

# Steroid injections for joint and soft tissue conditions

Department of Rheumatology  
Department of Sports Medicine  
Information for Patients

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## Introduction

We give steroid injections to reduce pain for inflammatory conditions like:

- rheumatoid arthritis,
- psoriatic arthritis,
- sometimes osteoarthritis.

## Why use steroid injections?

Steroids reduce inflammation. This means they quickly and effectively help with pain relief.

We can give steroid injections into joints (space between the bones), or into soft tissue closer to the joint. This lets the drug be delivered to the correct place without affecting the rest of the body.

We can give joint injections safely with other painkillers and disease modifying medications (such as methotrexate / sulfasalazine) prescribed for inflammatory arthritis.

Pain relief after having the injection is often temporary. It can last for a few weeks to months depending on the level of inflammation in the joints.

We may also remove extra fluid around the joint with the injection. This helps to reduce swelling and pain.

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or call 111 for non-emergency medical advice**

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## What are the types of drugs used?

Steroids are the main group of drugs used in joint injections and include:

- **triamcinolone** (Kenalog; Adcortyl; Lederspan) have a longer lasting effect,
- **methylprednisolone** (Depo-Medrone) have a medium lasting effect,
- **hydrocortisone** have a short lasting effect

**Local anaesthetics** (such as lidocaine and bupivacaine) are often used with steroids for fast pain relief.

## What dose will I get?

The dose we give you depends on the size of the joint being injected. The bigger the joint, the bigger the dose. Only a small amount of the drug is absorbed into your blood and the rest of the body. This means we can safely give you large doses if needed.

## What happens before and after my injection?

A trained healthcare professional will give you the joint injection.

- You may be advised to have your blood pressure and blood glucose checked before the procedure.
- They will explain the benefits and risks of the procedure.
- They will do safety checks. They will take your consent.
- They will give you the injection in the joint.
- After the injection, you should rest the injected area for at least 24 to 48 hours (1 to 2 days).
- You should arrange transport home as you should not drive or do strenuous activities.

You will start noticing benefits of the steroids 48 to 72 hours (2 to 3 days) after the injection.

## Will it be painful?

Steroid injections are quick and easy to do like a routine blood test. You may have some discomfort when being injected. Many people find that it is not as bad as they thought it might be. After the injection, you may notice that the joint where the injection has been given is more painful for the first 24 to 48 hours (1 to 2 days). This is because the local anaesthetic will be wearing off. Please take your usual painkillers to help with this.

## Can I exercise after my injection?

You **must not overuse the joint** for the next 4 to 5 days after the injection. Even if it feels better. The joint will need time to recover from the inflammation which caused your symptoms.

After 5 to 7 days, please start the joint exercise as advised by your clinician. Exercises are an important part of your recovery. The steroid injection should reduce your pain and help you build up muscle strength through exercises to overcome your joint problems.

## How often will I have joint injections?

The effect of the injection will be different for each person. Some people get good relief for months or even years. For others it may only last a few weeks.

We can give injections when symptoms return. Your doctor will talk to you about repeat injections when your symptoms come back. We do not usually give more than 3 steroid injections into the same joint in a year. Repeated injections over a long period of time can damage your joints. This is because the steroids may thin the soft tissue and cartilage in the joint.

## Do joint injections have side effects?

- Most people have steroid injections without side effects.
- A joint injection can lead to an infection. This is because of the needle. This is very rare. If the joint is infected it becomes:
  - red,
  - painful,
  - hot,

You may have a fever or feel unwell. You should contact your doctor right away.

- If you are diabetic, you might see a rise in blood sugar levels for a few days after your injection. Please monitor your blood glucose levels.
- During the procedure there is risk of bleeding or injury to the tissue around the joint. This is rare as the procedure is done by trained staff.
- Rarely, you may have:
  - facial flushing,
  - temporary changes in menstrual periods,
  - some change in mood,
  - some changes to the colour or texture of the skin at the site of the injections.
- People are often concerned about steroid related side effects like weight gain. This is unlikely because the drug is acting mainly around the joint and the dose is low compared to steroid medication taken by mouth (oral).
- You do not need to avoid alcohol or a planned vaccination after the injections.
- Steroid injections are not harmful in pregnancy or breastfeeding. It should not affect fertility.



## When should I cancel my appointment?

You should re-arrange your appointment if:

- you have an active infection.
- you are on antibiotics.
- you are within a few days of a surgical procedure.

## Do I need to stop any of my current medicines?

- If you are on blood thinning medicine like warfarin, newer anti-coagulation, aspirin, clopidogrel please tell the doctor.
- If you are on warfarin, you may need a blood test before to check your INR (a measurement of how thin your blood is as a result of warfarin). They will then adjust your dose before the procedure to make sure your blood is not too thin to have injections.
- If your INR is too high the procedure may not go ahead.

**If you are on warfarin, you should not take it the day before you are due to have the joint injection.**

**However, you must keep taking your warfarin if you have had a heart valve replacement. Please contact the department where you are being seen for advice.**

## Contact details

If you have any questions or need some advice, please contact the number below before your procedure. This will depend on the department you will be attending:

- **Patients attending the Rheumatology Department:** Rheumatology Specialist Nurse Service telephone advice line **0116 258 5264**
- **Patients attending the Sports Medicine Department:** **0116 258 8101**

If you have any questions write them down here to remind you what to ask when you speak to your nurse/ doctor/ consultant:

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

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