

Corticosteroid Injections Information and Instructions

Dr. Cole and his team have recommended for you to have a corticosteroid injection. Injecting cortisone can quickly treat an inflamed region/joint relieving pain. This procedure is simple and it does not take long to do. You should let his team know if you have had any adverse reactions in the past to steroids or local anesthetics or specific allergies to any known medications. Typically, there are two components of this injection: an injectable steroid and a local anesthetic. The injection can be viewed as both diagnostic and therapeutic. There are many misperceptions about cortisone or steroid injections and we are happy to answer any questions and share our experience related to their use. Previous scientific studies demonstrated that cortisone injections are reliable and safe and not associated with the risk for tissue damage or disease progression when properly utilized.

In situations where we are trying to confirm the diagnosis (i.e., biceps or rotator cuff tendonitis), immediate relief might occur from the effects of the local anesthetic. This can be particularly helpful in confirming the diagnosis and for planning future treatment, should the steroid prove to be beneficial. Should the steroid component of the injection provide therapeutic benefit, it can take 7-10 days to take effect. The results can be highly variable and range from no relief to complete relief for various periods of time. As the injection is an important alternative to surgery, we hope that the results of the injection can lead to substantially less pain and swelling and improved function. In addition, if the results are satisfactory and last more than 3 months, it can be repeated up to 3 times per year in any single location. We will often recommend additional non-operative measures to enhance the results of the steroid injection, including physical therapy, anti-inflammatory medications and other biological injections.

Getting the Injection

We will start by cleaning and numbing your skin with a freezing agent. You might feel some pressure while the injection is being done. A small bandage will be applied over the injection site.

Fortunately, complications and adverse reactions are very rare. They generally include (in order of decreasing frequency):

- 1. Elevated blood glucose levels in patients who are diabetic that can last between 24-72 hours. We recommend monitoring of blood glucose levels in our patients who have diabetes during this time in order to respond appropriately with medications, insulin, or dietary modifications.
- 2. A steroid flare is a self-limiting process that can last for 24-48 hours where there is an increase in joint pain in response to the injection which is managed with ice and anti-inflammatory medications. Should this occur, or if you have questions related to this, please contact the office by email at colepa@rushortho.com or 312-243-4244 and ask to speak with someone from Dr. Cole's team.
- 3. In areas where the skin is particularly thin or in patients with pigmented skin, local skin discoloration or fatty atrophy can occur. Like the other complications, these are rare and other than a change in cosmetic appearance at the site of the injection, they are not associated with any other long-term disability.

After the injection, protect the injected joint for a day or two and avoid high intensity activities. Ice is usually helpful as the joint can be more inflamed from the injection itself (rare). Do not use heating pads or bathtub, hot tub or whirlpool for two days. You may shower.