

Cortisone Information For Patients

What Is Cortisone?

How Is Cortisone Given?

Let Us Know If:

- Cortisone (corticosteroid) is a natural anti-inflammatory chemical made in your body by the adrenal gland.
- It is not active until your body metabolizes it in the liver and may take a week or two to work effectively
- It is used for inflammatory conditions such as Frozen Shoulder, Arthritis, **Bursitis and Tendonitis**
- It may be combined with Nonsteroidal Antiinflammatory Drugs (NSAIDs) or other medications.
- It is **completely different** from anabolic steroids used to increase athletic strength and speed.

- Your skin is cleansed with an antiseptic and Cortisone is mixed with freezing (Local Anaesthetic) in a syringe.
- A fine needle is used to inject medication. The Local Anaesthetic may cause some mild stinging while the injection is being performed.
- You may be asked to stay for a few minutes after injection.
- You may be asked to book a follow-up appointment in the clinic to review the effectiveness of the injection.

- You have had a previous allergic reaction to Cortisone or freezing (Local Anesthetic)
- You have had a recent infection, or are currently taking antibiotics
- You have a skin infection. rash or skin lesion near the area to be injected
- You are on a blood thinner (i.e. Coumadin, Plavix, or Aspirin)
- You have **Diabetes** or Fasting Blood Glucose >10 consistently

Side Effects of Cortisone Injection

- Discomfort in the area of injection can occur during the injection. The area may feel "full" or "tight". You may experience a *flare* up of pain over 2-3 days and then improvement. Using over-the-counter painkillers, an ice pack over the area, and decreasing the activity of the joint around the injected area for 24-48 hours may lessen a flare.
- Increased blood sugar in Diabetic patients: If you are Diabetic please inform your treating team member and monitor your blood glucose carefully for the next week following injection. You may need to alter your insulin dose accordingly, or, if uncontrollable, go to the nearest Emergency Department for treatment.
- Hypopigmentation or whitening of the skin around the injection site may occur a few weeks after the injection, especially if your skin is naturally dark. This is not harmful and usually the skin will go back to its normal colour, although there have been rare instances of this being permanent.

Rare Side Effects

- Weakened Tendons & Rupture can occur with repeated Cortisone injections in a short period of time. We may suggest a second injection based on the result of your first injection at follow-up.
- **Infection** is *rare* but if you develop fevers, chills, night sweats or redness with increasing pain around the injected area contact us immediately. We minimize this by sterilizing the skin with an antiseptic.
- Avascular necrosis: Death of a part of bone is an EXTREMELY RARE SUSPECTED complication when a joint is injected, (this has not been proven).
- Chronic use of steroid TABLETS for at least several weeks may potentially be associated with Acne, weight gain, osteoporosis, high blood pressure, water retention, cataracts, glaucoma and diabetes. These risks are NOT associated with careful **Cortisone INJECTION**

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Resources:
The American Orthopaedic Society for Sports Medicine "Sports Tip Cortisone Injections", Matthew J. Matava, MD
Melbourne Radiology Clinic "Cortisone: Information Sheet"
A M Kassam, BMJ Case Reports, 2010; Accelerated avascular necrosis after single intra-articular injection of corticosteroid into the hip joint

A Brinks et al., BMC Musculoskelet Disord. 2010; 11:206. Adverse effects of extra-articular corticosteroid injections: a systematic revie J Cheng et al. Tech Reg Anaesth Pain MAnag. 2007 Jul; 11(3): 141-147. Complications of joint, tendon and muscle injections

For more information visit our website at dbjs.health/cortisone

Date of Injection:	
% Pain Relief:	
Duration of relief:	