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STEROID INJECTIONS

READ THIS IF YOU ARE PLANNING ON HAVING A STEROID INJECTION

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Why would we use a steroid injection?

Local injections of steroids are sometimes needed when a patient has not been able to achieve complete healing. They should be trialled only when other treatment options exhausted or circumstances require. They are routinely used alongside other treatments to help relieve painful foot conditions, caused through damage that result in inflammation of the nerves, soft tissue or joints.

How does it work?

Corticosteroids are naturally produced by the body for a number of reasons including reduction of inflammation and pain. The steroid we inject is made synthetically, in a concentrated dose and acts locally where it is injected. It does not generally effect the rest of the body and so should not be confused with steroids that are taken in tablet form.

Are there any health problems we need to know about?

We need to know if you:

- Are pregnant, think you may be pregnant, or are breast feeding.
- Have ever had an allergy (itching, wheezing) to steroids or local anaesthetic (e.g. at the dentist) before.
- Have an infection of the skin near the site to be injected.
- Have any general viral infections.
- Have any bleeding disorders or are receiving any medicines that stop blood clotting, such as Warfarin or aspirin
- Have very high or low blood pressure, or any blood infections, liver, kidney or heart problems
- Have any disease or disorders affecting the brain or spinal cord (including epilepsy).
- Have dehydration or recent vomiting diarrhoea or blood loss.
- Have any tumours or an accumulation of fluid in the abdomen (acites).
- Have been told you have too much acid or not enough oxygen in your body tissues.
- If you have any other diagnosed health problems.

Will it hurt?

Some people find injections in the foot uncomfortable. Some injections we may also be given with a quick acting local anaesthetic to block the nerves first.

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What can you expect after the injection?

After the injection, rest for 20 minutes, and avoid any activities that usually makes your symptoms worse over the next 2-3 days. This will help the steroid work more effectively.

Some people notice improvement in their symptoms as quickly as 24-48 hours. In other cases it can take longer before any change.

We will usually ask you to report back to us 4 weeks after the injection so we can assess the symptoms. Improvement can last weeks, months or can be permanent. Some injections may even need to be repeated.

What are the side effects?

Side effects from the low doses of steroids used are rare but can occur. The most common are:

- A steroid 'flare' - pain at the injection site. The pain can be quite severe but settles down in a day or two. Take over the counter painkillers such as Paracetamol, rest the foot and apply an ice pack for no more than 15 minutes at a time.
- Local bruising
- Infection - rarely
- Rupture of soft tissue can occur at the site of injection – this is unlikely to occur if you take it easy for a few days after the injection.
- Fat wasting -a small amount of fat under the skin may be affected by the injection. This may leave a small indentation at the injection site – this is rare.
- Facial flushing - this may occur 24-48 hours after the injection, but will settle in a day or two- this is rare.

  After the injection let us know if you notice any skin rashes, itching, wheezing, swelling of the lips or tongue or feeling suddenly weak or unwell.

Can anything go wrong?

Steroid injections are routinely used and are generally safe. However, if you are concerned, particularly if you suspect infection- the area becomes red, hot, swollen, discharges pus or you feel unwell contact us immediately or your GP.