

## PATIENT INFORMATION

### TRIGGER POINT AND JOINT INJECTIONS

Trigger point injections are offered to people suffering with painful points which they can confidently identify. These are points of pain thought to be in association with muscle spasm. The action of the injections is to reduce the spasm to allow activity levels to increase and for rehabilitation to be more effective. Their precise mechanism of action is poorly understood but they can be effective in some cases. It is important to have a painful spot or obvious target to guide the injection as this is not a universal panacea.

The procedure is carried out under local anaesthesia in an outpatient setting. In the Hampshire Clinic I do a dedicated session in the Minor Ops Theatre located on the ground floor of the hospital. In Mount Alvernia this would be carried out in the examination room during a clinic. The injection itself is composed of hydrocortisone, a strong anti-inflammatory, and local anaesthetic.



Joint injections are similar to trigger point injections and are carried out in the same way. The difference is that the injection is inserted into a joint or a bursa that is inflamed. This can be useful for reducing pain and inflammation as a result of arthritic change. Again it is hoped that this will aid further physical activity and rehabilitation.

In general, it should be noted that hydrocortisone injections do not last for more than a few weeks although the effects of the treatment if combined with increased levels of activity or rehabilitation can be long lasting.

#### BEFORE

Please advise us of any medical conditions you have prior to your attendance such as high blood pressure, diabetes, asthma, heart problems etc. To avoid bleeding after the procedure it is important to stop blood-thinning medication such as Warfarin about 72 hours beforehand. This needs to be discussed before the procedure takes place. It is important that we have a list of medications you have been prescribed by your doctor or have bought at the chemist and are currently taking. This includes homeopathic remedies.

If you feel unwell on the day then please contact Mr Quail's office or the hospital before you make the journey in, as it may be necessary to reschedule the procedure.

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### ON THE DAY

On the day of the procedure please arrive promptly. As these procedures are done under local anaesthetic it is advised that you either bring someone along with you who can drive you home or use public transport or taxi. Be aware that joint injections will make the joint numb for a period and it may be unsafe to drive as a result until the local anaesthetic has worn off. You are very welcome to bring someone along with you for company.

Please try to reduce pain medication before the injection to allow accurate identification of your trigger points for injection. The more accurate the injection the better the result.

On arrival at the hospital you will be asked to complete various forms. One of these will be the consent form for the procedure. Mr Quaile will mark the areas of pain to be injected for accuracy and to confirm the area to be treated. Please do not hesitate to ask any questions or mention any concerns that you may have at this time.

### AFTER

You may be able to go home independently depending upon your procedure. The local anaesthetic is likely to wear off in 4 to 5 hours in the same way as a dental injection.

We recommend that you rest and take things easy for the next 24 hours. If you have a small dressing or plaster that can be removed the next day.

You may find that you feel more pain for a few days afterwards as initially the injection may stir things up before the slow release steroids start to be effective. It can take between 7 days and 6 weeks before the full effects of the injections are known.

This is normal, however do not hesitate to contact us if you are worried.

You should continue to take your usual medication and analgesia as required and return to work as soon as you feel able.

You will be reviewed approximately 3 weeks after the procedure to assess the effects. Physical therapy such as physiotherapy, chiropractic management and osteopathy can recommence about 7 to 10 days after the procedure when we hope your practitioner can take advantage of the 'window of opportunity' provided by the injection.

### WHAT SHOULD I EXPECT

Some people experience immediate relief of their symptoms that can last for weeks or months, others find that it takes 6 weeks or so before they find any relief and for others, regrettably, there is little or no benefit. No treatment is guaranteed to work for all. However, it can be the start of an effective treatment plan in improving pain and function by providing that 'window of opportunity' for rehabilitation to be successful. We advise a return to physical therapy about 7 to 10 days after treatment to maximise the benefits of injection.

### SIDE EFFECTS AND RISKS

The main but small risk is that of infection. If that occurs in a joint it can be very serious and may need extensive treatment including surgery. There are small risks of bleeding, swelling and a reaction to steroid.



### EMERGENCY INFORMATION

If you develop any of these following symptoms following your discharge please contact your general practitioner immediately:

- Severe headache or pain
- Fever or chills
- Redness and swelling around the injection site
- Loss of bladder or bowel control
- Numbness in the saddle area
- Numbness in legs or arms
- Weakness in legs or arms
- Pins and needles in legs or arms

### CONTACT

Please contact us if you have any problems or questions.

**email:** [support@spine-works.com](mailto:support@spine-works.com)



**telephone:** 01256 377653

