PATIENT & CAREGIVER EDUCATION

Trigger Point Injections

This information will help you get ready for your trigger point injection (shot). It explains what trigger points and trigger point injections are. It also explains what to do before and after your trigger point injection.

About Trigger Points

Trigger points are painful knots in your muscles. They form when your muscles cannot relax. Trigger points can cause muscle spasms (twitches) or feelings of tightness. They are very sensitive to touch. You will feel some pain when pressure is put on a trigger point. The pain may also spread to the target zone (areas around the trigger point).

Trigger points are often found in the muscles in your:

- Buttocks (butt)
- Upper back
- Lower back
- Neck

Common causes of trigger points are:

- An injury.
- Strain from everyday activities.
- Body mechanics (the way that you move).

About Trigger Point Injections

A trigger point injection is used to treat a trigger point in your muscle. The injection has numbing medication. This can be a local anesthetic, a corticosteroid (KOR-tih-koh-STAYR-oyd), or a mixture of both. A local anesthetic is a medication that numbs an area of your body. A corticosteroid is a medication that helps reduce swelling and inflammation.

Injecting a small amount of numbing medication into the trigger point can help ease some of your pain. Putting the needle into your muscle may also help break up the knot. This can ease your muscle spasms and feelings of tightness. This will make you feel better and make it easier for you to move and exercise.

Before getting a trigger point injection, tell your healthcare provider if you:

- Are allergic to latex or lidocaine (a medication that numbs an area of your body).
- Have an infection anywhere in your body.

- Take an anticoagulant (blood thinner). A blood thinner is a medication that affects the way your blood clots.

Here are some examples of blood thinners. There are others, so be sure your care team knows all the medicines you take. **Do not stop taking your blood thinner without talking with a member of your care team.**

- Apixaban (Eliquis®)
- Aspirin
- Celecoxib (Celebrex®)
- Cilostazol (Pletal®)
- Clopidogrel (Plavix®)
- Dabigatran (Pradaxa®)
- Dalteparin (Fragmin®)
- Dipyridamole (Persantine®)
- Edoxaban (Savaysa®)
- Enoxaparin (Lovenox®)
- Fondaparinux (Arixtra®)
- Heparin injection (shot)
- Meloxicam (Mobic®)
- Nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen (Advil®, Motrin®) and naproxen (Aleve®)
- Pentoxifylline (Trental®)
- Prasugrel (Effient®)
- Rivaroxaban (Xarelto®)
- Sulfasalazine (Azulfidine®, Sulfazine®)
- Ticagrelor (Brilinta®)
- Tinzaparin (Innohep®)
- Warfarin (Jantoven®, Coumadin®)

Getting a Trigger Point Injection

Getting a trigger point injection is quick and simple. Your healthcare provider will find your trigger point by feeling around the area that hurts. Once they find the trigger

point, they will clean and mark your skin where you will get the shot.

Then, your healthcare provider will inject a small amount of numbing medication into the trigger point. You should only feel some pinching as the needle goes into your skin. Your healthcare provider may massage (gently rub) the injection site. This will help the medication get into the target zone.

After Your Trigger Point Injection

After your injection, your healthcare provider may suggest certain treatments to help ease your pain. The amount of time it takes to feel better is different for everyone.

Do not use heating pads or warm packs for 24 hours (1 day) after your injection. Adding heat can make the injection site bleed.

Seeing a therapist

Your healthcare provider may suggest that you see an occupational therapist (OT) or physical therapist (PT). Your OT or PT will show you how to do exercises that can ease muscle strain.

Using assistive devices

Your healthcare provider may also suggest that you use an assistive device to help you. Using this will help keep you from straining the muscles around the trigger point. It may also make it easier for you to do tasks.

Some examples of assistive devices are:

- A cane.
- A walker.
- A splint. This is a support device that protects an injured part of your body and keeps it from moving.
- A brace.
- A cervical collar. This is a support device that protects your neck and spinal cord. It limits how much you can move your neck and head.
- A raised toilet seat.

If you need an assistive device, your OT or PT will show you how to use it.

Getting rest

Rest the trigger point area for 1 to 2 days after your injection. Avoid activities that may cause strain, such as:

- Standing for long periods of time.
- Doing high-energy exercises (such as running, jogging, or aerobics).

- Lifting heavy objects.

Using ice or cold packs

You can use an ice pack or a cold pack if you find it helpful. This may not feel good for everyone. Do not use one if it feels uncomfortable.

When using ice, place an ice pack or cold pack on the trigger point area for 10 minutes. Do not keep it on the area for more than 10 minutes at a time. Keeping it on for longer than 10 minutes may damage tissue in the area. Repeat every 4 to 6 hours.

When To Call Your Healthcare Provider

Call your healthcare provider if you:

- Have a fever of 100.4 °F (38 °C) or higher.
- Have any of these things around the injection site:
  - Pain, swelling, tenderness, or redness that’s getting worse.
  - Warmth, burning, or itching.
- Start to have any new or unexplained symptoms.
- Have any questions or concerns.

If you have questions or concerns, contact your healthcare provider. A member of your care team will answer Monday through Friday from 9 a.m. to 5 p.m. Outside those hours, you can leave a message or talk with another MSK provider. There is always a doctor or nurse on call. If you're not sure how to reach your healthcare provider, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.

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