

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 shoulder/AC-joint arthritis

I've given you a steroid injection into the shoulder joint/the AC-joint 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 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.

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: The outcome is difficult to predict and can range from no benefit to a great success. For most patients the pain improves within about 2 weeks following the injection. Common sense suggests that patients with severe arthritis may not respond quite as well as patients with mild arthritis. The effect of the injection is likely to wear off, on average after about 6-10 weeks. While the injection works there is a window of opportunity to do Physiotherapy without restrictions due to pain. The injection doesn't cure the arthritis; it just takes the pain away for a while.

Recurrence: Some patients are perfectly fine for a few weeks after the injection, but then the symptoms may come back. A further injection or surgery may help. Physiotherapy can help for some patients.

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

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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	
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How many injections? I don't recommend injecting more than twice. If two injections don't help, it's time to consider all the possible treatment options including surgery. Too many injections can cause damage to the tendons inside your shoulder.

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

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