

Excluded: Procedure not routinely funded

Policy Statement 65: Corticosteroid injections for patellar tendinopathy (jumper's knee)

Date of Issue: January 2012 (South Central Priorities Committee)
Ratified and adopted: April 2013

The South Central Priorities Committee considered the evidence for the clinical and cost effectiveness of corticosteroid injections in patients with patellar tendinopathy (jumper's knee). The committee **recommends** that NHS funding for corticosteroid injections for lateral patellar tendinopathy should be **Procedures Not Routinely Funded**¹.

Evidence from one systematic review of patellar tendinopathy, which included three randomised controlled trials of moderately good quality, suggests that corticosteroid injection may improve clinical outcomes in the short term (4 to 12 weeks) compared with placebo injection, eccentric training and heavy resistance training. The benefit following corticosteroid injection is not maintained in the medium term (at 6 months), whereas the benefit is maintained in patients who have had either eccentric training or heavy slow resistance movement.

NOTES:

1. Exceptional circumstances may be considered where there is evidence of significant health impairment and there is also evidence of the intervention improving health status.
2. This policy will be reviewed in the light of new evidence or guidance from NICE.
3. Further information on policy statements is available from <http://www.fundingrequests.cscsu.nhs.uk/>