

PATIENT INFORMATION

Sacroiliac Joint Injection (Pain Leaflet 5)

What are sacroiliac joints?

The sacroiliac joints are the joints between the sacrum and ilium in the bony pelvis; the bones are joined by strong ligaments. The sacroiliac joints transmit the weight of the upper body to the legs and act as shock absorbers.



Bony pelvis

Why have I been offered these injections?

Over time, all joints show some wear and tear from use. This is normal but sometimes this can cause pain. This is usually a dull ache in the lower back, buttocks and legs.

Injections can be used to diagnose the cause of the pain and also to give pain relief.

What is in the injection?

The injection will usually consist of local anaesthetic and/ or a corticosteroid. The local anaesthetic agent will provide rapid relief of pain and the corticosteroid has an anti-inflammatory action and lasts for longer.

What are the risks and side effects associated with the procedure?

- The injections may not make your pain better. If this happens, we will know that the sacroiliac joints are not the cause of your pain.
- Bruising to the injected area is reasonably common.
- Side effects due to the injected steroid are reasonably common. These include facial flushing for a few days, temporary alteration to your usual menstrual cycle (females) and temporary increase in your sugar levels (diabetics). This may make your diabetes more difficult to control for a few days.
- Repeated use of corticosteroids can cause osteoporosis
- Bad flare up of your pain for several days. This is uncommon.
- Permanent worsening of pain is rare.
- Temporary leg weakness is rare
- Allergy to injected medication is very rare.
- Permanent nerve damage, leading to weakness of the leg. This is very, very rare.

What will happen on the day?

You may eat and drink as normal. Please take all your tablets as normal, apart from anticoagulants such as Warfarin and Clopidogrel. You will not need to get undressed as long as you are wearing loose fitting clothing so that the skin of your lower back can be easily exposed. Tracksuit clothing would be ideal, for example

You will be lying on your front for procedure, which usually takes 10-20 minutes. Your skin will be cleaned with alcohol that will feel very cold. Local anaesthetic is injected to numb the skin and this stings a bit. An x-ray machine is used to help with the correct placement of the needle.

What happens after the procedure?

After the procedure you will need to stay in the department for thirty minutes or so, until you are able to walk and are fit for discharge. You must not drive home or go home on public transport. Please arrange for someone to collect you from the Day Surgery Unit. You are allowed to go home by taxi.

The day surgery nurses will give you a discharge letter, briefly explaining what you have had done. Usually another letter will arrive in the post from the Consultant who has done your procedure. The day surgery letter will contain contact details so that you can phone someone day or night if you have a problem related to your injection. They will also phone the day after your injection.

You will be asked to keep a pain diary (this will be supplied) and to post this back to the pain service after 3 months. It is very important that you do this. What to do next is based upon outcome of the pain diary.

Continue to take your pain tablets until you notice any improvement.

After your injection take things easy for the rest of the day. Do not do any hard exercise or heavy work for the first few days.

Important information

Please inform the Day Surgery Unit if you are diabetic, have a cough or cold, or have any kind of infection.

You must inform us if you are taking antibiotics, aspirin, Warfarin or Clopidogrel before attending. Some of these may need to be stopped some days prior to your appointment. Warfarin is usually stopped for 5 days before the injection if you have Atrial Fibrillation. If you are taking it for any other reasons please consult your doctor or the pain clinic.

Information for females

You will be asked if there is any chance that you could be pregnant prior to having x-rays.

For further assistance or to receive this information in a different format, please contact the department which created this leaflet.