

Sacroiliac Joint Injection

Background

- Sacroiliac joints are located at the lower aspect of the spine, and connect the spine with the pelvic bones
- The lower third of the joint is targeted for injection.
- Pain arising from the sacroiliac joints is typically vague and non-specific. An injection is often performed for diagnostic purposes – is the joint the cause of pain? It is also performed for therapeutic purposes – steroid injection for pain relief

Preparation

- If imaging has been performed elsewhere, please bring any previous relevant CT or MRI with you
- Please advise us at the time of booking if you are taking any blood thinning medication (Warfarin, Plavix, Aspirin), as some need to be stopped 5-7 days prior to the procedure
- Please arrange for a responsible adult to drive you home after the procedure

Potential Risks

- This is a commonly performed procedure, and generally does not result in serious complications
- Occasionally pain may become more intense immediately after the injection, and generally improves within a few hours
- Some may experience a transient mild headache, which typically resolves spontaneously, but may require paracetamol, rest and fluids
- The injected medication may cause facial blushing/redness, or a rash, which can last for a few days, before resolving
- The steroid may cause fluctuation on blood glucose levels in patients with diabetes, and close monitoring of BSL is recommended
- Although rare, serious risks include:
 - Infection: the majority (1-2%) are minor, however, can be serious (<0.1%) requiring intravenous antibiotics and hospital admission
 - Bleeding/Haematoma: rare, but particularly in patients on “blood thinning” medication, or bleeding disorders
 - Nerve irritation or damage: rare, due to direct needle penetration, or secondary to complications described above

Procedure

- The procedure takes up to 15 minutes, and is usually tolerated well
- You will be positioned on the CT table onto your stomach
- An initial low dose planning CT will be performed, to confirm the position for injection and best approach into the joint
- Your skin will be marked with a texta, and an antiseptic wash applied
- Short acting local anaesthetic is injected, which may sting for 10-30 seconds before numbing the region
- A very fine needle is advanced deeper, towards the joint
- The needle may need a few adjustments, until the needle tip is positioned in the joint
- A combination of steroid and long acting anaesthetic is injected
- The local anaesthetic wears off after a few hours
- The steroid can take between 24 hours and up to 2 weeks for complete effect

Aftercare

- You may feel some minor discomfort at the site of injection
- The local anaesthetic should result in you being pain free for a short period of time
- You will be observed after the procedure, to ensure that you are stable on your feet, and can walk comfortably, following which you will be discharged
- Please do not drive for the rest of the day
- 48 hours of rest / reduced activity is recommended, with gradual return to normal activities

Injection Efficacy

- The steroid reduces the degree of inflammation and swelling within and around the joint. This assists in reducing the pain and symptoms caused by inflammation and irritation of the sacroiliac joint and surrounding tissues
- Approximately 75% of patients experience reduced pain, 25% have no significant improvement, and 1% experience exacerbation of symptoms
- The average duration of symptom improvement is 8 weeks, and anywhere from a few days to several of months
- The duration of symptom varies, and unfortunately, cannot be accurately predicted prior to the procedure
- Occasionally multiple injections are required, and should be performed at least one month apart
- Unless otherwise specified, no more than 3 injections are recommended to be performed per joint in 1 year