

Having an arthrogram to diagnose and treat joint pain

Department of Radiology

Information for Patients

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Introduction

If you are an outpatient please read your appointment letter carefully to check which hospital your appointment is at.

This leaflet tells you about your examination. Please read it carefully as it contains important information and instructions.

What is an arthrogram?

An arthrogram is a special X-ray or ultrasound procedure in which a special dye (contrast liquid) is injected into a joint (space between bones) such as a shoulder joint. It may be done so that your joint shows up better on a CT or MRI scan after the injection. Or it may be done to treat your joint pain. During your arthrogram, some air may be injected. Steroid medication and local anaesthetic may also be injected.

If you are having an MRI scan after the joint injection, you may also have another injection of contrast liquid.

Your doctor has recommended that you have this examination to help find out (diagnose) and possibly treat what is causing your symptoms.

Information for patients with diabetes

If you have diabetes please tell the person performing your examination before it starts. This is important because the steroid that is injected into your joint could affect your blood sugar level for a few days.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

Important information before you have X-rays:

The contrast liquid contains iodine and is cleared by the kidneys in your pee (urine) or at your routine dialysis if you have dialysis.

Please tell the X-ray staff when you arrive if:

- **You are allergic to iodine or rubber (latex)**, have any other allergies or have asthma.
- **You have had a reaction in the past to an intravenous contrast liquid**, the dye used for kidney X-rays and CT scanning and X-rays of your heart and blood vessels.
- **You are on renal dialysis or have any problems with your kidneys.**
- **There is any possibility that you may be pregnant.**

Important information about blood thinning medication

If you are taking medication that thins the blood (anticoagulants or antiplatelets) it may need to be stopped or replaced with a different one for a few days.

Please call the Radiology Department for advice by phoning the number on your appointment letter as soon as possible. You will be asked what blood thinning medication you are taking, how much you take (the dose), and what you are taking it for.

Common examples of these drugs include aspirin, warfarin, clopidogrel (Plavix®), apixiban (Eliquis), rivaroxaban (Xarelto), ticagrelor (Brilinta), dalteparin and heparin.

You may have already been given instructions on blood thinners by the doctor who referred you for this procedure. Please still call the Radiology Department so we can check this.

What arrangements must I make before my examination?

Before you can have a joint injection, you need to plan the following things:

- You must be collected by a responsible adult, who must take you home in a car or taxi after the joint injection.
- You must have a responsible adult at home with you for at least 24 hours after your procedure.
- You must **not** drive or cycle for a minimum 24 hours after your joint injection.

Important: Driving after an anesthetic is a criminal offence, and will affect your insurance cover.

How do I get ready for the examination?

You do not need to do anything special to get ready before you come to the hospital.

If you are having a knee or ankle arthrogram you can wear short trousers or a skirt so that you do not need to get changed at the hospital.

Please call the number on your appointment letter to tell us if:

- you have a high temperature (fever) and are feeling unwell
- you are on antibiotics
- you are within a few days of a surgical procedure

It may be that we will need to re-arrange your appointment.

Who will be doing the examination?

The examination will be carried out by a doctor who specialises in X-ray treatments and ultrasound scans (a radiologist). There will also be a radiographer and there may also be a nurse or radiology assistant in the room. As we are a teaching hospital a trainee may also be present. If you wish, you can ask that a student is not present during your examination

How long will it take?

The time will vary for each patient. Most arthrogram procedures take about 20 to 40 minutes. You may be asked to stay in the Radiology Department for a short time afterwards.

If you are having an MRI scan after the injection, the MRI scan can take another 30 to 60 minutes. You should expect to be in the department for up to 2 hours in total.

Asking for your permission (consent)

The doctor who referred you should have talked to you about the reasons for this procedure and any other options.

You have been referred to a radiologist for this procedure. Radiologists are doctors who have specialised in imaging and X-ray treatments. They will confirm that you understand why the procedure is being done, its potential risks and what the chances of success are. You will then be asked to sign a consent form to confirm this. **You should feel that you have had enough explanation before you sign the consent form.**

If after talking to the radiologist you do not want to have the procedure then you can decide against it at any time.

If the radiologist feels that your condition has changed they will talk to you about whether the procedure is still needed. They may then ask you to return to your referring doctor for review.

If you feel during the procedure that you do not want it to continue we will explain the implications of not doing so to help you fully decide.

What happens during the examination?

