns, please contact the MSK Specialist Service (0300 555 0123) within the 6-month open appointment period under a patient initiated follow up for a review.

Internet links for drug patient information leaflets

Below are internet links for patient information leaflets regarding the drugs we commonly use in therapeutic injections:

Lidocaine hydrochloride injection 1% : <https://www.medicines.org.uk/emc/files/pil.6277.pdf>

Depo-Medrone® with Lidocaine methylprednisolone acetate and lidocaine hydrochloride: <https://www.medicines.org.uk/emc/files/pil.1081.pdf>

Depo-Medrone® 40 mg/ml methylprednisolone acetate: <https://www.medicines.org.uk/emc/files/pil.8957.pdf>

Kenalog 40mg: <https://www.medicines.org.uk/emc/files/pil.6748.pdf>

ADCORTYL INTRA-ARTICULAR / INTRADERMAL INJECTION 10 mg/ml Triamcinolone acetonide: <https://www.medicines.org.uk/emc/files/pil.1410.pdf>