

FACT SHEET:

Interventional Procedures



Platelet Rich Plasma or Protein Rich Plasma (PRP) Injection

What is a PRP Injection?

A Platelet Rich Plasma or Protein Rich Plasma (PRP) Injection is a procedure that involves the injection of the patient's own blood into an injured area of the body to promote healing. The patient's blood is spun in a centrifuge to separate the blood components.

Platelets are small blood cells that are important for blood clotting after an injury. Within the platelets there are also powerful growth factors, which play a significant role in the repair and regeneration of connective tissues, stimulating tissue repair.

It is most commonly used to treat degeneration of tendons (tendonitis, tendonosis, or tendonopathy), which frequently occurs in association with small tendon tears. This procedure has also been used to treat disease of fasciae, ligaments, and joints. Ultrasound guidance is used to ensure that the blood is delivered precisely and safely to the area concerned.

Though dependant on the severity of the underlying tendon disease, and the length of the symptoms, approximately 80% of patients will obtain complete or significant relief of their symptoms.



Preparation for the procedure

No corticosteroids for 2-3 weeks before the procedure. Stop non-steroidal anti-inflammatory drugs (NSAIDs) 3 days prior. If you are on any blood thinning medication (Aspirin, Warfarin, Iscover, Plavix) please stop 5 days prior to the procedure.

Increase fluid intake in the 24 hours before the procedure.

We recommend that you bring a responsible person to drive you home afterwards. If this is not possible we ask that you stay at the practice for 15-30 min for observation after the procedure

Please bring any prior scans (x-rays, ultrasounds, CT, or MRI's) and reports, as these will assist our radiologist in assessing and effectively treating your condition.

What are the risks and complications?

The risks of this procedure are rare, however they may include:

- Infection at the skin puncture site or deeper within the soft tissues. These can be serious with (<0.1%) requiring hospital admission.
- Bleeding can occur in patients with bleeding disorders and on 'blood thinning' medication.



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- Pain and Stiffness following the injection pain can vary in intensity and duration. You may have a flare up of pain in the first week following the procedure and in most cases this can be relieved with paracetamol.
- Non-response to injection may occur in approximately 7% of patients.

During the procedure

A trained staff member will take some blood, usually from your arm. The blood will be spun in our centrifuge for 15 minutes. The skin is then cleaned and prepared with an antiseptic solution and some local anaesthetic may be used and injected into the skin overlying the tendon.

The platelet portion of the blood withdrawn is then injected directly into the tendon. The amount of blood injected depends on the size of the tendon. A simple dressing will be then placed over the injection site.

After the procedure

A moderate amount of discomfort is expected due to the process of inflammation. Inflammation also results in some swelling and pain and as such paracetamol and a cool compress may help with symptoms.

Refrain from any significant activity involving the body part for one week. Please do not complete or engage in any deliberate exercise with the body part (weight training). Necessary activities of daily living are permissible. DO NOT use any non-steroid anti-inflammatories drugs (NSAIDs) like Aleve, Advil, Ibuprofen or Aspirin for 3 days after the procedure.

Follow up

The Radiologist who completed the procedure, will provide a formal written report to your referring doctor or health care professional detailing the procedure.

Please ensure that you make a follow up appointment with your referring doctor or health care provider to discuss your results of the PRP. A staff member will contact you to follow-up your treatment.

