

ARE YOU ELIGIBLE ?

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1) Have you had the condition for over 6 month? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) Have you tried physiotherapy and splints? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) Have had steroid injections with some benefit? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) Are you considering surgery? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5) Do you understand that it will take 4 to 6 months to recover from surgery and that it has about 90% success rate? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6) Do you want to avoid risks of operation and lengthy rehabilitation if possible? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7) Do you understand that the success rate of PRP, at best, is 70%? | <input type="checkbox"/> | <input type="checkbox"/> |

The available evidence suggests that PRP will promote healing and surgery is avoided in about 70% cases. This is based on research following a group of patients who received injections for 2 years.

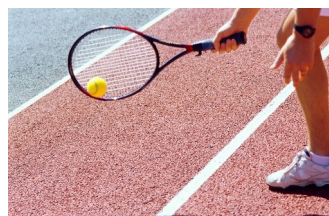
By having PRP injections, you are not excluding surgery in the future should the need arise. In fact, PRP can be used in patients who have not fully benefited from surgery!

FURTHER INFORMATION

NICE (National Institute of Clinical Excellence) has provided guidelines and information regarding this procedure. It has approved the use of this procedure when there is appropriate audit process. (www.nice.org.uk/guidance/IPG438/publicinfo)

Torbay Hospital committee has approved this procedure and will be monitoring responses and side-effects. For this purpose, you need to fill out an internationally recognised evaluation questionnaire (Quick DASH form—Disability of Arm, Shoulder and Hand assessment form). (<http://dash.iwh.on.ca/quickdash>). Torbay Hospital is the first to offer this treatment on the NHS in the South West .

If you have any further doubts please ask your surgeon.



South Devon Healthcare NHS Trust

PLATELET RICH PLASMA INJECTION LEAFLET

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INFORMATION LEAFLET

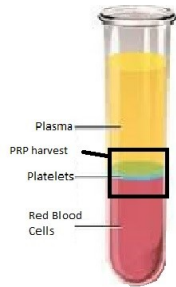
PRP INJECTION



PLATELET RICH PLASMA INJECTION

WHAT IS PRP?

PRP stands for Platelet Rich Plasma preparation. It is prepared from a sample of your blood.



Your blood contains red blood cells (which carry oxygen), white blood cells (which fight infections), platelets (the store house for growth factors) and plasma (the yellowish protein filled fluid). PRP is harvested by using a special equipment (centrifuge) and is used for treating chronic inflammation in tendons, thus using your own healing potential.

CHRONIC TENDONITIS

Chronic tendonitis is a condition where there is ineffective healing of micro-tears in the tendon attachments. This may be so as the tendon in question is under constant tension during its natural movements thus leading to ongoing inflammation with pain.

Typical examples for these conditions are “Tennis Elbow” or “Golfer’s Elbow”. Similar pathology may exist in other places like knee and ankle tendons and some ligaments which take significant load like the plantar fascia in the foot (heel pain).

Steroid injections decrease inflammation and may help in healing. Surgery allows one to remove unhealthy tissues and suture the tendons to promote healing.

However, by using PRP, we deposit “agitated” platelet cells in the area where it releases large quantities of healing factors which is thought to promote healing.

WHO IS ELIGIBLE?

- ◇ The condition should be present for a minimum 6 months.
- ◇ Failed to resolve with all simple measures like activity modification, stretching & eccentric loading exercises, anti-inflammatory tablets, use of splints etc
- ◇ Should have received one or two steroid and local anaesthetic injection and yet no better.
- ◇ Ready to opt for surgical solution but cannot do so due to risk aversion or inability to participate in lengthy rehabilitation.
- ◇ Not eligible = Jehova’s Witness; on blood thinners like warfarin or clopidogrel etc.

You would have received information regarding this before you visit the clinic. On the day of the proposed injection, the surgeon will re-examine you and perform an ultrasound scan to locate the inflamed scar tissue. Consent will be obtained and you will be requested to complete a questionnaire to monitor your response (Quick DASH questionnaire).

Approximately 28 ml of blood is taken. It will take about 40 minutes to separate the components of the blood. Then using specialised equipment approximately 2 to 3 ml of PRP is separated.

Once the preparation is ready you will be invited back to the room. The injection will then be carried out. Sometimes this will be under ultrasound guidance. Local anaesthetic may be used in some situations. The total time for

FIRST FEW DAYS

- ◇ **Do not drive** for 24 to 48 hours after the injection. Bring someone to take you back home on the day of the injection.
- ◇ **Use ice compression** to decrease pain.
- ◇ Take adequate pain killers; **BUT avoid** anti-inflammatory tablets (common ones are ibuprofen, diclofenac, naproxen etc)
- ◇ On-going pain can take up to 3 to 4 weeks to settle.

SIDE EFFECTS

- ◇ Pain during or just after the injection.
- ◇ **Bruising** lasting for a few weeks.
- ◇ Pins & Needle sensation in the forearm/hand.
- ◇ On-going pain taking up to 3 to 4 weeks to settle.
- ◇ Some weakness, especially in power grip.

EXPECTED COURSE

In the first 6 weeks after the injection you may think that this has not worked as well as a steroid injection or may even feel worse.

At 3 months, on balance, it is likely to have worked better than a steroid injection. At 6 months, it is expected that about two thirds of the patients would be symptom free.

The best of the available evidence suggests that up to 70% of the patients who receive PRP will avoid surgery. Unlike steroid injections this can be repeated if needed.