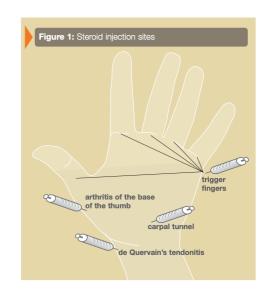


Steroid Injection

What is a steroid injection?

Steroid injections are used to treat a variety of inflammatory conditions in the hand and wrist. These conditions include trigger finger, carpal tunnel syndrome, arthritis, De Quervain's tenosynovitis, and tendonitis.

The injected medication is a synthetic corticosteroid, and your surgeon may combine it with some local anaesthetic. Corticosteroids are naturally produced in our bodies by the adrenal glands, and they act to dampen down inflammation. When distilled into a targeted injection, they can powerfully reduce the inflammation in that area. Please note: anti-inflammatory steroids used for these injection are fundamentally different from anabolic steroids often referenced by the body-building industry.



How is the procedure performed?

Your surgeon will talk you though the procedure beforehand. The area to be injected is cleaned with antiseptic, and then the injection is given using the smallest possible needle. The dose volume is very small- usually less than 2mls. Local anaesthetic may be given before the steroid, combined with the steroid, or simply may not be required at all. Most injections are administered by your surgeon, and others need ultrasound guidance, and in that instance, the radiologist will administer the injection.

What can I expect afterwards?

The anti-inflammatory effects are usually seen within a few days, and the benefits may last weeks or months. This varies between patients, and the conditions being treated. A single injection may be enough, but in other situations multiple injections can be given as needed. In some instances, an injection can be used to 'buy time' before the definitive surgical procedure.

What should I look out for?

The most common side-effect is called a 'flare', and this typically presents as a short period of increased pain and redness lasting 1-2 days after the injection. It settles quickly, but rest and cold packs can be useful to reduce any discomfort. Your surgeon will discuss specific risks that relate to you, but it is important to watch out for infection. These are rare (~1/1000) but serious, and present as a red, hot to touch, swollen area, getting worse, with or without fever and malaise. Inform your surgeon or present for medical attention urgently if this occurs.

Do you have diabetes?

Some patients with diabetes may notice a transient rise in their blood glucose for a few days after the injection