



## PRP Injections

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**PRP (platelet-rich plasma)** injections are used to treat a number of common orthopedic problems. PRP is a concentration of platelet cells found in your blood which have growth factors that may help in the healing process of chronic injuries. When these growth factors are injected into a chronically injured area, we hope to stimulate your body's ability to heal the area by restarting the healing process.

### WHY DOES PRP WORK?

Human platelets are naturally rich in connective tissue growth factors. Injecting these growth factors into damaged ligaments and tendons stimulates a natural repair process. In other words, PRP recreates and stimulates the body's natural healing process. In order to benefit from these natural healing proteins, the platelets must first be concentrated.

### WHAT CONDITIONS BENEFIT FROM PRP?

PRP treatment works best for chronic ligament and tendon sprains or strains that have failed other conservative treatment, including:

- Lateral and medial epicondylitis of the elbow
- Hamstring tendinosis
- Gluteus medius/minimus tendinitis
- Patellar tendinitis
- Achilles tendinitis
- Plantar fasciitis
- Osteoarthritis
- Chronic ligament sprains

PRP may also be utilized to enhance repaired tissues during and/or after surgical procedures.

### HOW IS PRP PERFORMED?

In the clinic, blood is drawn from the patient and placed in a special centrifuge, where the blood is spun down. The platelets are separated from the red blood cells and are concentrated. The red blood cells are discarded, and the resulting platelet concentrate is used for treatment. The entire treatment, from blood draw, to solution preparation, to injection, takes 45-60 minutes.

### HOW OFTEN ARE INJECTIONS GIVEN?

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After the initial treatment, a follow-up visit is scheduled 6 weeks later. Most patients respond well to just one treatment. However, additional treatments may be desired in some cases.

## IS PRP COVERED BY INSURANCE?

PRP injections are not covered by most insurance plans in the state of Minnesota. A charge of **\$900** is required for the treatment at the time of the appointment.

## HOW DO I PREPARE FOR THE INJECTION?

It is recommended to **avoid anti-inflammatory medications** (eg. Advil, Motrin, Ibuprofen, Aleve, or Celebrex) two weeks prior to your injection as these can *lower* the number of blood cells that are targeted for this injection. Tylenol (acetaminophen) is allowed.

It is encouraged that you maintain or even increase your cardiovascular activity prior to the injection. This can stimulate an *increase* in the blood cells that are targeted for the injection

## DO PRP INJECTIONS HURT?

The injections can certainly be uncomfortable, similar to a tetanus or other vaccine injection. Depending on the injection site, the area can be first anesthetized to help with the discomfort during the injection. Following the injection, there is usually mild-to-moderate pain for the next few days. Because we are restarting the healing process, some people may have increased pain for 1-2 weeks after the injection. Then, over the next 4-6 weeks as the area goes through the healing process, symptoms improve. Some clinical trials are noting ongoing improvement up to 5-6 months after the PRP injection.

## DO I HAVE ANY RESTRICTIONS AFTER THE PRP INJECTION?

For the first 6 weeks after the injection it is critical to **avoid anti-inflammatory medications** (eg. Advil, Motrin, ibuprofen, Aleve, or Celebrex). These will interfere with the healing response.

Tylenol (acetaminophen) is allowed.

Your doctor will discuss any physical activity restrictions you may have following an injection.

## ARE THERE RISKS WITH PRP?

Any time a needle is placed anywhere in the body, even getting blood drawn, there is a risk of infection, bleeding, and tendon and nerve damage. However, these are rare. Other complications, though rare, can occur depending on the area being treated and will be discussed by your physician before starting treatment.

## WHAT IS THE SUCCESS RATE?

Overall success of the procedure is dependent on your initial diagnosis. Some patients experience complete relief of their pain while others receive only partial or, rarely, no relief.