

# Joint Injection

## WHAT IS A JOINT INJECTION?

A joint injection is a procedure that places steroids and numbing medication directly into the joint. There are many joints throughout the body that can be injected. This procedure helps reduce inflammation which can result in long-term pain relief. It will also provide valuable information on the source of your pain for your doctor.

## WHAT ARE THE TYPES OF JOINTS INJECTED?

The **Shoulder and Hip Joints** are the most common joints in the body to be injected. However, we can also inject the ankle, wrist, and elbow joints. These joints are usually inflamed due to overuse injuries or arthritis.

The **Facet Joint** is located on the back of the spine on each side of the vertebrae where they overlap the next vertebrae. The facet joints provide stability and give the spine the ability to bend and twist. If these joints become painful (usually due to trauma or arthritis) they may cause pain in the low back.

The **SI Joint (sacroiliac joint)** are small joints in the top of the buttocks where the pelvis joins with the spine. If the joints become painful (usually due to trauma or arthritis) they may cause pain in the low back, buttocks, abdomen, groin or legs.

The **Sacrococcygeal joint** (tailbone) is a joint formed between part of the spine (the sacrum) and the base of the tailbone. If the joint becomes injured or inflamed (most likely from trauma) it can cause pain in the low back, buttocks, or legs.

## HOW IS THE PROCEDURE DONE?

The patient will be placed on an x-ray table, either on their back or front (depending on which joint is being injected). The skin over the joint is marked using a fluoroscopy machine (live x-ray), and then cleansed with antiseptic soap (ChloroPrep). The skin is then injected with lidocaine (numbing medication). Using the x-ray machine, the physician directs a needle toward the joint space. The physician uses a small amount of contrast (dye) to verify that the needle is in the correct position, and then injects a long-acting numbing medication (Ropivacaine) and the steroid. A joint injection usually takes between 15 and 20 minutes. The patient will be observed for approximately 20 minutes after the procedure.

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## WHAT ARE THE MEDICATIONS USED?

- Lidocaine (short-acting numbing med)
- Kenalog (Steroid)
- Ropivacaine (Long-acting numbing med)
- Contrast (dye)
- ChloroPrep (skin cleanser)

## WHAT IS A STEROID?

Steroids (glucocorticoids) occur naturally in your body and are important for a number of bodily functions. Steroids are best known for their very potent anti-inflammatory effect.

## WHAT SHOULD YOU EXPECT DURING THE PROCEDURE?

Most often, the sting of the numbing medication is the most uncomfortable part of the procedure. You may experience some pressure as the medications are injected.

## WHAT ARE THE RISKS INVOLVED WITH A JOINT INJECTION?

Risks include bleeding, infection, and allergic reaction to the medication. The patient may have increased pain or tenderness for a few days after the injection. Patients with diabetes may experience short-term elevation of blood sugars.

## WHAT SHOULD YOU EXPECT AFTER THE PROCEDURE?

Most patients feel improvement in their pain immediately after the injection due to the anesthetic. However, this immediate pain relief may only be temporary and last for 8-10 hours after the procedure. The **steroid will take three to five days** to start to have an effect in most patients and will peak in about two weeks. Therefore, it may be a week or two before the patient feels a change in their pain. Some local tenderness may be experienced for a couple of days after the injection. Using an ice pack three or four times a day for 20 minutes will help this. The patient may take their usual pain medications after the injection.

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**After this procedure, we recommend no heavy lifting (>10 lbs) or exercise, no prolonged standing or walking (> 20 minutes), and decreased stair climbing and bending for three days after the procedure.** This will help your joint relax as the steroids are working to decrease the inflammation. **No heat is to be used in the injected area for the remainder of the day. No tub bath or soaking in water (i.e. pool, jacuzzi, etc.) for 24 hours.**

## **FOR WHAT REASONS SHOULD THE PATIENT CALL THE RADIOLOGIST AFTER THE INJECTION?**

If the patient experiences severe pain, new numbness or weakness in the area injected, or signs of infection in the area of the injection, the patient should call right away at (804) 237-6619.