

Policy for the use of image guided high volume intra-articular injections

Category: Not Routinely Commissioned

Joint Pain

Image guided high volume intra-articular injections are used to treat severe joint pain related to osteoarthritis or inflammatory joint disorders such as rheumatoid arthritis and psoriatic arthritis. Joint pain can also occur as a result of a traumatic injury, joint surgery or crystal build up in the joints such as gout. Other causes of joint pain include sports injuries, general sprains and strains, frozen or unstable shoulder, and bleeding into joint spaces caused by torn ligaments.

Treatment

Hydrodilatation is the procedure of injecting a high volume (between 10ml and 55ml) of saline solution into the joint. The solution may also contain some corticosteroid; anaesthetic to provide quick pain relief and the steroid 'cortisone' which provides longer relief to ease pain and swelling.

They are injected into joints using imaging guidance through an x-ray (fluoroscopy), ultrasound or computed tomography (CT) to identify the correct path to place the needle.

Risks

Risks include post-injection pain/swelling and hydrocortisone from a joint injection can get into the bloodstream which may cause side effects.

Eligibility Criteria

Due to the limited quality of clinical evidence and cost effectiveness, image-guided high volume intra-articular injections are not routinely commissioned. The patient may access a palpated joint injection as deemed appropriate by his / her clinician.

This means the patient's NHS commissioning organisation (CCG), who is responsible for buying healthcare services on behalf of patients, will **only** fund the treatment if an Individual Funding Request (IFR) application has shown exceptional clinical need and the CCG supports this.

Advice and further guidance

For more information and advice search 'joint pain' at www.nhs.uk