

Sacroiliac joint injection for the treatment of pain

The aim of this information sheet is to provide you with information relating to facet joint injections and to answer some questions that you may have. The information in this leaflet is not intended to replace your doctor's or health care team's advice. Your doctor will be able to explain fully what to expect.

What is a sacroiliac injection?

A sacroiliac joint injection is an injection into a joint at the bottom of the spine where it joins the pelvis known as the sacroiliac joint. These injections may be used to diagnose and treat certain types of back pain. It is used for localised pain where simpler measures have not helped. It may help your pain by reducing some of the pain signals from the joint. Pain relief is usually short-lived, and although some people can get significant and lasting pain relief from these injections, it may not be a cure.

The sacroiliac joints allow movement and stabilise the spine. Wear and tear, inflammation and injury may cause pain in some people. The injection contains local anaesthetic often with a small amount of steroid. The injection is usually undertaken alongside other treatments such as physiotherapy.

Is this the right treatment for me?

Other treatment options will be discussed with you before deciding whether to go ahead with the injection(s) and your consent will be needed. The decision on whether or not to go ahead with the injection is a shared decision between you and your doctor. Your doctor will be able to provide you with up to date information about the likelihood of this being a successful treatment for you, and how this treatment fits into your care. If you are undecided about whether or not to have injection(s) then further advice to make this decision can be provided. Please speak to your doctor for more information.

If your health has changed, it is important to let your doctor know:

- If you have an infection in your body or on the skin of your back, your doctor will postpone the treatment until the infection is cleared
- If you have started anticoagulant or antiplatelet medicines that thin the blood such as warfarin, rivaroxaban, heparin or clopidogrel, this may require extra preparation.
- If you take anti-retroviral medicines, as these can interact with the steroids used in the injection treatments
- If you suffer from diabetes, as the use of steroids during injections may cause your blood sugar to change requiring monitoring and adjustment of your diabetic medication
- If you have any allergies

You must also inform the doctor if there is any chance that you could be pregnant.

Also, if you are planning to fly or travel abroad within two weeks after the injections, please let your doctor know as it may be best to change the date of the injections.

What will happen to me during the treatment?

Before the injection, your doctor will discuss the procedure with you. Your doctor will either obtain your consent before the injection or confirm this consent if it was previously given. An x-ray machine (or other form of image guidance) will be used to enable accurate injection. Not all doctors undertake these injections in exactly the same way but the following usually happens:

- Observations such as blood pressure and pulse rate may be taken
- A cannula (small needle) may be placed in the back of your hand.
- You will be carefully positioned and the skin around the injection site(s) will be cleaned with an antiseptic solution or spray; this can feel very cold
- X-ray (or an alternative way of guiding the needle) will be used
- You will feel a stinging sensation as local anaesthetic is injected to numb the skin and surrounding tissues. Your doctor will warn you of this first
- The doctor will direct the injection(s) to the area(s) suspected to be a source of pain. When the injections are made, you may feel pressure, tightness or a pushing sensation. If there is any discomfort, do let the doctor know.

What will happen to me after the injections?

After the injection(s) you will be taken to a recovery ward area where nursing staff will observe you. Sometimes you will be asked to lay flat for about 30 minutes or longer. You may be assisted to sit up and your blood pressure and pulse may be checked. You will be advised when to get dressed and be given assistance to help to ensure that you can stand safely after the procedure.

Your pain will be assessed at rest and during activities of daily living such as walking and moving your back to find out how much pain relief you have obtained immediately following the injection. This will help assess how much of your pain is coming from the sacroiliac joint(s) and also help plan future treatments. You will be given further advice when you are ready to go home.

When will I be able to go home from hospital after my injections?

You will usually be able to return home within a few hours after the injection and in some cases much sooner, depending on how long your doctor or nurse want you to stay for recovery. Please ensure that you have made arrangements for someone to collect you after the procedure. Failure to do so will likely result in your procedure being cancelled. It is unsafe for you to drive home immediately after the procedure. If you do so your motor insurance will be invalid.

