

Medical Aid Position Statement

Date:	September 2017
Medical Aid Type:	Platelet Rich Therapies (PRT)
Position:	Not Funded
Reviewed By:	Dr. Paul Eagan- CMO

Rationale: Platelet-rich therapies, such as autologous platelet rich plasma (PRP), have been suggested as a treatment option for a variety of musculoskeletal injuries involving ligamentous, muscular and tendon tears as well as various tendinopathies.

A Cochrane systematic review conducted in 2014 examined the current literature to assess the benefits and harms of PRT in the treatment of musculoskeletal soft tissue injuries. The authors found very weak (very low quality) evidence for a slight benefit of PRT in pain in the short term (up to three months). However, pooled data do not show that PRT makes a difference in function in the short, medium or long term. There was weak evidence that suggested that adverse events (harms) occurred at comparable, low rates in people treated with PRT and people not treated with PRT.

The authors concluded that there is insufficient evidence to support the use of PRT/PRP for treating musculoskeletal soft tissue injuries.

Although PRP injections have been proposed as potential treatment for musculoskeletal bone and soft tissue injuries, including patellar tendinopathy, osteoarthritis of the knee, back pain, and rotator cuff tendinopathy, there is currently inconclusive evidence or poor evidence of a therapeutic benefit from PRP when compared to more traditional treatments or no treatment at all.

In summary, the use of platelet rich plasma is considered to be investigational and therefore not medically necessary.

References

Moraes VY, Lenza M, Tamaoki MJ, Faloppa F, Belloti JC. Platelet-rich therapies for musculoskeletal soft tissue injuries. *Cochrane Database of Systematic Reviews* 2014, Issue 4. Art. No.: CD010071. DOI: 10.1002/14651858.CD010071.pub3.
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