Mid-Tennessee Bone and Joint Clinic

Sacroiliac (SI) Joint Injection

The sacroiliac (SI) joints are located in the lower back where the lumbosacral spine joins the pelvis and they are paired (right and left). They are synovial joints like the hip, shoulder, and knee joints and are richly innervated by pain sensitive nerve fibers called lateral sacral nerves. The SI joints can become inflamed (swollen and irritated), and develop arthritis causing joint pain. The pain message may then travel along the nerve pathway from the SI joints to your brain and you feel pain in the lower back, buttock, hip, and sometimes into the leg.

What is a Sacroiliac (SI) Joint Injection? An SI Joint injection is an injection of local anesthetic and steroid into the SI joint. The purpose of this injection is to reduce the pressure, swelling, and inflammation in the joint space reducing or eliminating the symptoms.

Who is a candidate for this injection? SI joint injections are performed to relieve lower back, buttock, hip, and sciatic-type pain. This procedure helps reduce pain and by injecting medication into the SI joint, the doctor can determine if the SI joint is causing the problem. Many patients get significant relief from one or two injections. In some cases, it may be necessary to repeat the procedure, as improvements can last anywhere from a few days to several months.

Your doctor may use SI joint injections to see if you might respond to a therapeutic procedure known as radiofrequency neuroablation (lesioning). If the SI joint injection reduces your pain for the duration of the local anesthetic (as early as the first hour to 15-24 hours), then the nerves innervating the SI joint (i.e. lateral sacral nerves) can be coagulated with a radiofrequency heat current to keep certain pain messages from reaching the brain, reducing or relieving pain for the long term.

The Procedure

- You will lie on your stomach. Fluoroscopy (video X-ray guidance) is used to help locate the joint space and a local anesthetic is used to numb your skin.
- Using video X-ray guidance, a thin needle is inserted into SI joint.
- Contrast solution (X-ray dye) may be injected so the physician can see the painful areas and confirm the correct location of the needle tip.
- A steroid-local anesthetic solution mixture is injected in the painful SI joint, bathing the area with soothing medication.
- The needle is removed and a bandage will be placed on the tiny area where the needle was injected.

Instructions (Day of Procedure)

- Continue taking your medications as prescribed with the exception of blood thinners.
- If you are taking blood thinning medication, you will be instructed when to stop taking the medication.
- It is recommended you bathe with anti-bacterial soap before the procedure.
- Your procedure will take place at the Surgery Center of Middle Tennessee. You will be contacted and told when to arrive.
- If you have any known allergic reactions to having medication injected, have an active infection, rash, or are pregnant, inform the doctor and/or nursing staff.
- Please bring your insurance card and driver's license.

NOTE: Patients are NOT permitted to drive themselves home after this procedure. Please make arrangements for someone to drive you home.

After the procedure

- After the procedure is completed you will be monitored in the recovery area. When your blood pressure, pulse, and breathing are stable, you should be discharged and able to leave with a responsible adult.
- You may experience some discomfort at the needle placement site(s) following the procedure. This discomfort will subside over the next few days.

Immediately after the injection, your legs may feel slightly heavy and may be numb. You may feel that your pain is gone or quite less. This is due to the local anesthetic injected. This sensation wears off in a few hours. The cortisone used in the injection starts working in approximately 3-5 days and its effect can last anywhere from a few days to several months.

Risks: Generally speaking, this procedure is safe. However, as with any procedure, there are risks including, but not limited to: spinal puncture with headache, infection, bleeding inside the epidural space with nerve damage, or worsening of present symptoms.

Possible Side Effects: The most common side effect is pain which is temporary. Other side effects include bruising, swelling, or soreness at the injection site, or transient weakness and numbness. Side effects related to the use of cortisone can include weight gain, increased blood sugar, water retention, and suppression of the body's own natural production of cortisone.