What can I do after my procedure?

Ideally, you should arrange for someone to stay with you for 24 hours but, failing that, you should at least have access to a telephone. You should not drive, operate machinery, sign legal documents, provide childcare unsupervised or drink alcohol until fit to do so. If in doubt, please discuss these issues with your doctor for further advice

When can I return to work after the procedure?

This will vary between individuals and may depend on the nature of your work. It is difficult to give general advice and so you should discuss this with your doctor.

Will I experience any side effects?

As with any procedure, side effects may occur, however, they are usually minor and there is little risk of serious harm. Side effects may include:

- mild local tenderness or bruising at the site of the injection, that usually settles over the first few days
- the local anaesthetic may sometimes spread causing some numbness and/or weakness in your legs and other areas. Should this occur, the effect is temporary and will rapidly resolve over minutes or perhaps hours
- infection. This is rare. You should seek medical help if there is local warmth or redness over the site of injection with tenderness and/or you feel hot and unwell. This may require antibiotic treatment
- there are important nerves in the spine, but serious nerve injury is extremely rare (less than 1 in 10,000 cases)
- injection treatments are not always effective and may not help your pain.

What can I expect in the days afterwards?

You may experience some soreness or aching at the injection site. Please keep the area of the injections dry for 24 hours following the procedure. Do not worry if your pain feels worse for a few days as this sometimes happens. Take your regular pain killers and medications as normal and this should settle down. Try to keep on the move about the house whilst avoiding anything too strenuous.

What should I do in the weeks after the injections?

As your pain decreases, you should try to gently increase your exercise. Simple activities like a daily walk, using an exercise bike or swimming on your back will help to improve your muscle tone. It is best to increase your activities gradually. If you are unsure or finding exercises increasingly difficult please contact your GP or Pain team and discuss a referral to physiotherapy.

What follow-up will be arranged?

You will receive a letter with a follow-up appointment date and time – it will either be a phone call with a Nurse Specialist or in clinic with a Consultant. If you haven't heard from us within ten weeks following the procedure please contact the department at 020 7188 4714 from 9am to 5pm to talk to one of the nurses.

Is there anything else I need to consider before the procedure?

- Please bring your glasses if you need them for reading
- Always bring a list of all current medication
- Continue to take your medication as usual on the treatment day (unless you are taking blood thinning medications for example warfarin, rivaroxaban, heparin, or clopidogrel). If you take a blood thinning medications or are unsure if you do, please contact us at least two weeks before your injection to help us manage these.

Contact us

If you have a problem at home and you are worried about your condition please telephone the Day Surgery Unit on 020 7188 1738 at Guy's Hospital (7.30am to 7pm, Monday to Friday) or 020 7188 3222 at St Thomas' Hospital (7.30am to 8pm, Monday to Friday).

Alternatively you can contact the Pain Management Unit at 020 7188 4714 and talk to one of the specialist nurses (9am to 5pm, Monday to Friday).

Before you go home you will be given information about who to contact if the Pain Unit is closed. **If you think it is an emergency, please go straight to your nearest Emergency Department (A&E) or call 999.**

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

t: 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) **e:** pals@gstt.nhs.uk

t: 020 7188 3514 (complaints) **e:** complaints2@gstt.nhs.uk

Language and Accessible Support Services

If you need an interpreter or information about your care in a different language or format, please get in touch:

t: 020 7188 8815 **e:** languagesupport@gstt.nhs.uk

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

t: 111

NHS Choices

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

w: www.nhs.uk

Acknowledgements:

The information on this leaflet has been taken from the patient intervention leaflets provided by the Faculty of Pain Medicine of the Royal College of Anaesthetists and was amended to reflect Guy's and St Thomas' local guidelines.

Contributions from Addenbrooks Pain Management Unit, the Chronic Pain Service St Georges Hospital London, Newcastle Pain Management Unit and the Interventional Specialist Interest of the British Pain Society.

Leaflet number: 4470/VER1

Date published: August 2017

Review date: August 2020