



Steroid injections for shoulder and elbow pain

Information for patients

You have been referred to the hospital as you are experiencing pain in your shoulder or elbow, and your doctor feels that you would benefit from having a steroid injection to help with your pain. This leaflet explains what steroid injections are and will also provide you with information what what you need to do through the process. If after reading this leaflet you have any further questions, please speak to your consultant.

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How do steroid injections help with shoulder or elbow problems?

Steroids are an anti-inflammatory medication. They help by preventing and treating inflammation (swelling, heat, and redness) and pain of musculoskeletal soft tissue, such as muscles. It provides many patients with lasting relief from their symptoms, especially improving pain and therefore avoiding/postponing the need for surgery.

What will I be injected with?

The injection has two ingredients.

1. **Local anaesthetic** (lidocaine, bupivacaine, or levobupivacaine), which makes the injection more comfortable.
2. **Slow-release steroid** (depomedrone or kenalog), which is an anti-inflammatory medication that reduces your inflammation and pain. This allows you to begin exercises and shoulder physiotherapy, which will help you use your shoulder/elbow properly again.

Are there alternatives?

You will be provided with other treatment options depending on your condition. These could be physiotherapy and/or surgery.

Is only one injection necessary?

If the injection gives you relief for few months and you are satisfied with the result, you can have more of them in the future. If it does not work other options can be considered, depending on your condition.

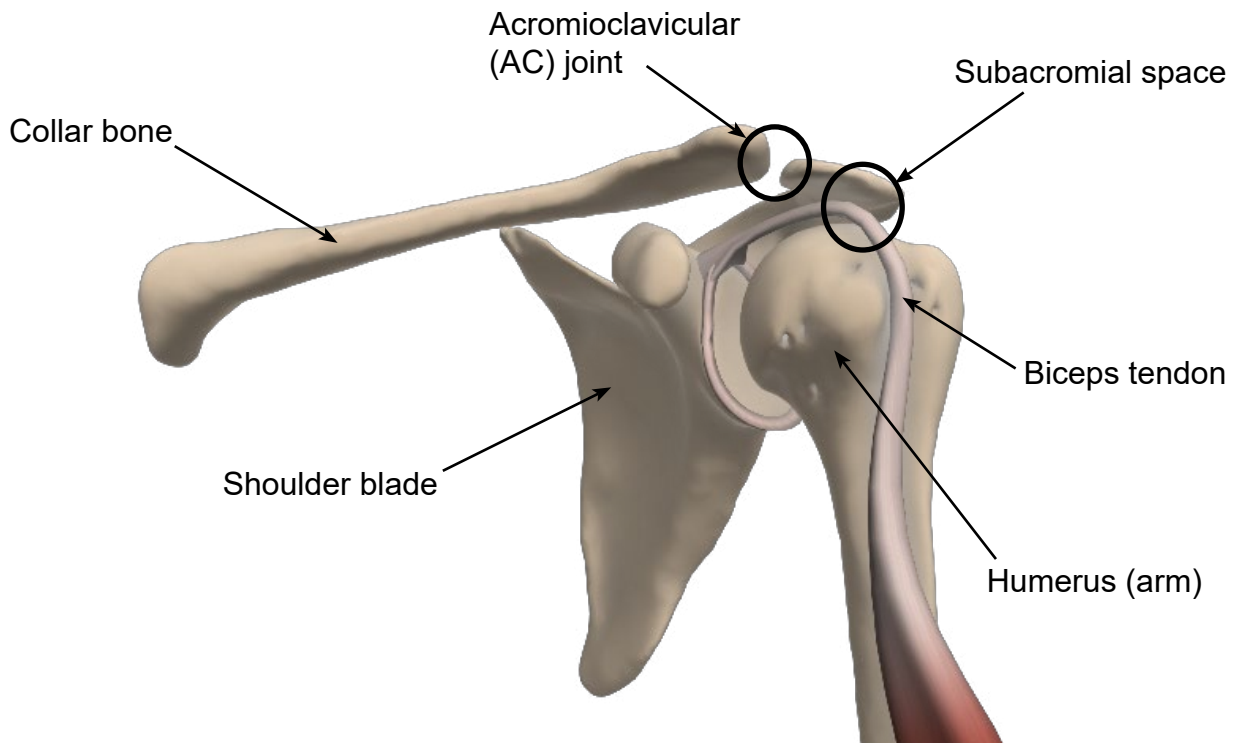
Who will give me my injection? And where is it done?

Your injection will be given by an appropriately trained member of staff at your outpatient appointment.

It takes less than five minutes to prepare the medication and inject it, this will be done during your appointment with your healthcare practitioner. You can go home straight after your injection.

What area of my body is injected?

The painful area of your shoulder or elbow will be injected after an examination and confirmation of your symptoms. Sometimes the injection will be carried out using ultrasound guidance.



Are there risks and side effects to having the injection?

As with all invasive procedures there are some risks and side effects to having this injection.

