

## Image Guided Steroid Injections

---

### What is an image guided steroid injection?

It is an injection of local anaesthetic and steroid into the joints in your body. It can also be used to treat inflammation in soft tissues, such as shoulder tendons, tennis elbow and plantar fasciitis. It is carried out with the aid of either x-rays (fluoroscopy) or ultrasound. The local anaesthetic gives rapid pain relief. The steroid acts as a strong but localised anti-inflammatory to ease pain and reduce swelling, the effects of which last much longer than the local anaesthetic.

### Why do I need a steroid injection?

The procedure is designed to relieve pain; it can also act as a test to determine whether this is the joint where the pain is originating from.

### I have had injections before. How is this different?

This procedure is performed with the aid of either x-rays (fluoroscopy) or ultrasound. This means that the needle is constantly watched until it is in the appropriate location. It is for this reason that the injection can be performed from any direction (front, back or side). This results in an accurate injection with as little needle manipulation as possible.

### Who has made the decision?

The consultant team and/or GP in charge of your case will have referred you on to the radiologist carrying out your injection. If after discussion with the radiologist you decide you do not want the injection you can decide against it.

### What are the alternatives?

The alternatives would include physiotherapy and pain relieving medication (such as anti-inflammatories). These can be used in conjunction with each other.

Surgery is also a possibility in many conditions, but this is often reserved until other less invasive treatments have failed.

### Who will be performing the joint injection?

The procedure is carried out by a radiologist (a doctor who specialises in x-ray procedures); either a consultant or a specialist registrar. If under fluoroscopy the x-ray equipment is operated by a radiographer. A radiology nurse (in fluoroscopy) or radiology assistant (in ultrasound) will also be present during the procedure. These members of staff will introduce themselves at the start of the procedure. Occasionally student radiographers or medical students will be present to observe the procedure.

### Where will it take place?

In a fluoroscopy or ultrasound room.

### How do I prepare for a joint injection?

**You will need to bring someone with you who can drive you home as we advise you not to drive for the rest of the day.**

There is no specific preparation for the injection but if you normally take **warfarin** tablets please contact the **Medical Imaging Department** on **01392 402336** selecting option 2, in-patient enquiries, option 8 for radiology nurses. If you

take any other blood thinning medication, please tell the radiologist before the injection.

## Consent

Your verbal consent will be gained prior to commencing the examination.

## Can I bring a friend or relative?

Yes, but for reasons of radiation safety they may not be able to accompany you into the procedure room.

## Women of child bearing age – for fluoroscopic guided injections only

Pregnant women, if possible, should not have an x-ray test as there is a small risk that x-rays may cause an abnormality to the unborn child. This is why women are asked before having an x-ray if they are, or might be, pregnant. Please advise us on **01392 402336** in advance if you are, or think you might be pregnant.

## What happens during the procedure?

You may need to change into a hospital gown.

The radiologist will explain the procedure to you before he/she starts and will answer any questions you may have. You will then be positioned in either a chair, on the ultrasound couch, or on the x-ray table. If the procedure is using x-rays, the radiographer will move the machine to gain an image of the correct area. Alternatively, the radiologist will obtain an ultrasound of the area to identify the site for injection. The injection needle will be guided into the joint using either x-rays or ultrasound. If using fluoroscopy a contrast agent (dye) which shows up on the x-ray image may be injected to confirm position of the needle. Once the needle is sited in the correct place, a mixture of local anaesthetic and steroid is injected. This may cause discomfort or a feeling of tightness in the joint. The needle is then removed and a dressing or plaster applied.

## How long will the procedure take?

The procedure takes between 15 to 30 minutes.

## What happens afterwards?

We may give you a pain diary to complete in the weeks following your injection, which needs to be returned to the radiologist.

We suggest you do not drive for the rest of the day, but other than this there are no specific restrictions or rest recommendations.

## Will the injection work straight away?

No. The steroid usually starts working in around 5 days, but can sometimes take up to 10 days before it works well. The effects of the local anaesthetic should wear off in the first few hours following the injection.

## What will happen to the results?

We aim to report examinations, as soon as possible. Results will be sent to the doctor who referred you for the investigation, as they may need further review and therefore it could be approximately 20 days before you are contacted by your doctor.