- On arrival at the Radiology Department you will be directed to the relevant waiting area. You may be asked to change into a hospital gown. If you are having a knee or ankle arthrogram you can wear short trousers or a skirt so that you do not need to get changed at the hospital.
- You will be taken into the X-ray room where the examination will be explained to you and you may ask any questions.
- Sometimes X-rays may be taken of your joint before the arthrogram procedure begins.
- You will then be asked to lie down on the X-ray table.
- Everything is kept clean (sterile). Your skin is cleaned with antiseptic and you have some of your body covered with sterile sheets.
- The skin and deeper tissues over the joint are numbed with local anaesthetic. When the local anaesthetic is injected it stings to start with, but this soon wears off and the skin and deeper tissues should then feel numb. If the procedure does become uncomfortable you should tell the member of staff who will be with you throughout the procedure.
- The radiologist will use either X-rays or ultrasound to help guide the tip of the needle into the joint where the injection will go.
- A small amount of contrast liquid will be injected into the joint. A small amount of air may also be injected.
- A small amount of steroid (to reduce inflammation) and local anaesthetic may also be put into the joint at this point if requested by the referring doctor.
- At the end of the examination, the injection site will be covered with a wound dressing.

What happens after the examination?

We may ask you to wait in the Radiology Department for a short time after your examination and you may be given some exercises to do.

- **For a few hours** after the examination your joint may feel uncomfortable and may squelch if air has been injected into it.
- **Do not drive or cycle for 24 hours after your examination.** You will need someone to drive you home after your examination.
- **For 3 to 4 days:** Light activity such as sitting, standing and some walking is allowed but we ask you not to carry out heavy manual work for 3 to 4 days.
- **It may take 3 to 4 weeks** to see the benefit of the injection. If the procedure does not work then the referring clinician may discuss other options at your follow-up appointment.

Are there any risks and complications?

As with any procedure or operation, complications are possible.

We have included the most common risks and complications in this leaflet, although they are different for each person. Your risks will be discussed with you before you sign the consent form.

- **Infection** - there is a very small risk of an infection being introduced into the joint. This affects less than 1 in 100 people. If over the next few days the injection site becomes red, hot or painful, or if you get a high temperature (fever) contact your GP or call the NHS helpline on 111.
- **Bleeding or bruising** - there may be a small amount of bleeding or bruising at the injection site. This affects less than 1 in 100 people. Bleeding and bruising can cause pain for a few days.
- **Increased pain** - your pain symptoms can get worse (become aggravated) for a few hours or days before the injection starts to work. If you have increased pain several days after the injection it could be a sign of infection and you should call your GP or NHS 111 for help.
- **Reaction to contrast liquid** - some patients may be allergic to the contrast liquid and may have symptoms such as a rash. If you develop symptoms at home you should contact your GP or call the NHS helpline on 111.
- **Reaction to local anaesthetic** - Feeling dizzy, low blood pressure, allergic reaction, irregular heart rate. In most patients this is temporary and settles on its own.
- **Possible side effects from the steroid injection:**
 - Feeling dizzy, headache, low or high blood pressure, feeling sick, being sick, loose poo (diarrhoea) or redness in the face** (flushing) for a short time. Most patients do not get these side effects. Usually these side effects happen straight away, but can happen in the next few days.
 - Irregular periods** - patients who have menstrual periods may notice that their menstrual cycle is slightly irregular for a few months.
 - Changes to your blood sugar levels** - patients with diabetes should monitor their blood sugar more closely over the next few days.

If you have any problems after the examination please call your GP or call the NHS helpline on 111.

What are the risks from radiation in this procedure?

The main risk from exposure to X-rays is an increase in the risk of getting a cancer in the future. This risk is thought to be very small. We are all exposed to natural background radiation every day of our lives. This comes from the sun, food we eat, and the ground. Each examination which uses X-rays gives a dose on top of this natural background radiation. The risks of radiation are slightly higher for an unborn child so we must ask some patients aged 10 to 55 years about their menstrual periods and possibility of being pregnant.

The benefits of this examination are likely to outweigh any potential risk, and the risk from not having the examination could be greater. We will take all safeguards to minimise the amount of X-rays you receive.

How do I get the results?

The results will not be given to you immediately. Your arthrogram X-ray pictures will be looked at by a Radiologist and the results will be sent to the doctor who referred you for this examination. An explanation of how to get your results will be given to you after your examination.

What if I need to talk to someone?

If you have any questions or concerns, or cannot make the appointment please call the Radiology Department on **0116 258 8765** (option 7) Monday to Friday, 9am to 5pm, excluding bank holidays.



اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk