

Hydrodilatation

You have been referred for a Hydrodilatation examination.

The procedure aims to improve mobility and decrease pain in cases of “Frozen Shoulder”.

Technique

An ultrasound is performed first while the joint is moved. The Hydrodilatation is then performed under sterile conditions.

Local anaesthetic is injected into the skin.

A fine needle is then inserted into the joint under ultrasound control. Long-acting local anaesthetic and steroid is injected into the joint. Sterile saline is then injected to distend the joint capsule. You may experience some discomfort down the arm during this part of the procedure.

The Risks

It is a very safe procedure with very few risks.

However, if you have **insulin-controlled diabetes**, please inform a member of staff before the procedure as steroid can alter and increase your insulin requirements.

Infection of the joint is rare, but if within a few days after the procedure the joint becomes painful or red or if you develop a fever, chills, or sweats, you must contact your GP or the x-ray department and tell them that you have had a joint injection.

After The Procedure

- You should not drive yourself home
- Avoid lifting heavy objects
- You should not plan any activities that require significant lifting or use of the shoulder during that time, this may include driving
- You may require another distension of the joint at 6 weeks