Platelet Rich Plasma (PRP) Injections

PRP: Platelet Rich Plasma, obtained from blood, contains many bioactive substances; the most important being growth factors. When injected into damaged tissue, they promote healing. The fact that it comes from your own body eliminates any risk of side-effects.

PRP has been used extensively in Europe for many years to treat tendinopathies and other non-healing soft tissue injuries. The basic science involves platelets becoming activated after being injected into a tendon or soft tissue. Platelets used for the procedure are autologous (from your own blood) and separated from the remaining blood component by centrifugation. Once harvested, the platelets are injected into damaged tissue. Once injected, the platelets become activated and release numerous growth factors into and surrounding the affected area. Some of these growth factors recruit stem cells and other proteins that have been shown to create new, healthy tissue.

UTILIZATION OF PRP IN ORTHOPAEDICS

Tendinopathy is damaged tissue that occurs from overuse or chronic injuries which often leads to pain. When initial treatments such as physical therapy, NSAIDs (Non-steroidal anti-inflammatories) and/or cortisone injections fail, PRP has become a viable treatment option. Common tendinopathies that we have successfully treated with PRP include rotator cuff, lateral/medial epicondylitis, patellar tendinopathy, achilles tendinopathy, and many other conditions that involve development of scar tissue or non-healing tissue. PRP has been used to treat partial tears of many ligaments, tendons and muscles to speed healing and allow recovery with healthy tissue.

PRP injections are usually given as a series of one to three injections over a period of 8-12 weeks depending on response to treatment.

It is important to know that PRP does not provide instant pain relief as corticosteroids do, but instead leads to healing of previously damaged tissue. With that said, the treatment itself can often be painful, as it relies on local inflammation which is part of the healing cascade. Therefore, NSAIDs are contraindicated during the PRP treatment due to the fact that it will block the inflammatory process. The pain can often last up to two weeks, with the first two days often being the worst (extra strength Tylenol or other pain medication and icing may be used). After two weeks physical therapy is typically initiated. Return to non-painful activities usually occurs by six weeks for tendon and ligament injections and 2-4 weeks for muscle injections.

PRP has a high success rate, with less optimal outcomes occurring in smokers, diabetics and others with compromised microcirculation.

PRICING INFORMATION

Currently, many insurance companies do not cover PRP Therapy, as it is still considered by most to be "experimental." However, researchers are optimistic that larger studies of its use in the treatment of injuries will convince insurance companies to pay for this treatment. In fact, it is speculated that PRP
Therapy may become part of the standard treatment protocol for many musculoskeletal conditions before surgical treatment is warranted.

Please contact our office with any further questions or to schedule your appointment.

**Prices:**

1 Injection: $500
Second Injection: $400
Series of 3 Injections: $1200 total

**Pre-Procedure Directions:**

- No corticosteroids for 2-3 weeks prior to procedure.

- **Discontinue nonsteroidal anti-inflammatory drugs (NSAIDs) 2 weeks prior to procedure** - Although no formal recommendations have been made in this area, our practice suggests that the patient discontinue taking NSAIDs a minimum of 2 weeks prior to the procedure.

- No anticoagulation use 5 days prior to procedure.

- Increase fluid intake 24 hours preceding the procedure.

- Anti-anxiety medication may be required for some patients (to be discussed with physician prior to procedure).