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Shoulder, Elbow & Hand Surgery

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INSTRUCTIONS TO PATIENTS FOLLOWING OFFICE INJECTIONS (STEROID INJECTIONS)

In general, steroid injections are given with a local anesthetic, usually Marcaine or Lidocaine, to help control inflammatory reactions in bursae, around tendons, around ligaments and in joints.

The local anesthetic will usually numb the area for several hours. If a long-acting anesthetic, such as Marcaine, is used, it may remain numb for 6-8 hours. The steroid injection will become effective in 2-3 days and may last for several months. The effectiveness for relief of pain and inflammation by steroid injections is not always predictable. Sometimes, they will help the pain and inflammation, and in other cases, they will not be that effective.

Following a steroid injection, you should be protective of that joint or area of the body, particularly during the period of time that the local anesthetic has made the joint pain free. In some cases, there can be localized bleeding due to the penetration of the needle, and you may experience some undue pain for 12-24 hours following an injection. If an injection is being around a nerve, you may find that the local anesthetic causes numbness in the area of the nerve distribution. An example of this would be an injection around the inner side of elbow causing numbness in the ring and little fingers for the effective duration of the anesthetic.

Following a steroid injection, particularly if you experience any swelling localized redness, increased heat, or increased pain, it is appropriate to use ice directly on that area of the skin for no longer than 15 minutes. If ice is applied directly to skin for longer than 15 minutes, you may experience an ice burn or local freezing of the skin, which could be injurious. Ice can be applied every couple of hours until pain and localized swelling subside.

Following a steroid injection, blood sugar levels may rise for 24 to 48 hours. For patients with diabetes, this rise in blood sugar should <u>NOT</u> be treated with additional dosage of medication.

If you experience any pain after a local steroid injection, generally, a mild pain tablet, such as Tylenol or Advil or some other form of anti-inflammatory can help relieve the pain. Very seldom is there a need for strong pain killers (such as codeine, etc.). If you have experienced severe pain in the past with local injections, it may be necessary to ask for an analgesic or pain prescription before leaving our office.

It is the policy of our office not to inject a steroid locally more than approximately three times a year. There can be detrimental effects for multiple local steroid injections given more repeatedly than this.

It is generally not advised to ask for a steroid injection in preparation for anticipated increased in activity level.