E-Poster

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The Efficacy of Platelet-Rich Plasma in Treating De Quervain's Tenosynovitis: A Systematic Review

Topic: Injections (Joint, Spine, etc.)

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BACKGROUND

De Quervain's tenosynovitis (DQT) is a prevalent tendon disorder resulting in significant wrist pain and functional limitations. Traditional treatment methods often include conservative therapies and corticosteroid injections, which may have variable efficacy and potential side effects. Recently, platelet-rich plasma (PRP) injections have emerged as a promising non-surgical alternative aimed at enhancing tendon healing through growth factor stimulation. This systematic review aims to evaluate the effectiveness of PRP in the treatment of DQT compared to conventional treatment methods.

METHODS

Following to PRISMA guidelines, this systematic review aimed to evaluate randomized clinical trials (RCTs) and experimental studies that investigated the efficacy of PRP for DQT. The review systematically searched several electronic databases, including PubMed, ScienceDirect, and the Web of Sciences, covering the period from January 2020 to February 2025. The final analysis focused on assessing the effectiveness and outcomes of PRP treatment, specifically regarding pain reduction and functional improvement as reported by the chosen studies, along with comparisons to corticosteroid (CS) injections.

RESULTS

Findings suggest that PRP injections provide a comparable or superior alternative to CS injections for treating DQT, with significant improvements noted in Visual Analog Scores (VAS), Mayo's wrist score and Disabilities of the Arm, Shoulder, and Hand (DASH) scores across various follow-up durations. When compared with corticosteroid injections, PRP consistently showed better long-term results, although corticosteroids provided faster short-term pain relief. Platelet-rich plasma treatment was associated with minimal side effects, underscoring its safety as a therapeutic alternative to corticosteroids for managing de Quervain's tenosynovitis. However, the substantial heterogeneity in study designs, PRP preparation techniques, and outcome measures presents challenges to establishing a definitive consensus on PRP's efficacy. Variations in injection methods—such as the use of ultrasound guidance versus anatomical landmark approaches—may also affect treatment outcomes, underscoring the need for standardized protocols in future trials.

CONCLUSION

This review highlights PRP as a promising treatment for De Quervain's tenosynovitis, potentially offering a safe and effective alternative to traditional corticosteroid injections. Despite the promising results, the variability in PRP preparation techniques and small sample sizes across studies underscore the necessity for standardized methodologies and larger clinical trials.

Statement of Disclosures

None

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