Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Guided Therapeutic Injection in the Ultrasound Dept

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Guided Therapeutic Injections in the Ultrasound Department

Patient Information

Ultrasound Department

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Introduction

This advice is designed for patients who have been referred for an ultrasound-guided steroid injection by their Clinician. Your Clinician should have discussed the reasons for the injection with you prior to your referral.

What is a Guided Injection in Ultrasound?

The injection will be performed by a specially trained doctor known as a Radiologist; either a Consultant, or a Specialist Registrar who is being supervised by a Consultant. The site for injection will be identified using an ultrasound scanner which obtains a picture of the inside of the body without the use of X-rays. It is a very safe technique, using high frequency sound waves.

Consent

The procedure will be explained to you, and you will have the opportunity to ask any questions you may have. If your symptoms have changed since you were referred, or the Radiologist feels that the injection may be unsuitable for you, they will discuss this with you and inform the referring Clinician.

Steroid injections are used to ease pain and reduce swelling. The steroid is often injected in combination with a local anaesthetic. The injection maybe into a painful joint but may also be used to treat inflammation in soft tissues, and given into a tendon sheath, muscle or around a nerve for example.

How to prepare for your injection

There is no specific preparation for the injection, but you should advise the Radiologist performing the injection if you are taking any of the following drugs:

- Warfarin
- Aspirin
- Clopidogrel (Plavix)
- Apixaban (Eliquis),
- Dabigatran (Pradaxa)
- Rivaroxaban (Xarelto)

Please also inform the Radiologist if you are a diabetic, as the steroid injection may temporarily affect your sugar levels.

About the procedure itself

No special preparation is necessary.

The Radiologist will identify the site for injection by moving an ultrasound probe over the area, with you either lying on a couch or sitting in a chair. Your skin will then be cleaned with a sterile solution. Local anaesthetic may be injected at the same time as the steroid, which will provide short-term pain relief. There may be more than one injection depending on the area being treated.

The whole procedure should last between 15 and 30 minutes.

What happens afterwards?

If local anaesthetic has been injected, you may not feel any pain for a few hours afterwards. The area may feel uncomfortable and once the anaesthetic wears off, you may feel increased pain for a few days afterwards.

It is not advisable to drive for 4 to 6 hours after the injection. You may therefore need to arrange someone to drive you home afterwards.

Important things to know

What are the benefits of having this type of injection?

The purpose of the injection is to reduce pain and/or inflammation in the affected joint or tendon injected.

Risks and side effect of steroid injections

Possible side effects of steroid injections depend on where the injection is given.

Side effects of injections into the joints, muscles or spine can include:

- Pain and discomfort for a few days – paracetamol may help with this
- Temporary bruising or a collection of blood under the skin
- Flushing of the face for a few hours
- An infection causing redness, swelling and pain. If you have these symptoms, or if you experience redness or swelling around the area injected, or a high temperature, you should see your own General practitioner (GP), or attend the Emergency Department and explain you have recently had an injection
- A loss of fat where the injection was given – this can cause dimples in the skin and may be permanent
- Paler skin around the site of the injection – this may be permanent
- If you have high blood pressure, your blood pressure may go up for a few days
- If you have diabetes, your blood sugar level may go up for a few days. Diabetics should closely monitor their blood for 5 days following the injection , as blood sugar levels may go up.
- There is a risk of facial flushing following steroid injection

Alternatives

Alternatives to steroid injections may include physiotherapy or more systemic treatments (such as anti-inflammatory tablets). These treatments will usually have already been used before a steroid injection is considered.

Surgery is also a possibility in many conditions, but this is often reserved for when other measures have failed. You may discuss this option with your Doctor.

What if I have other questions?

If you have any questions, doubts, or worries about this procedure just ask. The ultrasound staff would like to make you feel as relaxed as possible.

What to do if you need ambulance/transport

If you need an ambulance/ transport, you should ask your GP Surgery for the contact details to arrange this. You will need to give them three working days' notice. Please note that hospital transport is provided on medical need only.

If you cannot attend your appointment, please contact the Ultrasound Department at the Hospital where you have been given an appointment so that we can offer your appointment to somebody else.

We will be glad to offer you an alternative appointment and will try our best to accommodate you at a date and time suitable to you.

If arriving by Car

Please allow plenty of time to park your car.

If this information does not answer your questions, please contact the X-ray Department who will be pleased to help you:

Contact Department of Radiology at:

Royal Albert Edward Infirmary

Wigan Lane

Wigan

WN1 2NN

Telephone: 01942 822409, Monday to Friday 8:30am until 5pm.

Leigh Infirmary

The Avenue

Leigh

WN7 1HS

Telephone: 01942 264217

Thomas Linacre Centre

Parsons Walk

Wigan

WN1 1RU

Telephone: 01942 774608

Wrightington Hospital

Hall Lane

Appley Bridge

Wigan

WN6 9EP

Telephone: 01257 256212



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