

## PLATELET RICH PLASMA (PRP) INJECTIONS

### **What is Platelet-Rich Plasma?**

Platelet-Rich Plasma (PRP) is a growth factor rich medium that is developed from your own blood. It is not synthetic. Research has shown PRP to be effective in the management of early osteoarthritis (joint degeneration).

### **How are PRP injections done? What is involved?**

PRP therapy involves two injections into the injured area a fortnight apart. On each occasion you will be required to donate blood for generation of the PRP.

Injections are done under sterile conditions, with local anaesthetic and using ultrasound guidance. Each procedure will take approximately 30 minutes.

### **What do I need to do before my injections?**

Patients are required to **cease taking anti-inflammatory tablets** one week prior to the PRP procedure. Patients taking regular aspirin should continue to take this as prescribed by their general practitioner.

### **What do I need to do after my injections?**

It is recommended that you have someone to drive you home after an injection due to some potential residual effects of the local anaesthetic or discomfort from the procedure. Depending on the structure injected, you may need to offload the area for a period. Your doctor will discuss this with you and outline it in detail on a consent form, prior to the day of procedure.

Patients undergoing PRP injections should also be actively involved in a supervised rehabilitation program. Your doctor will discuss with you the specifics of this. In some instances, you may need to stop exercise for a period and resume after medical review.

## **Risks**

In general, adverse outcomes from PRP injections are rare, but they may include:

### **Bleeding/Bruising**

#### **Infection**

To reduce chance of infection all injections are done under sterile conditions using ultrasound guidance for accuracy. PRP has natural anti-bacterial properties that reduce chance of infection.

#### **Pain/Discomfort**

Injections can be uncomfortable. In all cases, local anaesthetic is used. You are encouraged to use simple analgesia (Panadol/Panadeine) as required after the procedure and icing can be very helpful. If necessary, your doctor can provide you with a prescription for Panadeine Forte. Much of the post procedure discomfort can be addressed by closely following any post procedure instructions from your doctor.

## **Contra-Indications**

PRP injections are generally very safe, but are contra-indicated in the following conditions:

- pregnancy

- cancer
- some bleeding disorders

If you are unsure, discuss your concerns with your doctor.

## **Costs**

You will be given a separate sheet detailing the cost of your injections.

## **What do I do now?**

If you feel that you would like to go ahead with PRP injection, you will need to read the information on costs, sign a consent form and make a booking with our reception staff.

In general, we recommend a course of 2 injections at a fortnightly interval. You may want to book these ahead. If you are not responding as expected, this plan can always be altered as we go along.

## **Can I get more information/ evidence for PRP?**

Below is a list of research publications looking at the effectiveness of PRP.

- Spakova, et al. Treatment of Knee Joint Osteoarthritis with Autologous Platelet-Rich Plasma in Comparison with Hyaluronic Acid. *Am J Phys Med & Rehab* 2012;91(5):411-417
- Kon et al. Platelet-rich plasma: intra-articular knee injections produced favorable results on degenerative cartilage lesion, *Knee Surg Sport Traumatol Arthrosc*, 2009, Online Publication
- Baltzer, et al. Autologous conditioned serum is an effective treatment for knee osteoarthritis, *Osteo and Cartilage* 2009, 17:152-160
- Sanchez, et al. Intra-articular injection of autologous preparation rich in growth factors for the treatment of knee OA: a retrospective cohort study, *Clin Exp Rheumatol*. 2008, 26(5):910-913
- Drengk, et al. Influence of platelet-rich plasma on chondrogenic differentiation and proliferation of chondrocytes and mesenchymal stem cells. *Cells Tissues Organs* 2009; 189(5):317-26.

***If you have any further queries or concerns, please discuss them with your doctor.***