

Cortisone injections in the Foot and Ankle

Your doctor is contemplating, or has just given you a steroid injection. Here are a couple of important things to know.

1. Keep track of how much better you are, especially for the first few hours. There is almost always some 'novacaine' type of medication in the injection to give *a numbing effect* to the foot or ankle. It is very important for diagnostic reasons to report if you received **significant relief** of your symptoms even if it was just for the short term.
2. Occasionally you will experience a **flare** where the pain gets worse for a few days before it gets better. This is not uncommon but should be reported to your doctor at the next visit. We recommend taking Tylenol and or ibuprofen for this. Icing the area temporarily may help as well.
3. Be ready for a **series** of these injections at 2 to 4 week intervals. Cortisone tends to work better in a series, but we will rarely give more than 3 or 4 injections.
4. The cortisone is a natural steroid in you body that is released by the adrenals for many metabolic functions. It is a potent anti-inflammatory hormone. In the foot it has *very few side affects*, but can have some. These include soft tissue atrophy, skin pigment and texture changes, and tendon or ligament rupture. For this reason we almost never inject into a tendon and if we do, will recommend cast immobilization for several weeks.
5. While related to oral steroids like prednisone and muscle building hormones the effect of the cortisone shot will only be **very localized** to your foot or ankle and should not give any of the side effects reported for the **oral** medications.
6. Most of our injections involve a 'cocktail' mixture of local anesthetic, short acting steroid, and long acting steroid all in one.

Please feel free to ask our staff any questions you may have.