



**Hertfordshire and  
West Essex**  
Integrated Care Board

**NHS Herts and West Essex**

**Integrated Care Board (ICB)**

**Ultrasound Guided Joint Injections**

**July 2022 V1.0**

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<b>Description</b>	<b>Policy for local Evidence Based Interventions procedure</b>
<b>Superseded Documents (if applicable)</b>	<b>Herts &amp; BLMK Priorities Forum guidance - Ultrasound guided Corticosteroid Injections</b>

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**Document Control**

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The policy should include a contents page, as set out below, and be structured around all of the headings shown (although not necessarily in the same order)

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### Appendices:

Each appendix will be numbered to follow on from the policy document.

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## Policy: Ultrasound Guided Joint Injections

### 1. INTRODUCTION

Corticosteroid injections are commonly carried out for patients with ongoing joint pain. It is a recognised step according to NICE on the pain management pathway for a number of conditions including osteoarthritis<sup>1</sup>, rotator cuff disorders<sup>2</sup> and frozen shoulder<sup>2</sup>.

Corticosteroid joint injections can be undertaken guided by surface anatomy or by ultrasound. This policy relates to ultrasound guided joint injections.

Whilst there is some evidence for increased accuracy associated with ultrasound guidance in knee injections<sup>5,6</sup> and injections for carpal tunnel syndrome<sup>7,8</sup>; the clinical significance or impact on longer-term outcomes is less clear. Referrals for ultrasound-guided injections are more expensive than landmark guided injections, and therefore should be reserved for more complex cases, or those which do not initially respond well to landmark-guided treatment.

### 2. SCOPE

Subacromial corticosteroid injections for shoulder pain are outside the scope of this policy. Please refer instead to the National EBI programme (list 2).

The following guidance does not apply to patients under the age of 18 years old, patients having treatment as part of the management of pain due to cancer or patients with inflammatory arthritides (rheumatoid arthritis, ankylosing spondylitis, psoriatic arthritis).

### 3. CONTENT

Referral to secondary care services for ultrasound-guided corticosteroid injections for the named joints/ conditions in box 1 will only be funded when at least one of the criteria has been met and thoroughly documented:

- History of severe trauma which would derange the normal architecture of the joint.
  - Failure to identify landmarks due to morbid obesity (BMI>40) or another disease process.
  - Failure of initial attempt of a corticosteroid injection due inability to identify landmarks.
  - No symptomatic relief after two blind injections.
  - Significant adverse effects associated with a landmark-guided injection, such severe procedural pain.
- AND
- No response over six months to conservative treatment.

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Patients who have been referred to secondary care due to diagnostic uncertainty, and who are advised to have a corticosteroid injection, should not be referred for an ultrasound-guided injection in secondary care (unless the above criteria are met)

### Box 1

<u>Upper Limb</u>	<u>Lower Limb</u>
<ul style="list-style-type: none"> <li>• Glenohumeral joint (GHJ)</li> <li>• Acromioclavicular joint (ACJ)</li> <li>• Lateral epicondyle (tennis elbow)</li> <li>• Medial epicondyle (golfers elbow)</li> <li>• Carpal tunnel syndrome</li> <li>• 1st Carpometacarpal joint (CMCJ)</li> <li>• Trigger finger/thumb</li> <li>• De Quervain's syndrome</li> </ul>	<ul style="list-style-type: none"> <li>• Trochanteric Bursa injection</li> <li>• Knee joint</li> <li>• Planter fascia</li> <li>• 1st Metatarsophalangeal joint (MTPJ)</li> </ul>

## 4. REFERENCES

- 1) NICE CG177: Osteoarthritis: care and management. February 2014. Last Updated 11 December 2020. <https://www.nice.org.uk/guidance/cg177>
- 2) NICE Clinical Knowledge Summaries. Shoulder pain. Updated April 2017. Accessed September 2021. <https://cks.nice.org.uk/topics/shoulder-pain/>
- 3) Joint guidance hosted by the Academy of Medical Royal Colleges: NHS Evidence-Based Intervention Programme. <https://www.aomrc.org.uk/ebi/clinician/> Accessed September 2021.
- 4) Zadro J, Rischin A, Johnston RV, Buchbinder R. Image-guided glucocorticoid injection versus injection without image guidance for shoulder pain. Cochrane Database of Systematic Reviews (2021) Issue 8. Art. No.: CD009147. DOI: 10.1002/14651858.CD009147.pub3. Accessed 29 December 2021.
- 5) Berkoff DJ, Miller LE, Block JE. Clinical utility of ultrasound guidance for intra-articular knee injections: a review. Clin Interv Aging. 2012;7:89-95 doi: 10.2147/CIA.S29265. Epub 2012 Mar 20.
- 6) Bookman JS, Pereira DS. Ultrasound guidance for intra-articular knee and shoulder injections: a review. Bull Hosp Jt Dis (2013). 2014; 72(4):266-7
- 7) Yang, FA., Shih, YC., Hong, JP. et al. Ultrasound-guided corticosteroid injection for patients with carpal tunnel syndrome: a systematic review and meta-analysis of randomized controlled trials. Sci Rep 11, 10417 (2021). <https://doi.org/10.1038/s41598-021-89898-7>
- 8) Wang H, Zhu Y, Wei H, Dong C. Ultrasound-guided local corticosteroid injection for carpal tunnel syndrome: A meta-analysis of randomized controlled trials. Clin Rehabil. 2021 Jun 6:2692155211014702. doi: 10.1177/02692155211014702. Epub ahead of print. PMID: 34096345.

**Patients who are not eligible for treatment under this policy may be considered on an individual basis where their GP or consultant believes exceptional circumstances exist that warrant deviation from the rule of this policy. Individual cases will be reviewed as per the ICB policy.**

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