

Image Guided Injection

What is an image guided injection?

An image guided injection is a procedure that injects medication into a joint, bursa (sac-like cavity situated in places in tissues where friction would otherwise occur) or around a tendon. The injection is usually a mixture of a local anaesthetic and corticosteroid medication. (steroids are used to reduce inflammation, which in turn reduces pain. Pain relief can be long lasting or temporary. You should experience an improvement in your symptoms within three to seven days. The procedure is performed using the guidance of imaging machines such as ultrasound, CT or x-ray.

What is corticosteroid?

Corticosteroids are a group of drugs used in the treatment of various parts of the body where inflammation is felt to be the cause of the pain. It is a strong anti-inflammatory and is used in musculoskeletal problems to reduce or eliminate pain.

Preparation for the procedure

- Please tell the staff if you are or suspect you might be pregnant, prior to us commencing your procedure.
- If you take, Aspirin, Warfarin, Clopidogrel, Dipyridamole, Rivaroxaban or any other drug that is used to thin your blood ask your doctor/ GP if you should stop taking it before the procedure as it may affect your blood clotting.
- Please bring a list of, or all of your prescribed drugs, including those drugs you buy over the counter, herbal remedies and supplements.
- Do not drink any alcohol and stop recreational drugs 24 hours before the procedure as these may alter the effects of the sedation/ anaesthetic.

During the procedure

- Images may be obtained using ultrasound or x-ray. The radiologist (Doctor) may inject a local anaesthetic to the skin and superficial soft tissue.
- Using imaging as a guide, the needle will be inserted into the relevant body part.
- When the needle is in the correct place the medication will be injected. The needle is taken out and a dressing applied to the puncture site.

After the procedure

- Imaging staff will discuss with you the level of activity that is suitable after your procedure. We advise you do not drive for at least 24 hours as your vehicle insurance might be invalidated if you were to have an accident.
- If a steroid was injected it is normal to have some pain at the site for a day or two. Ice packs or simple 'over the counter' pain killers are usually enough to relieve this pain.

When will I get the scan results?

Your results will be sent to your consultant or GP within seven to ten working days.

If you would like to discuss your procedure or if you have vision, mobility or access issues please contact the Imaging Department on **01273 664575**.

Risks of the procedure

The risks and complications with this procedure can include but are not limited to the following:

Common risks and complications include:

- Bleeding or bruising may occur. This is more common if you take Aspirin, Warfarin, Clopidogrel, Dipyridamole, Rivaroxaban or any other blood thinning tablets.
- Failure of local anaesthetic which may require a further injection of anaesthetic or a different method of anaesthesia may be used.

- Nerve damage which is usually temporary and should get better over a period of time. Permanent nerve damage is rare.
- Mild transient increase in blood sugar levels in diabetic patients.
- Temporary exacerbation of the symptoms, palpitations, hot flushes.

Less common risks and complications include:

- Infection, requiring antibiotics and further treatment.
- Damage to surrounding structures, such as blood vessels, organs and muscles leading to localised skin and subcutaneous fat atrophy (thinning/dimpling of skin) or hypopigmentation (skin discolouration) at the injection site.
- Steroids could cause weakening to tendons if directly injected into a tendon. Most injections are around the tendon and the tendon is rested.
- An allergy to the injected drugs, requiring further treatment.
- The procedure may not be possible due to medical and/or technical reasons.

Alternatives:

Since cortisone injections are used for treating pain, it is an optional procedure. Other options should be discussed with your referring doctor/clinician and may include anti-inflammatories, physiotherapy and surgery. If you would like to discuss your procedure or if you have vision, mobility or access issues please contact the Imaging Department on **01273 664575**.



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The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

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