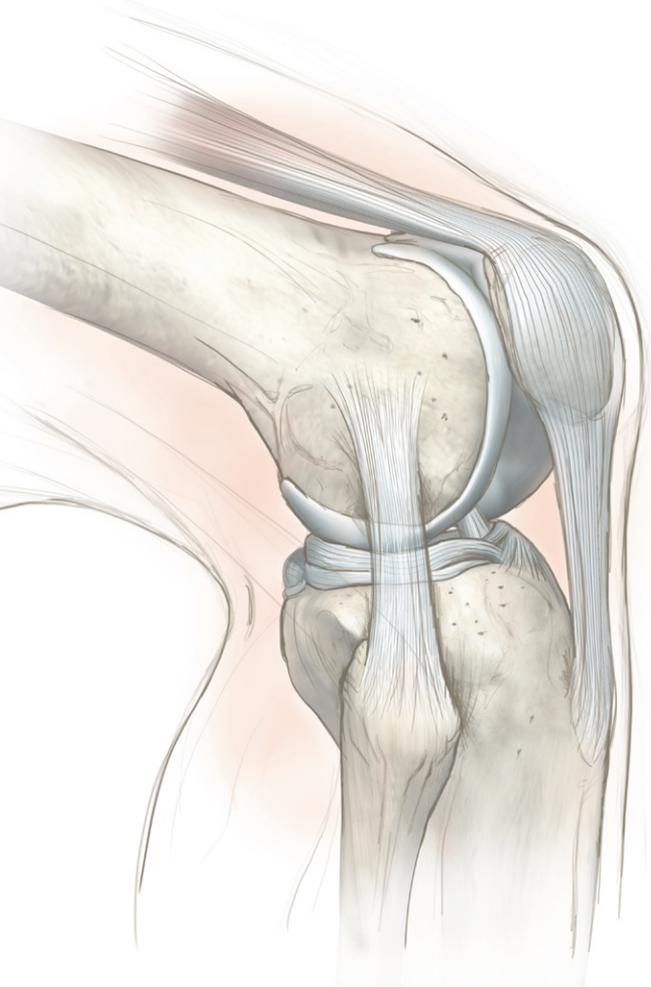


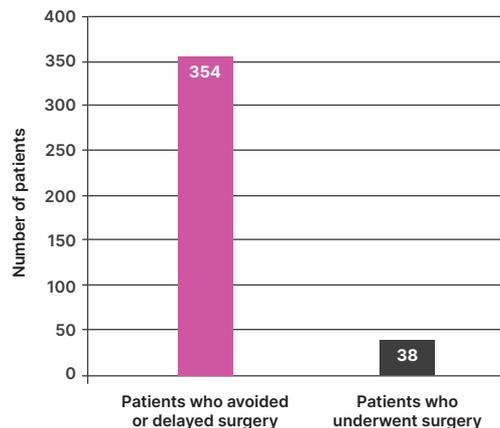
MENISCAL LESIONS

HIGH SURVIVAL RATE AFTER CONSERVATIVE TREATMENT OF MENISCAL LESIONS WITH ENDORET® TECHNOLOGY



392 patients with meniscal injury were treated with intrameniscal and intra-articular US-guided Plasma Rich in Growth Factors (PRGF) injections as a conservative treatment to treat symptoms in order to avoid or delay the need for surgical interventions.

Survival rate of **90,3%** with a median survival of **54,3 months**



CONCLUSION: The combination of intrameniscal and intra-articular infiltrations of PRGF is a valid conservative treatment for meniscal lesions avoiding the need for surgical intervention. Its efficacy is greater in horizontal tears and decreases when there is articular degeneration.

ABSTRACT

High survival rate after the combination of intrameniscal and intraarticular infiltrations of Plasma rich in growth factors as conservative treatment for meniscal lesions

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PURPOSE

To evaluate the efficacy of applying a combination of intrameniscal and intraarticular infiltrations of Plasma Rich in Growth Factors in patients with meniscal tears, analyzing its failure rate and clinical evolution, as well as factors that may influence the positive response to this treatment.

METHODS

Three hundred and ninety-two cases out of 696 met the inclusion criteria and were included in this work. Survival and patient-reported outcome measure (PROM) were collected and analyzed. Survival rate was defined as the percentage of patients who did not undergo meniscus surgery during their follow-up time. Patients were asked to complete the Knee injury and Osteoarthritis Outcome Score (KOOS) at baseline, 6 months and 18 months. Other patient- and pathology-related variables were collected. Blood and PRGF samples were randomly tested as a quality control measure. Survival and comparative statistical tests, and multivariate regression were performed for the analysis of the variables.

RESULTS

The PRGF applied had a platelet concentration factor of 1.9X in respect to blood levels, with no leukocytes or erythrocytes. Thirty-eight patients required surgical intervention after treatment reaching a survival rate of 90.3% with an estimated mean survival time of 54.4 months. The type of injury ($P = 0.002$) and the presence of chondropathy were risk factors for surgical intervention after PRGF treatment ($P = 0.043$). All KOOS scores showed a significant statistical increase from baseline to 6 months ($N = 93$) and 18 months ($N = 66$) ($P < 0.0001$). The number of cases with minimal clinically important improvement (MCII) at 6 months and 18 months post-treatment was 65 (69.9%) and 43 (65.2%), respectively.

CONCLUSIONS

The combination of intrameniscal and intraarticular PRP infiltrations is a valid conservative treatment for meniscal injuries avoiding the need for surgical intervention. Its efficacy is higher in horizontal tears and decreases when joint degeneration is present.

