

# Sacroiliac Joint Injection

## What is a sacroiliac (SI) joint injection and why is it performed?

- The SI joints connect the spine to the pelvis and allow for motion. There are two SI joints: one on the left and one on the right. The SI joint is surrounded by a lubricant filled capsule. Movement of the SI joint permits us to walk, as well as lift or carry things. When SI joint motion is interrupted, pain can result in the lower back, buttock or upper leg area.
- SI joint injection can be used for both the diagnosis and treatment of SI joint pain.
- SI joint injection involves administration of a local anesthetic (when done as a diagnostic procedure) or a mixture of local anesthetic and an anti-inflammatory medication known as a steroid (when done for treatment purposes). The medication is injected into the capsule of the SI joint.

## What to do before the procedure

- Review the handout called 'Pre-Procedure Instructions for Fluoroscopy'.
- If you take any anticoagulant/antiplatelet (blood thinner) medications, you must discuss this with your pain specialist well before the procedure date because these types of medications have to be stopped prior to performing a SI joint injection in order to prevent serious bleeding from occurring. There are several types of blood thinner medications and when exactly to stop the medication depends on the type of blood thinner medication taken.

## What to expect during the procedure

- The procedure will take approximately 10 to 30 minutes and is most commonly performed using x-ray or ultrasound guidance.
- You will need to lie face down for this procedure. Once the needle is confirmed to be in the correct position, the medication is injected.

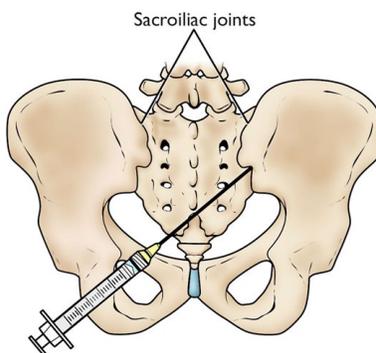


Image source: <https://orthoinfo.org/en/treatment/spinal-injections/>

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## What to expect after the procedure

- If steroid is used, the steroid will usually start working within 1-3 days but, in some cases, it can take up to a week to notice benefit. The duration of pain relief from a SI joint injection is more than 6 weeks in most cases when a steroid is used. If effective at achieving the goals of therapy/functional improvement, it may be repeated.
- Some people may have no pain relief. This finding can be helpful, however, because it may help your doctor figure out the source of pain and select future therapies that target the pain source.
- Although uncommon, some patients may experience an increase in pain for 2-3 days after injection due to irritation of the ligaments and muscles by the needle.

## Side effects and risks

- Steroid injections are generally well tolerated; side effects are usually mild and resolve in a few days. Some patients may experience:
  - Flushing of the face that can last a few days
  - Increased blood pressure or blood sugar
  - Fluid retention
  - Mood swings
  - Irritability
  - Anxiety
  - and/or trouble sleeping.
- Prolonged steroid use can result in a weaker immune system, bone weakness/fractures, and cataracts. On the rare occasion, steroid injections can interfere with the body's normal steroid production (1 in 10, 000 cases). Very rarely, steroid use can cause severe hip arthritis that can require a hip replacement.
- Bleeding is a rare complication. It is more likely to happen in patients with underlying bleeding conditions or those who take blood thinners.
- Infectious complications are rare.
- **If you experience the following after your injection, you must seek immediate medical attention by contacting the pain clinic (519-646-6100 ext. 61786) or going to the nearest emergency room.**
  - **Numbness and weakness**
  - **Loss of bowel and bladder function**
  - **Severe back pain.**