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ORTHOPAEDIC SPORTS MEDICINE

PATIENT INFORMATION

Hyaluronic Acid Injection: What to Expect

After your injection — what's normal, what to do, and when to call us

What to expect

- **First several hours:** Mild pressure, fullness, or soreness at the injection site is normal.
- **Days 1–3:** Some patients (about 1 in 20) experience mild soreness, swelling, or stiffness that resolves on its own. Unlike cortisone, hyaluronic acid does not provide immediate anti-inflammatory relief.
- **Weeks 1–6:** Improvement is gradual. You may notice increasing benefit each week as the joint is re-lubricated.
- **Weeks 8–12:** Full benefit is typically reached 8–12 weeks after the third injection. Effects commonly last 4–6 months, sometimes longer, and a repeat course can be given when symptoms return.

> **YOUR INJECTION SERIES**
> Hyaluronic acid is given as a **series of three injections, one week apart**. Keeping all three appointments is important for the full benefit — the medication builds on each injection. If you need to reschedule, please call our office promptly so we can adjust the spacing.

What to do at home

- **Rest the joint for 24–48 hours.** Avoid strenuous activity, heavy lifting, running, or prolonged standing for the first day or two.
- **Ice** for 10–15 minutes every few hours as needed for soreness.
- **Over-the-counter pain relievers** (acetaminophen, ibuprofen, naproxen) are safe to use if needed.
- **Keep the injection site clean and dry for 24 hours.** Showering is fine; avoid baths, hot tubs, and swimming for one day.

Call our office if you experience

- A fever of 100.4°F (38.3°C) or higher
- **Significant** swelling, warmth, or redness in the joint that develops in the day or two after injection, particularly if the joint becomes hot, very stiff, or hard to move — see the safety note below
- Severe pain that is not relieved by ice or over-the-counter medication
- Any rash, hives, or other allergic-type symptoms

A note on safety and the medication we use

Hyaluronic acid is a natural substance found in healthy joint fluid; the injection restores lubrication and cushioning in a joint affected by osteoarthritis. **It is not a steroid**, does not affect blood sugar, and does not carry the cartilage or tendon concerns of repeated cortisone — one reason we sometimes prefer it for patients who need ongoing symptom management. Published evidence is mixed, but many patients experience meaningful, durable relief and the safety profile is excellent. The rare reaction to know about is a **"pseudoseptic" reaction** — a hot, very swollen, hard-to-move joint developing in the first 1–3 days that mimics infection but typically resolves on its own. It is uncommon and not dangerous, but warrants a call to our office.

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