

Cortisone Injection

Cortisone is commonly used in the treatment of musculoskeletal disorders to suppress inflammation and/or reduce tissue swelling. They are not anabolic muscle building agents.

Why inject cortisone?

1. To reduce or eliminate pain with a variety of disorders (e.g. Tendinopathy, Bursitis, Arthritis). Although cortisone injections can be very helpful in relieving pain, they generally form only part of your overall Doctor's treatment plan.
2. To confirm or exclude a specific diagnosis. This precise cause of pain can sometimes be difficult to determine. In this situation, an injection into a specific anatomical space can help to confirm or exclude a diagnosis.

What are the benefits of cortisone injections?

Results vary, but some degree of pain relief occurs in about 70% of cases. For some, this relief is dramatic and long lasting, while for others the benefit is only modest or short-lived and for a minority there is no benefit at all. The benefits begin after about 2-3 days.

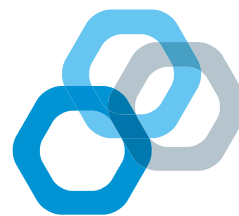
Procedure

A doctor specialising in musculoskeletal radiology performs the procedure. The skin is wiped with an antiseptic agent. A thin sterile needle is used to inject a local anaesthetic agent mixed with cortisone into the targeted area under image guidance to ensure accuracy. As a result, the level of discomfort or pain experienced during the procedure is generally only mild. A greater level of discomfort may be experienced if the underlying inflammation is severe. Some injections require the needle tip to be re-positioned several times (e.g. calcium aspiration from a shoulder tendon), but additional anesthetic is used in these cases.

Are there any risks or side effects?

There are risks or side effects associated with any form of treatment, but significant complications with cortisone injections are rare.

- The most common side effect is a transient increase in pain at the injection site before the cortisone takes effect, and this can sometimes be severe. These 'flares' do not occur in all patients and mostly happen in the first 24-48 hours after injection. This can be treated with analgesic measures (e.g. panadol and/or cold packs).
- Occasionally patients develop a red face and feel flushed. This usually occurs on day 2-3 and can last up to 7 days. In some cases it is accompanied by 'flu' like symptoms, but you should not have a temperature. This usually clears spontaneously and may be relieved by antihistamines.
- Insulin dependent diabetic patients may notice a moderate rise in blood sugar for up to 10 days after injection. You may need to temporarily adjust your medications as appropriate. Please consult your diabetic / management doctor if concerned.
- Infection is rare, but a potentially serious complication – if you experience fever, localised heat, swelling or increasing pain at the injection site more than 48 hours after the injection, you should consult your doctor without delay. If any doubt remains, antibiotic treatment will be given.
- Cortisone injected directly into a tendon has been reported to weaken and damage the fibres, and thus carries a risk of delayed tendon rupture.



- All other risks are either very uncommon or rare, but include allergy (to either the antiseptic agents or the injected drugs), and localised bruising. Superficial injections carry a risk of localised skin and subcutaneous fat atrophy (dimpling), and rarely hypopigmentation (white skin) at the injection site.
- AVN (avascular necrosis), a condition leading to bony collapse of the femoral or humeral heads is a recognised hazard of prolonged high-dose (usually oral) steroid therapy, but has not been documented with isolated injections of cortisone. Isolated injections of cortisone do not cause osteoporosis or any alteration in facial appearance, weight or bony avascular necrosis.

Post Procedure

When the anesthetic wears off you may ache at the injection site.

- You may experience pain for 48 hours.
- Cortisone takes approximately 36 hours to start to work, but may be longer or shorter.
- If you are concerned that you are having untoward after effects from your injection, please ring Imaging @ Olympic Park or your Referring Doctor

Are there alternatives to cortisone injections?

There are other treatment options available, but you should discuss this with your referring doctor prior to making an appointment at Imaging @ Olympic Park. Cortisone injections are optional procedures that carry no guarantees of success and no untoward consequences if declined. There is no penalty for changing your mind prior to the scheduled injection.

Please bring to your appointment

Please bring your referral from your doctor along with the following:

- Medicare Card
- Pension/Concession Card
- Previous films

Concerns

It is important you understand why and how we will be assisting you. Please feel free to contact our friendly staff at any time if you have any questions or concerns on [03 9420 1700](tel:0394201700).

Find Us

We are situated in the new AAMI Park. Free on-site parking available for our patients- enter via Entrance F and continue to Car Park F.

