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Information for Patients

Iliopsoas Muscle Injections

Day Surgery Unit

You have been offered this procedure as part of your management plan which has been jointly discussed and agreed with your Consultant in Pain Medicine. Your pain is likely to respond to injection treatment if it is in a certain location in the body and is severe. Widespread or mild pain is not responding to injection treatment.

In all cases of managing chronic pain we aim at reduction of your symptoms so that you can achieve better mobility, reduce or discontinue medications, regain control of your life and improve its quality. Reduction of the severity of symptoms by 30% is considered to be successful in managing chronic pain. Pain relief procedures very seldom cure chronic pain. They help break the vicious circle of long-lasting pain symptoms but the duration of action cannot be predicted. The duration of treatment in which injection is considered appropriate will be no longer than 24 months in total.

It is also important to note that no procedure is risk free. Therefore injection treatment will not be repeated many times as the local anaesthetic and the steroid may cause side effects at the site of injection and when absorbed by the blood stream. Some of these effects include lower immunity, making you more vulnerable to infections caused by viruses and bacteria. This is specifically relevant in the current circumstances of COVID-19 pandemic.

Procedure specific risks are described in detail in the information leaflet. Please consider carefully the information provided below for the interventional procedure.

What is iliopsoas muscle pain?

Some types of abdominal, flank, hip and leg pain may be coming from the iliopsoas muscle which is situated deep on both sides of the spine and pelvis. The iliopsoas muscle is very important in keeping our upright posture and lifting the leg in the hip joint. The muscle can

become contracted because of bad posture and trauma or scarred after operations on the kidney, bowel, spine and the hip. An X-ray, MRI or CT scan will usually not recognise this and your diagnosis will be confirmed after an examination by your chronic pain consultant.

How does the injection work?

A mixture of local anaesthetic and depot steroid medication injected into the muscle may help eliminate or reduce back, leg and abdominal pain and improve posture and mobility.

What happens on the day?

Details of your appointment will be arranged during your consultation in outpatients' department. You will be sent a letter with the date and time of your appointment.

You can eat and drink normally on the day of your treatment. Take a shower but do not put any creams or rubs on your back. Take your medication as usual unless advised otherwise by your consultant. Bring the list of your medication with you. You should bring a relative or friend with you to drive you back home and to stay with you until next day.

On arrival to hospital, please report to reception. You will be taken to our ward and asked to change in hospital gown. A nurse will take some details from you to check you are fit for the procedure.

You will be asked to sign a consent form. The doctor will be able to answer any questions you may have at this time.

You will be taken on a trolley to theatre. You will be asked to lie on your front. The doctor will clean the skin and put sterile drapes around your back. The injection treatment takes about 20 minutes to complete. It will be done under control of X-ray machine and an iodine-containing contrast dye will be injected to confirm the correct placement of the needle into the muscle. A sterile dressing will be applied to your skin. You will then be taken to our recovery area for observation for about 30 minutes and thereafter you will be allowed to go home. You should **not** self drive or go on public transport.

What to expect afterwards?

After your procedure take it easy for the rest of the day. You should avoid heavy work or strenuous exercise for the first few days. You

should not use extreme heat such as in saunas or steam rooms for 48 hours.

The sterile dressings will need to be kept clean and dry and removed after 24 hours. If you see redness or swelling on the site of injections you should let us know or call your GP on a first instance.

You may feel sore for a couple of days. Continue taking your pain killing tablets until you feel the benefit from injections and as advised by your consultant.

You should start a specific exercise programme when recommended.

You can normally get back to work the next day.

What are the side effects / complications?

Common

- Soreness / bruising at the injection site.
- Temporary increase (up to 7 days) in pain following procedure.
- Leg weakness/numbness for hours

Rare

- Headache
- Haematoma
- Infection at the injection site

- Allergic reaction
- New pain
- Worsening pain

Very rare

- Convulsions (fits)
- Temporary or permanent disabling nerve damage
- Cardiac arrest (stopping of the heart)

You must tell us if:

- You may be pregnant
- You are taking warfarin/ clopidogrel
- You have a latex allergy
- You have an iodine allergy or any other allergy

- Your medical condition has changed since you last saw the consultant
- You suffer from epilepsy
- You suffer from diabetes
- If you have cold or temperature.
- You have been admitted to hospital
- You are a wheelchair user and you might need a help with getting out of it
- You are hard of hearing/deaf
- You are partially sighted/registered blind
- You need an interpreter
- You are very nervous about needles, hospitals or medical practitioners

You will be followed up by a member of the pain management team.

If you have any further concerns about this procedure please contact

Royal Gwent Hospital - Tel. No: 01633 - 234938

Consultants: Dr. T. Ivanova-Stoilova / Dr. S. Wartan

Nevill Hall Hospital - Tel. No: 01873 - 732979

Consultants: Dr. S. Jeffs / Dr. M. Joshi

**“This document is available in Welsh /
Mae'r ddogfen hon ar gael yn Gymraeg”.**