



## ARONSON FOOTCARE

### *Podiatric Medicine and Foot Surgery*

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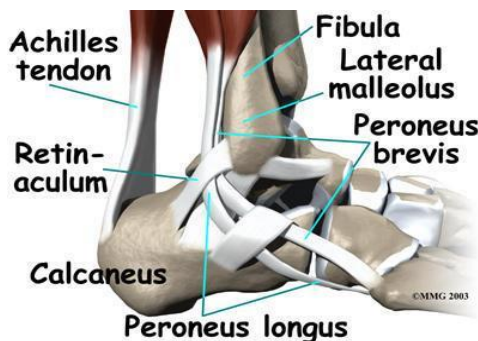
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## STEROID INJECTIONS



### WHY HAVE A STEROID INJECTION?

Injecting steroids gets the medication directly to the painful, inflamed area quickly. Your doctor may suggest an injection in conjunction with rest, ice, elevation and/or wearing shoe inserts/orthotics or taking oral (anti-inflammatory) medication. Injecting steroids is less complex than having surgery. Injected steroids often provide lasting pain relief that can help you get out and enjoy life again. The relief may last days, weeks, months or years.

### WHAT DOES THE INJECTION TREAT?

Injecting steroids can relieve pain for anything from a sports injury to arthritis. You may have an injection for treating inflammation, a sprain or other problems. Over the course of treatment, your doctor may not inject the same regions more than a few times. Being injected with a steroid is simple and doesn't take long. Your doctor may ask questions about your health. Certain medical conditions such as diabetes can be affected by steroids.

### GETTING THE INJECTION

Your doctor will start by cleaning and numbing (with a cold spray) your skin at the injection site. We also have other techniques that can be used to lessen the feeling of the injection. Next, you'll be injected with local anesthetics (for short term pain relief) and steroids mixed together. A bandage or small compression bandage will be applied over the injection site. You'll then be ready to go home.

### THE NEXT DAY OR TWO

Some patients feel more pain the day after the injection. This is normal and will go away soon. Rest for the first day or two. You should also elevate and ice the affected area several times per day (for 1-2 days). You don't need to stay in bed. You should limit activities. Avoid tasks that may strain the injured region. After that, resume your everyday activities.

### RISK AND COMPLICATIONS

- Short-term complications are uncommon but include shrinkage (atrophy) and lightening of the color (depigmentation) of the skin at the injection site.
- Introduction of bacterial infection into the body (infection), local bleeding from broken blood vessels in the skin or muscle,
- Increased pain after the injection is typically due to a post injection flare because true allergies to cortisone are very rare.
- Facial flushing may occur in up to 40% of cases but lasts only briefly.
- Sweating and insomnia are uncommon side effects.
- Temporary changes in blood sugar levels (diabetics)
- Ruptured tendon (tissue that connects muscle to bone), very rare.