INAHTA Brief

Title Platelet Rich Plasma For Treatment Of Osteoarthritis

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Aim

To assess the efficacy, safety and cost-effectiveness of platelet rich plasma for the treatment of osteoarthritis.

Conclusions and results

Two systematic reviews, two randomised controlled trials and a non-randomised controlled trial were included in this review.

There was insufficient but good level of evidence to support the effectiveness of PRP for the treatment of osteoarthritis. The longest outcome data available was only for 24 months in a study and revealed that the median beneficial results was nine months. Most of the studies available were case series. Studies that have comparisons, used hyaluronic acid as control. In certain countries such as the United Kingdom, intra-articular hyaluronic acid injections are not recommended for the treatment of osteoarthritis.

The short term evidence showed that PRP may be beneficial for young (<50 years old) patients with early OA and not overweight or obese. However, the evidence is limited. In terms of safety, no major complications were reported in patients treated with PRP.

Methods

Literature was searched through electronic databases which included MEDLINE, Cochrane Library via Ovid, EMBASE, PubMed and general databases such as Google Scholar.

The search strategy used these terms either singly or in various combinations: Platelet rich plasma, growth factors, thrombocytes rich plasma, autologous platelet rich plasma, osteoarthritis, degenerative joint disease and osteoarthritis.

The search was limited to human study. The last searched was conducted on 10 April 2013.

Further research/reviews required

Further comparative effectiveness study is required before PRP can be recommended for the treatment of osteoarthritis

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