

Sacroiliac (SI) Joint Injections

What Is It?

The sacroiliac joints are located in the back where the lower spine joins the pelvis. They are paired (right and left) and are surrounded by a joint capsule.

In an SI Joint Injection, an anesthetic and a steroid are injected into this joint capsule.

How Is It Done?

The procedure takes place under the guidance of a CT scanner. The patient lies on their stomach and the lower back is cleansed and made sterile. The Interventional Radiologist doing the procedure will give a local anesthetic and place a small spinal needle into the joint space.

How long does it take?

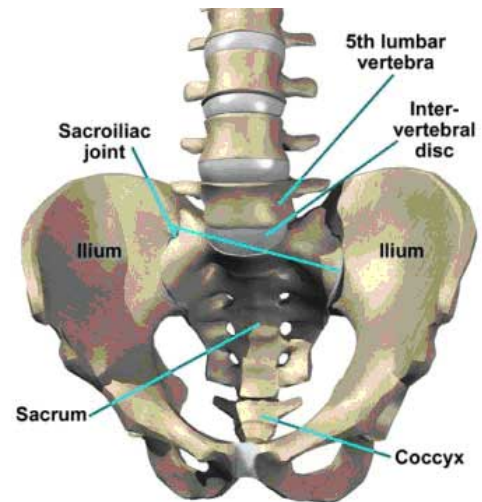
The procedure will take about 30 minutes.

Will the injection hurt?

The radiologist will give a local anesthesia prior to placing the needle which makes the procedure easy to tolerate.

What should I expect after the injection?

Immediately after the injection you may feel that your pain may be gone or quite less. This is due to the local anesthetic. This will only last for a few hours. Your pain may return and you may have a sore back for a day or two. This is due to the mechanical process of needle insertion as well as initial irritation from the steroid itself. You should start noticing pain relief starting the 2nd to 3rd day which may last days to months.



What should I do after the procedure?

You may want to apply ice to the affected area. After the first day, you can perform activity as tolerated.

Can I go to work the next day?

Yes. Unless there are complications, you should be able to return to your work the next day. The most common thing you may feel is soreness in the back.

How many injections can I have?

In a six month period, you generally should not receive more than three injections. Giving more than three injections will increase the likelihood of side effects from steroids.

If the injections help, you may repeat them after 6 months.

What are the risks and side effects?

This procedure is very safe when performed in a controlled setting. However, with any procedure there are risks, side effects, and possibility of complications. The most common side effect is temporary discomfort. The other risks involve infection, bleeding, or worsening of symptoms. You should not have the procedure if you are currently taking blood-thinning medicine (Coumadin) or if you have glaucoma. Side effects related to steroids include: Fluid retention, weight gain, increased blood sugar, elevated blood pressure, mood swings, irritability, insomnia and suppression of the body's own natural production of steroids. Fortunately, serious side effects and complications are uncommon. You should discuss any specific concerns with your physician.