**Deansgrange Medical Centre**

**Joint Injection & Aspiration**

**Introduction**

This leaflet tells you about the procedures known as joint aspiration and/or injection. It explains what is involved and what the possible risks are. It is not meant to replace informed discussion between you and your doctor, but can act as a starting point for such discussion. If you are having the treatment done as a pre-planned procedure, you should have plenty of time to discuss the matter with your GP who will be carrying out the treatment, before you sign the consent form.

**What is a joint injection?**

A joint injection is an injection of local anaesthetic and/or steroid into the joint.

**What is a joint aspiration?**

A joint aspiration is a way of removing a small amount of fluid from a joint using a needle.

**Why do I need a joint aspiration/injection?**

Joint injections are usually done to treat inflammation and reduce pain/discomfort. During an aspiration, the fluid removed can be sent for testing to help with the diagnosis of your condition. For example, the fluid can be used to count the number of blood cells to see if there is an infection in the joint. Joint injections/aspirations can be done on the shoulder, hip, knee, ankle, elbow, wrist and the small joints of the hands and feet.

**Important information**

You will need someone to drive you home after the examination. Driving is hazardous for 6 hours after the injection because of the local anaesthetic in the joint. If you are a diabetic patient and having a joint injection please tell the person performing the examination before it starts. This is because the steroid that is injected into your joint could affect your blood sugar level.

**What happens during the examination?**

If you are having a joint injection, the steroid (to reduce inflammation) and local anaesthetic will be injected into the joint at this point. If you are having an aspiration, a syringe will be used to remove some of the fluid from the joint.

**What happens after the examination?**

For a few hours after the examination, your joint may feel uncomfortable. For patients who have had a steroid injection, after a few days the local anaesthetic will wear off. It is important that you monitor and keep a record of any changes in your pain over the next few weeks. This information will be useful the next time you see

your GP.

• Female patients who have periods may notice that their menstrual cycle is slightly irregular for a few months

• Diabetic patients should monitor their blood sugar more closely over the next few days

• Some patients may get facial flushing for a short time

• Worsening of symptoms may occur in a minority and patients are advised to carry on taking the prescribed pain killers until it settles down (usually 24 – 48 hours). If it does not settle please contact your GP or EDOC out of hours.

**Are there any risks?**

A joint injection/aspiration is a common procedure that has little risk; however, there is a very small risk of an infection being introduced into the joint. Every precaution is taken to avoid infection. If the joint becomes red, warm or tender, or if you develop a fever in the first few days after the examination, please see your GP. There may also be some bruising, bleeding, haematoma (blood collection) formation, loss of fat and changes of pigmentation at the injection site.

**Finally….**

Some of your questions should have been answered by this patient information leaflet, but remember this is only a starting point for discussion about your treatment with the doctors looking after you. Do please satisfy yourself that you have received enough information about the procedure, before you sign the consent form.

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