- **Infection at the site of the injection.** We do everything we can to avoid this, but an infection might still happen. If the place of injection becomes increasingly red or swollen after your injection, please contact your GP or your surgical team for advice as soon as possible.
- After your injection **your pain will be worse** for a while and sometimes there is a little swelling, redness, and heat around the area where the injection was given. This can last for up to 10 days. This is temporary and will settle with the help of non-steroidal anti-inflammatory drugs (such as ibuprofen) or simple painkillers (such as paracetamol). An ice pack over the area may also help.
- Your **face may become red or flushed** but this usually only lasts for 24 to 48 hours and is not uncomfortable.
- The **skin around the area** where the injection was given **may become a bit discoloured or thin**; this could be a permanent change.
- If you are **diabetic**, you may have a **temporary fluctuation of your glucose levels**, so it is important to monitor your sugar levels for up to two weeks after your injection.
- You may have an **allergic reaction** to the drug but this is very rare. Please tell the person giving you the injection if you have had a previous allergic reaction to local anaesthetic or steroids.

- Women: **your monthly period may become irregular** during your first cycle after your injection.
- **The procedure may not be successful** and you may need further treatment in the future, if after a couple of weeks your original symptoms continue.

If you want to discuss these side effects further, please speak to the person giving you the injection. They will be happy to answer your questions.

How will I feel after my injection?

- A local anaesthetic is used during the procedure, which means that immediately after the procedure your shoulder or elbow may feel numb and pain-free. This may last a few hours.
- The anti-inflammatory effect of the steroids will start 24 to 36 hours after your injection.
- After your injection you may have more discomfort, which can last up to one to two weeks. If this happens you can take non-steroidal anti-inflammatory drugs (such as ibuprofen) or simple painkillers (such as paracetamol), following the dosage instructions on the packaging.
- You should start to feel some relief of your symptoms within 24 hours. The relief may last for weeks, months, or longer.
- For some patients, the injection does not work at all or only for a very short period; it is difficult to predict this.

How do I care for my dressing at home?

After your treatment a dressing will be covering your wound. This can be taken off after a couple of hours.

Can I have a bath or shower?

Yes.

When can I drive?

You can drive home after your injection, unless you have a flare up of pain.

When can I resume my normal activities?

Do not do the sport or repetitive activity which caused your problem for one week after your injection.

Steroid injections and athletes

Please note that steroid injections are banned for any athlete that is subject to testing under WADA (World Anti-Doping Agency). You will need a special therapeutic use exemption and supporting documentation from your doctor.

When can I return to work?

You may return to work as soon as you feel able. We advise you to avoid heavy or repetitive activities for up to three days after your injection.

Will I have any follow-up treatment?

If needed, you will have a follow-up appointment to check your progress.

You will be referred to physiotherapy, so they can help your shoulder or elbow work properly again.

What if I have any concerns or questions?

If you have any questions or concerns, please contact your surgical care practitioner, surgeon, or physiotherapist. Their contact details are listed at the end of this leaflet.

If you notice your wound area is becoming more painful, red, hot, and/or discharging pus (thick yellow discharge) you may be developing an infection. Contact your GP or your surgical team for advice as soon as possible.

This leaflet has been produced with and for patients

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email ekh-tr.pals@nhs.net

Patients should not bring in large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals web site www.ekhufft.nhs.uk/patientinformation

Contact details

• Consultants and their secretaries

Hospital site	Consultant	Secretary name	Contact number
Kent and Canterbury Hospital, Canterbury	The teams listed below work at Kent and Canterbury Hospital as well		
Queen Elizabeth the Queen Mother (QEQM) Hospital, Margate	Mr Sathya Murthy	Tracy Blackman	01843 23 50 68
	Mr Georgios Arealis	Donna Cannon	01843 23 50 83
William Harvey Hospital, Ashford	Mr Paolo Consigliere	Heather Littlejohn	01233 61 62 80
	Mr Jai Relwani	Dione Allen	01233 61 67 37
	Surgical Care Practitioner	Patricia Velazquez-Ruta	07929 37 53 81

• Physiotherapists

Hospital site	Physiotherapist	Contact number
Buckland Hospital, Dover	Abi Lipinski	01304 22 26 59
Kent and Canterbury Hospital, Canterbury	Sarah Gillett (inpatient)	01227 86 63 65
	Darren Base	01227 78 30 65
Queen Elizabeth the Queen Mother (QEQM) Hospital, Margate	Caroline Phillpott (inpatient)	01843 23 45 75
	Martin Creasey	01843 23 50 96
Royal Victoria Hospital, Folkestone	Ailsa Sutherland	01303 85 44 10
William Harvey Hospital, Ashford	Cindy Gabett (inpatient)	01233 63 33 31
	Chris Watts	01233 61 60 85

• Surgical Preassessment Units

Hospital site	Contact number
Kent and Canterbury Hospital, Canterbury	01227 78 31 14
Queen Elizabeth the Queen Mother (QEQM) Hospital, Margate	01843 23 51 15
William Harvey Hospital, Ashford	01233 61 67 43

• Fracture Clinics

Hospital site	Contact number
Kent and Canterbury Hospital, Canterbury	01227 78 30 75
Queen Elizabeth the Queen Mother (QEQM) Hospital, Margate	01843 23 50 56
William Harvey Hospital, Ashford	01233 61 68 49