You may be asked to complete a diary recording your pain for a few weeks following the injection. When we receive this back from you we will write a report and forward this on to the doctor as well.

## What are the potential risks/ complications?

Any adverse reaction to the injection is rare.

- There is a small possibility of an allergic reaction to the drugs used during the procedure. If this occurs it will be immediate, but very rare.

- If you are diabetic and take insulin, your blood sugar levels may be affected initially for a few weeks.
- Infection is a rare complication which can occur from an injection of any kind. If the injection area becomes red, hot and swollen and you feel unwell you should seek immediate medical help.
- Serious or breathing related side effects are not expected with this injection but if such symptoms are encountered you should seek immediate medical help via a GP or emergency department.

Other side effects are also very rare but can include:

- Skin thinning, dimpling and change of skin colour at the site of the injection.
- Flushing and redness of the face and upper chest for a few days.
- The area of the injection looking or feeling bruised for a few days.
- Occasional exacerbation of symptoms possibly lasting for a couple days. This can be treated with painkillers as required.

This list is not exhaustive and if there are further specific risks then the radiologist will inform you prior to injection.

## Valuables

Patients are encouraged to leave their valuables at home. It is the patient's responsibility to ensure all valuables are on their person before leaving the Medical Imaging Department.

## Cancelling your appointment

If you are unable to attend your appointment, we would be grateful if you could contact us on **01392 402336**, selecting option one, as soon as possible. We can then offer your original appointment to another patient. A further date and time will then be arranged for you. Please be advised that if you fail to attend your appointment, it may be necessary to remove you from the radiology waiting list.

**Please note: if you have had D&V (diarrhoea and vomiting) you will need to re-book your appointment unless you have been clear from symptoms for the past 48 hours.**

## Finally...

Some of your questions should have been answered by this leaflet, but remember that this is only a starting point for discussion about your treatment with the doctors looking after you. Make sure you are satisfied that you have received enough information about the procedure before you sign the Assent to Treatment form.

If you find reading this leaflet difficult or you don't understand what it means for you, please call **402336**, selecting **option 1**, then **option 4** and we can talk it through.

## Contact us

If you have any queries or concerns please contact us on **01392 402336**.

## How to get to the Royal Devon & Exeter Hospital at Wonford

### Park & Ride

- Our Dartline PR3 Park & Ride bus is quick and not expensive.
- It runs from Wonford Hospital to Digby. Digby is near Tesco, the railway station and junction 30 of the M5. There are signs along some of the main roads into Exeter pointing to the RD&E park and ride.
- The park and ride service runs from Monday to Friday. **There is no service at the weekend.**
- Sat Nav – EX2 7PZ

### By bus

- Stagecoach buses H Service run to Wonford Hospital from the high street in the city centre Monday to Saturday. Limited Sunday service. They also run to Wonford Hospital from the Broadfields area.

- Stagecoach buses from Exmouth (57), Dawlish (2), Torbay (X46), Teignmouth (2) and Plymouth (X38) stop next to the hospital on Barrack Road.
- First Southern National bus X53 from Weymouth , Seaton, Beer and Sidford stops next to the hospital on Barrack Road. Turner's Tours bus 369 from Chulmleigh, Lapford, Morchard Bishop and Crediton stops next to the hospital on Barrack Road and outside the main front entrance of the hospital.

## By car

Follow signposts to the hospital from most of the main routes into Exeter. Follow signposts in the hospital grounds to our car parks.

Car parking is by pay & display, so please bring change.

The number of spaces is limited, so please leave plenty of time to find a space.

## Using Sat Nav to find us?

Tap in postcode EX2 5DW for RD&E Wonford

For more information on how to get to the hospital, please use the following website:

**[www.rdehospital.nhs.uk/patients/where](http://www.rdehospital.nhs.uk/patients/where)**

For more information on the Medical Imaging Department, please visit our website:

**[www.rdehospital.nhs.uk/patients/service/medical-imaging](http://www.rdehospital.nhs.uk/patients/service/medical-imaging)**

*Modified with acknowledgment of, and permission from,  
the Royal College of Radiologists.*

The Trust cannot accept any responsibility for the accuracy of the information given if the leaflet is not used by RD&E staff undertaking procedures at the RD&E hospitals.

© Royal Devon and Exeter NHS Foundation Trust

Designed by Graphics (Print & Design), RD&E