

INSTRUCTIONS TO PATIENTS FOLLOWING OFFICE INJECTIONS (STEROID INJECTIONS)

In general, steroid injections are given with a local anesthetic, usually Lidocaine, to help control inflammatory reaction in bursae, around tendons, around ligaments, and in joints. The local anesthetic will usually numb the area for several hours. If a long-acting anesthetic, such as Marcaine, is used, it may remain numb for 6-8 hours. The steroid injection will become effective in 2-3 days and may last for several weeks to months. The effectiveness for relief of pain and inflammation by steroid injections is not always predictable. Some times they will help the pain and inflammation, and in other cases, they are not that effective.

Following a steroid injection, you should be protective of that joint or area of the body, particularly for the period of time that the local anesthetic has made the joint pain free. In some cases, there will be local bleeding due to the penetration of the needle, and you may experience some undue pain for 12-24 hours. In other cases, there can occasionally occur what is called a “flare reaction” which is a reaction to the steroid itself. This reaction may cause increased local redness and rather severe pain for 12-24 hours. If an injection is being given around a nerve, you may find that the local anesthetic will cause numbness in the area of the nerve distribution. An example of this is an injection around the inner side of the elbow may cause numbness in the ring and little fingers for the duration of the local anesthetic. After an injection, particularly if you experience any swelling, local redness, increased heat, or increased pain, it is appropriate to use ice directly on that area of the skin for not more than 15 minutes. If you use ice directly to the skin for longer than 15 minutes, you may experience an ice

burn or local freezing of the skin which could be injurious.

Ice can be applied every couple of hours until pain and local swelling subsides. If you experience pain after a local injection, generally, a mild pain tablet, such as Tylenol or Advil or some form of anti-inflammatory will help relieve the pain. Very seldom is there a need for pain killers, such as codeine, etc. If you have experienced severe pain in the past with local injections, it may be necessary to ask for an analgesic or pain prescription before leaving our office.

It is the policy of our office not to inject locally a steroid more than approximately three times per year. There can be detrimental effects for multiple steroid injections given repeatedly more than this. It is not a good idea to ask for steroid injections in preparation for some anticipated increased activity level.

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