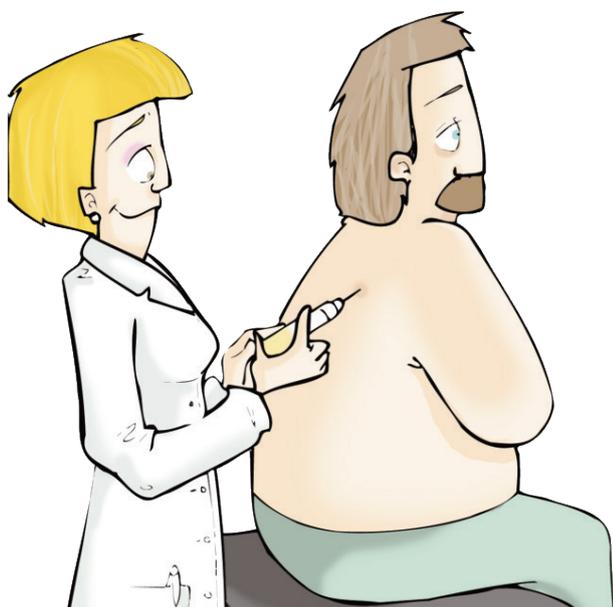


Injection therapy

Injection treatments are injections to a tendon or joint that hurts. The injection consists of a corticosteroid (a powerful anti-inflammatory) and a local anesthetic. By injecting the medication directly into the spot that hurts, pills or other treatments are not necessary and the medication is concentrated where it is most needed. This way many of the side effects that drugs have on the body are reduced.



Injection treatments have been performed for many years (since 1951) and give very good results. They are very good for shoulder pain, tennis elbow, carpal tunnel syndrome, and pain in the hip, knees and feet.

The procedure is simple and quick (2-3 minutes), causes little or no pain and does not require preparation in advance. Your primary care doctor at the health center can do it.

Usually 1 or 2 injection treatments are enough to improve or resolve the problem and they can be repeated later if necessary. Adverse

effects are rare and usually mild. It may hurt a little a few hours after the injection and you may have to take paracetamol. Even more rare are reversible injuries in the area of the injection (hematoma, loss of pigmentation or skin color, atrophy or loss in skin thickness). A more severe but very rare side effect is local infection, which presents with fever and pain, redness and swelling in the area 24-48 hours after the injection. Diabetic patients may develop an increase in their levels of glucose or blood sugar in the days following the injection.

Tips for patients who must have injection therapy

- Do not perform strenuous activities with the limb where the injection was made for 24 hours after injection. After that you can use it normally.
- If fever or pain, redness and swelling occur in the area 24-48 hours after the injection, go quickly to see your primary doctor.

Injection therapy cannot be performed if:

- You are on blood thinners or have a clotting disorder.
- You have poorly controlled diabetes.
- The joint has an infection.
- There is an infection in the skin in the area.
- You have a prosthesis in the affected joint.
- You have a patch of psoriasis at the puncture site.
- You are allergic to local anesthetics or cortisone.