

Your care and treatment

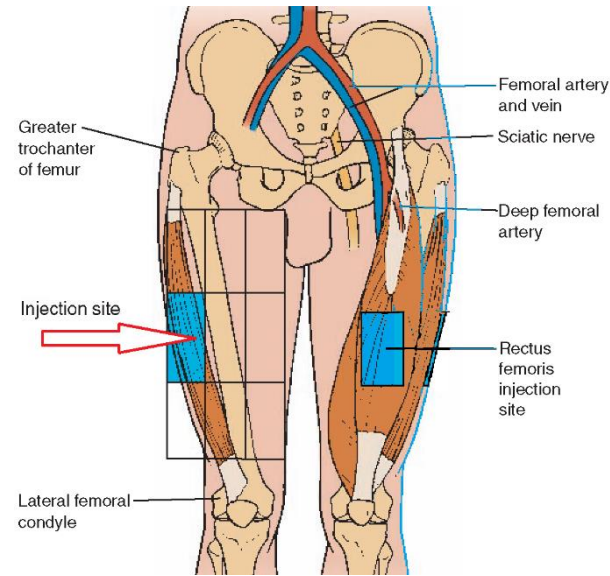
We aim to provide you with the safest, high quality care in all areas of your treatment, which includes the way we give your long acting (depot) injections. In order to do this, it is important that we stay up to date with best practice standards.

Why your injection may be given differently

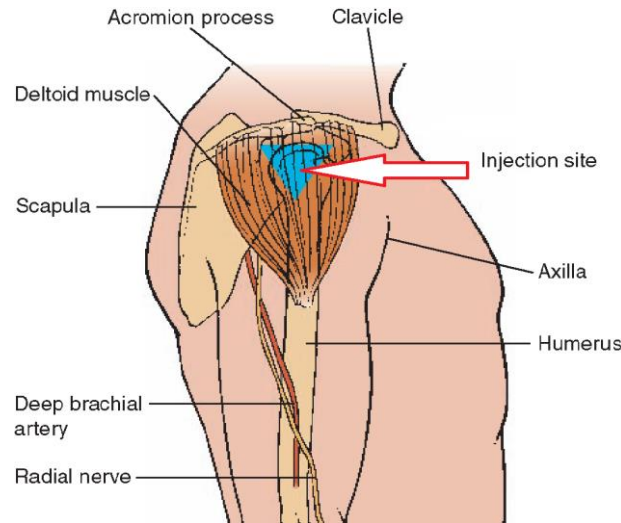
So that we can provide you with the best treatment and care possible, we are changing where on your body we are giving some injections.

Research tells us that often the best place to give an intramuscular injection is in the 'ventrogluteal site' – which is on the side of your hip (see diagram opposite). This site is really safe and has large muscles that we can inject into. In the past we have given injections in the shoulder (deltoid muscle), the thigh (vastus lateralis muscle), or the buttock (dorsogluteal site). Usually you can keep receiving injections into your shoulder or thigh but we won't be giving them in the buttock any more.

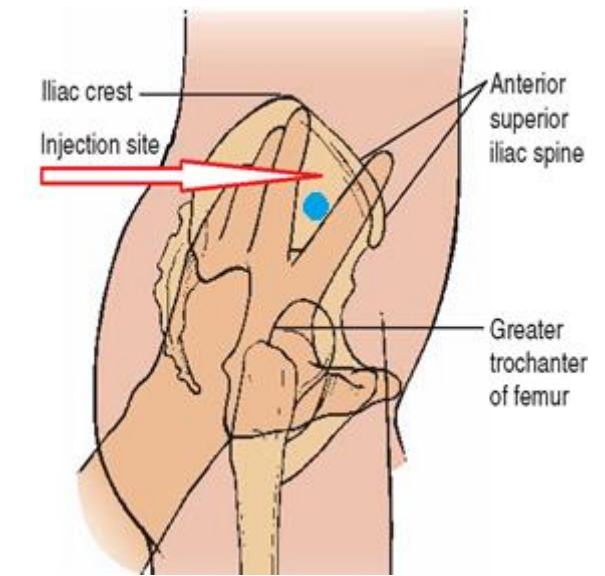
1. The vastus lateralis muscle (Thigh)



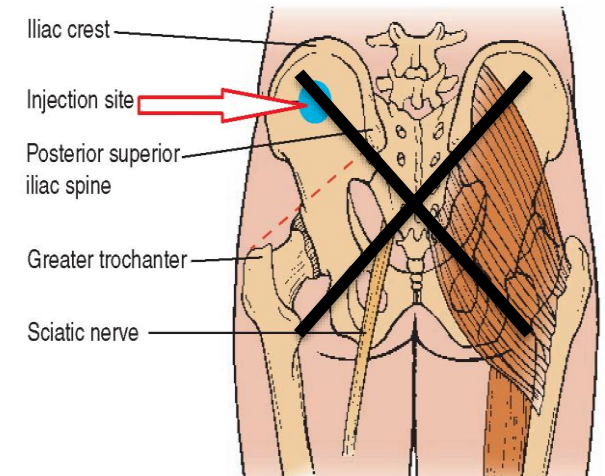
2. The deltoid muscle (Shoulder)



3. The ventrogluteal site (Hip)



4. The dorsogluteal site (Buttock - no longer recommended)



Why is it safer to change?

Injections into the dorsogluteal site (buttock) will no longer be given because research has shown that the body does not always absorb the medication very well at this site. There is also a chance that the medication will be injected into a large nerve or blood vessel by mistake because they are very close to the injection site. If you have any concerns about this, you can chat with your clinic nurse, care coordinator or treating psychiatrist.

The ventrogluteal site (on the side of your hip) is safer than other injection sites. The muscles here allow better absorption of the medication by your body. Because of this, your dose may need to be reviewed along with any other medications you are taking, especially after you first change to this site.

Shared Care with your GP

Most of the time your injection can be given by your GP or a Nurse in a GP Practice. Have a chat with your clinic nurse, care coordinator or treating psychiatrist for more information about this.

The benefits of seeing your GP for treatment may include ease of access and choice of the doctor you see on a regular basis. You can also chat with your GP about any other health issues you may be having. If you have any difficulties in receiving your injection from your GP please have a chat to your care coordinator or treating psychiatrist about it.

For more information

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Changes to your long acting injection

What you and your
support team need
to know