Cortisone Injections

Cortisone injections can reduce pain and inflammation, allowing you to regain mobility and function. This article explains what cortisone injections are, how they are given, and some of their risks and benefits.

"The goal of cortisone injections is to restore function and movement while reducing pain."

For many years, cortisone injections have been part of the routine care for pain and inflammation of joints, nerves, tendons, and soft tissues. The goal of cortisone injections is to restore inflammation, which allows for the reduction of pain and improvement in function.

Cortisone, also known as a corticosteroid, is a powerful anti-inflammatory. When cortisone is injected near an area of severe inflammation, it can relieve pain relatively quickly, often within 24 hours.

Why treatment is required

Conditions like shoulder arthritis, frozen shoulder, and rotator cuff injuries can cause severe pain, stiffness, and swelling, and they can worsen your quality of life.

When a person has severe pain or stiffness that stops them from doing physical therapy or their daily activities, a cortisone injection is strongly recommended.

A cortisone injection is often suggested—along with physical therapy—on the first or second visit with Dr. Romeo as it can accelerate your ability to recover from your shoulder condition with few side effects.

How treatment is performed

The key to a successful treatment with minimal side effects is injecting the cortisone in the correct location. Because he has performed thousands of arthroscopic surgeries, Dr. Romeo is an expert in shoulder and elbow anatomy and can perform cortisone injections without additional supportive devices, such as ultrasound. This helps lower the overall cost of treatment.

For joint injections, Dr. Romeo uses a combination of a local anesthetic and cortisone. When injected into the injured location, the anesthetic will provide immediate, short-term relief, signaling to Dr. Romeo that the cortisone included in the injection will be at the site that is related to the patient's symptoms.

Injections for shoulder arthritis or frozen shoulder may be placed in the shoulder (glenohumeral) joint. Injections for rotator cuff injuries may be placed in the space immediately above the rotator cuff tendon. Dr. Romeo uses the posterior approach to both the shoulder joint and subacromial space since this is the least sensitive skin of the shoulder and the easiest pathway into these locations.

After the procedure, avoid heavy lifting for the first 48 hours to avoid overusing your shoulder or elbow since the pain has been significantly relieved; however, basic movements of the joint are encouraged. You can also use ice or heat packs to manage any short-term increase in pain.

Risks and benefits

In general, injections with cortisone are safe. The medication typically remains at the site where it is

injected and acts locally on the joint or tissues to reduce pain and inflammation.

Cortisone injections have been associated with some risks, including:

» Short-term increase in pain and inflammation (usually lasts 24–48 hours)

» Softening or breakdown of local tissues

» Increased blood sugar levels in people with diabetes.

» Increased risk of infection if surgery is performed within three months of an injection. (Inflammation is a critical part of healing after surgery and cortisone will interfere with this natural process for up to three months after injection.)

Results

The success of cortisone injections may vary. Generally, patients experience some relief from pain that may last weeks to months. Some patients express frustration that the relief feels incomplete and isn't long-term. Because of this, Dr. Romeo

"The intense pain you feel is an indication of how significant the damage can be."

may combine cortisone injections with other treatment modalities or use an alternative treatment altogether. Although in most cases biologic injections are considered investigational, they may have value in tendonitis that is unresponsive to cortisone injections.

FAQs

What do patients with diabetes need to know about cortisone injections?

Patients with insulin-dependent diabetes should monitor their blood sugar for 48 hours after a cortisone injection. A cortisone injection can cause a blood sugar spike, requiring a temporary adjustment in insulin or medications.

Want to learn more? Find relevant videos, animations, and research material related to this procedure at **anthonyromeomd.com**. ➔

For more information about the risks and benefits of cortisone injections for your condition, please request an appointment with experienced Chicago orthopaedic surgeon Dr. Anthony Romeo.

Please visit our website to find out how to schedule your appointment.