

Platelet-rich plasma treatment more effective than cortisone for severe hip bursitis

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Chronic hip bursitis is a common yet difficult condition to treat successfully. A recent study, presented today at the 2014 Annual Meeting of the American Academy of Orthopaedic Surgeons (AAOS), compared the results of PRP and cortisone injections in patients with severe chronic hip (greater trochanteric) bursitis.

In "Platelet-Rich Plasma (PRP) More Effective than Cortisone for Severe Chronic Hip Bursitis," 40 patients were selected for the study and randomly divided into two groups: one group was treated with a single injection of 40 milligrams (mg) of methylprednisolone, and the second group, a single injection of PRP.

Results were recorded using the Harris Hip Score (HHS), which assesses a patient's functionality before and after hip treatment; and the Western Ontario and McMaster Universities Arthritis Index (WOMAC), which measures pain, stiffness and functional limitation. Before the injections, the first group of patients had average HHS scores of 50.5 and WOMAC scores of 58.3, while the second group had similar scores of 51.7 (HHS) and 58.8 (WOMAC).

After three months, the cortisone patients reported an average HHS score of 75.3 and a WOMAC score of 83.6; and the PRP patients, 84.2 (HHS) and 91.4 (WOMAC). The PRP patient scores remained high (87.4 HHS, 89.3 WOMAC), while the <u>cortisone</u> patient scores fell to near pretreatment levels (58.8 HHS, 63.4 WOMAC), at one year post treatment.



According to the study authors, PRP injections are significantly more effective and durable than <u>cortisone injections</u> for the treatment of severe chronic hip bursitis.

Provided by American Academy of Orthopaedic Surgeons

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