MORTON & PARTNERS

RADIOLOGISTS

INTRA-ARTICULAR/JOINT INJECTION

WHAT IS A JOINT INJECTION?

A common cause of joint pain is synovitis (inflammation of the lining of the joint). An injection of corticosteroid and/or local anaesthetic medication directly into the joint can sometimes be helpful in reducing the inflammation and providing pain relief. The injection needle is guided, most often using ultrasound, but x-ray or computed tomography (CT) can also be used.

WHY WOULD MY DOCTOR REFER ME TO HAVE THIS PROCEDURE?

- there is known inflammation in the joint not improving with other treatments;
- reveals if the joint itself is responsible for your symptoms;
- medication needs to be injected directly into the joint and not the surrounding soft tissues;





PROCEDURE PREPARATION

Before your appointment day you do not need to do anything special before a joint injection. You may eat and drink as normal.



ON THE DAY OF YOUR APPOINTMENT

- Please take any previous X-rays, ultrasound, CT or MRI scans taken as part of your joint pain history.
- Wear comfortable clothing with easy access to the joint being injected.

AFTER YOUR APPOINTMENT

- After the local anaesthetic wears off there may be increased discomfort due to the pressure of the fluid in the joint. The discomfort should settle in the next 24-48 hours as the Cortisone takes effect.
- Keep a mental diary of the effect of the injection and report back at the next visit or communication with your referring clinician.



DURATION OF THE PROCEDURE



It varies, but will generally take between 15 and 30 minutes.



WHAT HAPPENS DURING A JOINT INJECTION?

A preliminary scan will be done to locate the exact point to be injected. A needle will be placed into the joint either at the point marked on your skin sometimes the radiologist may remove some fluid from the joint for analysis before giving the injection.

Take note that the local anaesthetic will kick in 5min after the injection.

FREQUENCY OF THE PROCEDURE







- No guarantee that this injection will alleviate the pain in the joint completely,
- On average patients experience up to 18 weeks of pain being alleviated.
- Some patients may also have a flushed red in the face look for 48 hours ('Steroid Flare') this is however, very rare and benign.
- Diabetic patients will experience elevated glucose levels for 48 hrs.
- There is a risk of infection, although very low, at 0.02%.
- Occasionally, a localised area of skin depigmentation can occur at the injection site.
- Having the injection more than three or four times a year to avoid damage to the joint.
- Occasionally, people are allergic to the injected medication (as with any drug). The exact risk of this is not known, but it seems to be very uncommon.
- They do not provide long-term pain relief and do not alter the course of underlying joint disease (e.g. osteoarthritis)



- Can reduce the synovial inflammation and pain, enabling physical therapy.
- Overall, steroid injections into joints appear to provide short- to medium-term pain relief (3 weeks to 3 months), particularly when combined with the appropriate physical therapy.

The joint injection is carried out by a specialist doctor (ie. radiologist). The radiologist will provide a written report to your doctor about the procedure.



WHERE IS A JOINT INJECTION DONE?

The procedure will be completed at a Morton & Description of the street of the Should you have any questions please do not hesitate to contact Morton & Partners:

www.morton.co.za

