

Mr. Jochen Fischer

State Exam Med, MRCSed, FRCS (Tr&Orth), MD
Consultant Orthopaedic & Upper Limb Surgeon



www.jf-ortho.co.uk

www.manchesterorthopaedicgroup.co.uk

Steroid injection for De Quervains tenosynovitis

I've given you a steroid injection for a condition called DeQuervains tenosynovitis today. Please find below some information about the expected outcome and possible problems for your information:

What is in the injection? The main ingredient is Cortisone (also known as the steroids). This is a strong anti-inflammatory that will help to reduce any swelling in the area. The other ingredient is a small amount of local anaesthetic to keep you comfortable for the first few hours after the injection.

Possible side effects: The local anaesthetic can cause numbness in the finger; this will wear off after a few hours. If your finger is numb, you will have to be a bit careful not to injure yourself without noticing. The steroids come in a crystal suspension that dissolves slowly and only a small amount will go into the blood stream. Systemic side effects are very unlikely, unless you are diabetic. If you are diabetic your blood sugar levels are likely to be higher than usual for about a week following the injection. I recommend you check your sugar levels more often and you may have to adjust your insulin dose accordingly. If the Steroids are injected too close to the skin they could cause permanent skin thinning and/or discoloration. Accidental injection into the tendon could cause tendon rupture, but this is a very rare problem.

Infection: This is a very rare complication following the injection. If you notice increasing redness, swelling and pain 3-10 days following the injection you should seek advice from me, your GP or a Doctor in A&E.

Pain flare: Some patients experience more pain for 1-3 days following the injection. This is a well-known problem that's also called a pain flare. You may or may not need some painkillers. If there is associated redness and swelling you should seek advice from me, your GP or a Doctor in A&E.

Likely outcome: For most patients the pain improves within about 2 weeks following the injection. Most patients respond well to a single injection. Some patients need two injections to cure the problem. If the problem persists despite injections a small operation under local anaesthetic should cure DeQuervains.

Recurrence: Some patients are perfectly fine for months after the injection, but then the symptoms may come back. A further injection or surgery may help.

Restrictions following the injection: I'm happy for you to mobilise as pain allows without any further restrictions.

POSTAL ADDRESS	BMI Alexandra Hospital	Private Secretary	Macclesfield District	NHS Secretary
Spire Regency Hospital	Mill Lane	T: 07935 480 188	General Hospital	T: 01625 661 095
West Street	Cheadle	F: 01625 505 435	Victoria Road	F: 01625 661 866
Macclesfield	Cheshire SK8 2PX	E: jfortho.secretary@gmail.com	Macclesfield	
Cheshire SK11 8DW	Appointments:		Cheshire SK10 3BL	
Appointments:	0161 495 7770			
01625 505 494				

Mr. Jochen Fischer

State Exam Med, MRCS Ed, FRCS (Tr&Orth), MD
Consultant Orthopaedic & Upper Limb Surgeon



www.jf-ortho.co.uk

www.manchesterorthopaedicgroup.co.uk

How many injections? I don't recommend injecting more than twice for the same finger. If two injections don't help, it's time to consider surgery.

If you would prefer to discuss this again with me prior to treatment then please contact my secretary : Tel 07935 480188, Email jfortho.secretary@gmail.com

POSTAL ADDRESS
Spire Regency Hospital
West Street
Macclesfield
Cheshire SK11 8DW
Appointments:
01625 505 494

BMI Alexandra Hospital
Mill Lane
Cheadle
Cheshire SK8 2PX
Appointments:
0161 495 7770

Private Secretary
T: 07935 480 188
F: 01625 505 435
E: jfortho.secretary@gmail.com

Macclesfield District
General Hospital
Victoria Road
Macclesfield
Cheshire SK10 3BL

NHS Secretary
T: 01625 661 095
F: 01625 661 866