Cortisone Injections for Rheumatoid Arthritis: How Cushing's Syndrome Can Be a Risk

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What Does a Cortisone Shot Do?

Cortisone injections are commonly known as corticosteroids. This medicine is an anti-inflammatory medication that is human made to mimic a hormone naturally produced by your adrenal glands. This hormone is called cortisol. There are different variations of cortisone ranging from prednisone pills, Depo-Medrol (methylprednisolone), Kenalog (triamcinolone) and Celestone. So, how exactly do cortisol injections for arthritis work and what are the risks?

Corticosteroids are not only available in injectable form but can be administrated via pills, creams, ointments, liquid and spray for the nose. This drug treats inflammation and pain from arthritis, such as rheumatoid arthritis. It's often prescribed for injuries and other illnesses. The advantage of cortisone injections is that it targets small areas of the body affected by inflammation such as joints, muscles and tendons.

Those diagnosed with rheumatoid arthritis, allergic reactions, asthma and other chronic inflammatory conditions find steroid injections helpful. Cortisone injections are anti-inflammatories, not pain relievers. However, since it lowers inflammation, it can lessen pain. Medical providers may recommend cortisone injections for all forms of arthritis including, tendinitis, osteoarthritis, gout, bursitis and back pain.

What Does a Cortisone Shot Do and How Can It Help RA?

Those with rheumatoid arthritis may notice a decrease in pain and inflammation levels up to several months after cortisone injections. Treatment is the keyword here, as cortisone injections are unfortunately not a cure, and repeated treatment can cause complications.

Rheumatoid arthritis is a chronic inflammatory disorder that affects the lining of the joints causing joint damage. Ironically, too many cortisone injections may cause damage to the cartilage. This seems to be counterproductive, and because of that people are advised to not get cortisone injections no more than every six weeks. Typically, an area of the body should not be injected more than four times a year. For this reason, many doctors prescribe other forms of corticosteroids that can be taken daily, such as oral pills of prednisone. Cortisone injections are not guaranteed to work the first time either, and that is why repeated injections may be necessary for some people, depending on the situation.

The most common areas of the body cortisone injections are given to are the knees, wrists, shoulders, spine, hips, elbows and ankles. People find relief the same day or about three days after receiving the injection.

The Impact of Cortisone Injections

While there seem to be immediate benefits to cortisone injections, there are some short-term, but rare, drawbacks

that should be noted. With any injection, there is a risk for infection. Infections can be prevented by a medical professional administering the injection properly. But the patient must take the time to rest, elevate and ice the area of the body that was injected. Other short-term complications include skin becoming lighter, bleeding, bruising, soreness and more inflammation at the injection site.

Tendons are known to be weakened over time if corticosteroid injections are given in the same area within a short duration of time. When being used in the treatment of rheumatoid arthritis, there are multiple factors to consider before administrating a cortisone injection. These will vary between each individual and the negatives should be discussed with your doctor to make the best decision for you. One of the cons is an uncommon syndrome called Cushing's syndrome.

This rare syndrome affects those who take cortisol medication to treat diseases, such as asthma and rheumatoid arthritis. Those aged 25 to 50 are more likely to be diagnosed with Cushing's syndrome and it impacts children, teenagers and adults. However, more women, approximately 70%, are living with this and only 30% of men are. This condition is uncommon in that only 40 to 70 people out of 1 million are diagnosed each year.

Cushing's Syndrome Explained

One of the more severe complications is when the body has had exposure to higher-than-normal circulating levels of cortisol. This can cause something called Cushing's syndrome or hypercortisolism to develop. Naturally, cortisol's main role in the body is to act as a stress hormone, that oversees regulating blood sugar and turning food into energy.

If you are taking cortisol medication to treat rheumatoid arthritis and happen to develop Cushing's syndrome, your rheumatologist will send you to an endocrinologist.

Without treatment, hypercortisolism may be fatal and cause the following to occur:

- Weight gain.
- Heart attack.
- Depression.
- Brain fog.
- Difficulty concentrating.
- Type 2 diabetes.
- Infections.
- Blood clots in lungs and legs.

The main reason this occurs is from the use of glucocorticoid medications or tumors located on the pituitary and adrenal glands. When tumors are found, this is called Cushing's disease. There is no genetic link to either of the health conditions. Cushing's syndrome has telltale signs and symptoms that could closely mimic other diseases.

Be sure to report to your doctor if you experience any of the following:

- High blood pressure.
- Rapid weight gain in the face, abdomen, or back of the neck.
- Easy bruising.
- Fatigue.
- Weakness.
- Blurred vision.
- Dizziness.
- Excessive hair growth.
- Poor wound healing.

The Takeaway

Cortisone injections can provide immediate relief for those dealing with inflammation and pain from arthritis. Rheumatologists often use this as a treatment to target a specific part of the body. You will want to discuss your treatment options with your provider to see if cortisone medication is a good fit for your specific health situation. There may be complications to watch out for, but usually these only last a few days after the injection is administered. Other rare concerns occur with the long-term use of cortisone medication to treat certain inflammatory diseases, such as rheumatoid arthritis. Your prescribing medical doctor and you can openly discuss the pros and cons before moving forward with cortisone medication to treat your pain and inflammation.