

# Foot or Ankle Tendon Sheath Cortisone Injection Advice Sheet

Many of the Tendons in the foot and ankle are difficult to isolate and inject accurately by feel alone. This is why you have been brought in to have it done under X-ray, (Fluoroscopy) guidance.

## What is the purpose of the injection?

- To surround the affected tendon with cortisone (depo-medrone), calming down the bodies reaction to the damage and try to promote a healing environment.

## What should I expect?

- It is a daycase procedure and takes about 15-20 minutes to setup and perform
  - It is done in the operating theatre for equipment purposes, utilising a mobile xray machine
  - You will change in to a gown and travel round from the ward on a hospital bed
  - You will stay on the ward for 20-30mins after the injection to make sure you are not having any allergy or immediate drug reaction
- You will be placed afterwards in to a removable but solid plastic boot following the Injection for about 4 weeks. (An example is the 'Aircast - XP' boot pictured below)



- You will need an accompanying adult to take you home and be with you for the 1<sup>st</sup> 12hrs
- Local anaesthetic will be used to numb the tendon area for 6-12hrs relieving any pain caused directly by this area
  - Once this wears off the area **can be a little more sore for 1-2hrs**

- The cortisone can then take some 2 days to 2 weeks to take effect and does so gradually

### What is in the injection?

- The tendon sheath (sleeve) will be infiltrated with medical chemicals including a drop of Omnipaque followed by depo-medrone and Chirocaine mixed together. Between 2 & 6mls of fluid in all.
  - **Lidocaine 1%** - A quick acting local anaesthetic that is injected just under the skin to numb the area and allow gentle movements of the needle deeper towards the tendon to be more comfortable. This is similar to having your tooth numbed at the dentist
  - **Omnipaque 240mcg**– a mild iodine chemical dye that shows up on xray to confirm the injection is exactly in the tendon sheath where intended (usually less than 0.5ml)
    - **If you are allergic to Iodine – alert the hospital team\***
  - **Chirocaine 0.5%**– A local anaesthetic that can last approximately 6-12hrs, numbing the tendon and sheath in question
  - **Depo-medrone 40mg** – A locally acting cortisone (Steroid) that calms down the inflammation in the area

### Why do I need a boot?

- The boot rests the tendon from its usual function and is part of the treatment
- The boot helps protect the tendon against rupture by reducing the stresses on it, holding it still

### What are the risks of the injection?

- **Bleeding** from the needle prick - Very rare
  - If it doesn't stop with gentle pressure then seek medical attention

- **Infection** being introduced by the needle despite our best care – Very Rare
  - This would present as redness and pain in the area that slowly deteriorates. You could start to feel generally unwell.
  - If it occurs please seek medical attention
- **Nerve damage** from the needle prick - Very Rare
  - Experienced as pins and needles or altered sensation in the foot.
  - It will usually settle after a few weeks. Please highlight this at your next clinic appointment
- **Tendon Rupture** – If wearing the boot then very rare
  - During the initial weeks following the injection this is a recognised complication and hence we protect you with the boot.
- **Drug reaction** from chemicals used – Very Rare
  - If you get any general symptoms feeling unwell, rash, fever or shortness of breath that deteriorate seek medical attention urgently.
  - **\*\*A full list of all potential adverse reactions is available from my secretary upon request or using the links below.**
- **Steroid flare** - Uncommon
  - A temporary increase in the symptoms that can last 24-48hrs
- **Recurrent symptoms**
  - The injection does not have a 100% success rate and hence your symptoms don't respond or deteriorate once again
- **Feeling Faint** immediately afterwards
  - People react to injections in various ways but owing to this more common risk you will return to the ward after the injection lying on a trolley and be observed by the nurses for approximately 20mins before leaving the hospital.

**Full details of the side effect and interaction profile of each drug are available from my secretary upon request or by clicking the Links below.**

**Lidocaine    Omnipaque    Depo-medrone    Chirocaine**  
*These should be hyperlinks please*

**What can I or should I do afterwards?**

- **Begin a mental or written record of your experience.**
- **You are likely to be instructed to use the boot for 4 weeks**
- **The Boot**
  - Read Aircast Boot instructions on safe use
  - Should be worn at all times whilst walking for 4 weeks
  - First 2 weeks – Wear the boot day and night at rest as well
  - Second 2 weeks
    - Boot can be removed in bed if comfortable.
    - Boot can be removed at rest ‘for a break’ and when bathing or when changing the supplied sock.

**You can Fully Weightbear (Walk) in the boot whenever necessary\***

- Watch for any side effects – Allergy, Rash, Bleeding or swelling. Alert a doctor if concerned
- Rest the foot - This is as much part of the treatment program

### **When will I be reviewed?**

- After 4 weeks you will be seen in clinic and subsequently physiotherapy to begin a rehabilitation program.

### **Can I have another one?**

- If the first injection doesn't work it is unlikely to work a second time
- If the first injection provides partial or short term relief a second will be considered but no more if the same response is repeated.
  - This will be discussed more detail in clinic

### **Driving**

- With the boot on the **LEFT** foot
  - You can drive an automatic car the **next day** if you feel safe
- With the boot on the **RIGHT** foot

- You **shouldn't drive** a standard car with the boot on 4 weeks and I recommend making alternative arrangements during this time.

### **Work**

- With the boot on you can undertake sedentary desk type work if your workplace are happy
- No carrying, lifting or prolonged standing is encouraged especially during the 1<sup>st</sup> 2 weeks
- Note the driving guidance above