Foot and ankle corticosteroid injections

This leaflet explains more about steroid injections used in podiatry, including the benefits, risks and any alternatives and what you can expect when you come to the podiatry clinic.

If you have any further questions, please speak to the podiatrist caring for you. This sheet does not list all of the uses and side effects of the medicines we use – please see the manufacturer's patient information leaflet that comes with the medicine for further information.

What are steroid injections?
Some corticosteroids, often referred to as steroids, occur naturally in the human body. Man-made steroids act like natural steroids to reduce inflammation and pain. A steroid mixture can be injected into an inflamed joint or painful area to ease symptoms. It is known as a local injection because it acts in a particular area.

Why should I have a steroid injection?
Local injections of steroid are routinely used alongside other treatments to help relieve painful foot conditions, caused through damage that result in inflammation of the nerves, soft tissue or joints. It is important to remember that steroid injections help relieve symptoms, and do not treat the underlying cause of the problem. It is important to continue following any treatment advice the podiatrist has given you otherwise the symptoms may return.

What are the risks?
Side effects from the low doses of steroid used are rare but can occur. The most common are:

- A steroid ‘flare’ – pain at the injection site. This happens in about 1 in 10 cases. The pain can be quite severe but settles down within a day or two. If it does occur, take over the counter painkillers such as paracetamol, rest the foot and apply an ice pack over the site for no more than 15 minutes at a time. Remember to protect the skin to prevent ‘ice burns’.

- Rupture of tendons or ligaments at the injection site, this is because steroids may cause a temporary weakening of tendons or ligaments at the injection site. Rupture is unlikely to occur if you take it relatively easy for a few days after the injection.

- Infection at the site of injection is rare but possible and may require antibiotics.
What are the side effects?

- Local steroid injections may sometimes cause temporary facial flushing or interference with the menstrual cycle.
- Small area of fat loss or change in skin colour around the injection site.
- It is usual to see a temporary rise in blood sugars in people with diabetes.
- There may be a temporary rise in blood pressure.
- Any treatment with steroids may cause temporary changes in mood – you may feel very high or very low. This may be more common in people with a previous history of mood disturbance.

You should not have the injection carried out if you:

- Have any infection in the area to be injected or anywhere else in your body.
- Are allergic to local anaesthetic or steroids.
- Feel unwell.
- Are due to have surgery in that area soon.
- Are pregnant or breastfeeding.
- Have poorly controlled diabetes.
- Do not want the injection.

Are there any alternatives?

There are no direct alternatives to a local steroid injection, however some conditions can be treated using other interventions. These might include lifestyle changes, use of anti-inflammatory medicines, foot orthoses (insoles) and rehabilitative exercises. Occasionally, a surgical opinion may be helpful. If you would like further information about these other options then please speak with your podiatrist.

How can I prepare for the steroid injection?

Please read this leaflet before the injection. If you have any questions the podiatrist will do their best to answer them. If you have diabetes, high blood pressure, take warfarin or there are other concerns regarding your health or current medication the podiatrist may need to contact your doctor prior to the injection to ensure that it is safe to do the injection. Following some local steroid injections, particularly if a local anaesthetic is also used, please refrain from driving, cycling or walking barefoot until normal feeling returns to the foot.

What happens during the steroid injection?

The podiatrist will examine the area and clean the skin with a sterile wipe. The steroid is then injected into the affected joint or soft tissue. If you are having a local anaesthetic your podiatrist may give them as a combined injection using a single syringe. Alternatively, you may have two separate injections. Following the injection a sterile plaster is applied which should be kept on and dry for 24 hours.

Will I feel any pain?

Expect to feel some discomfort during the injection, but this tends to be short lived. A numbing freeze spray (ethyl chloride) can be used to numb the area prior to the injection to reduce the pain. If a local anaesthetic is used it will quickly numb the area for about one hour before sensation starts to return.
What happens after the steroid injection?
After the injection it is advisable to rest in the waiting area for around 20 minutes. If you feel okay after that time, you may leave. If the area has been numbed by local anaesthetic, it is not advisable to drive, cycle or walk barefoot until normal feeling returns. Following the injection the symptoms should start to be relieved within a few days, and this normally lasts for a number of weeks.

Consent – asking for your consent
We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.

If you would like more information about our consent process, please speak to a member of staff caring for you.

What do I need to do after I go home?
- Once home it is advisable to rest the foot, take some over the counter pain relief, such as paracetamol and apply an ice pack to the area for no more than 15 minutes – remember to protect the skin from ‘ice burns’.
- Take care not to knock the area whilst it is numb.
- Keep the dressing on and dry for 24 hours after the injection.
- Please avoid vigorous exercise, such as running and aerobics, for 7 to 10 days. Gently build up your exercise, as you feel able.
- If the area becomes hot, swollen and painful, especially if you feel unwell, you should see your Doctor/attend an urgent care centre in case of infection.

Will I have a follow-up appointment?
A six week review appointment will be booked before you leave the clinic. Occasionally a follow up injection of steroid is required to fully relieve the foot pain symptoms.

Useful sources of information
Arthritis Research UK/Versus Arthritis:
w: www.versusarthritis.org/about-arthritis/conditions/foot-and-ankle-pain/

The College of Podiatry:
w: www.cop.org.uk
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, Monday to Friday, 9am to 5pm

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.

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.

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 website
Online information and guidance on all aspects of health and healthcare, to help you take control of your health and wellbeing. w: www.nhs.uk

Get involved and have your say: become a member of the Trust
Members of Guy’s and St Thomas’ NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, please get in touch.

Was this leaflet useful?
We want to make sure the information you receive is helpful to you. If you have any comments about this leaflet, we would be happy to hear from you. Fill in our simple online form, w: www.guysandstthomas.nhs.uk/leaflets, or e: patientinformationteam@gstt.nhs.uk

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