

Orthopedics, Osteoporosis, Rheumatology & Trauma Care

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Steroid Vs My special preparation for Osteoarthritis/PFPS

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Introduction: In osteoarthritis most surgeons prefer steroid namely triamcinolone or methyl prednisolone for Intra-Articular injection, but its efficacy is very limited, source can be proved from various article review. But I prefer my special preparation which consists of combination of triamcinolone hexacetonide or hydrocortisone or methyl prednisolone plus vit. B1 plus vit. B12 plus lidocaine plus normal saline. In my clinical practice as Orthopaedic Surgeon I have given IA for 15 cases of OA. Their follow-up was made at 2 weeks, then at 1 month for three consecutive months, then at 6 months, then finally at 2 months. After one single shot of my special preparation patient was pain free for over 1 year in which 15 days physiotherapy course was included in 1st 2 weeks after IA. All 15 cases were known cases of DM-2 with HTN and age between 49 to 79.

Discussion: Since all patients had comorbid conditions and already under lots of drugs for DM and HTN, so my special preparation for OA, does not include any oral meds just single shot of my preparation. This puts patients in favourable state and puts patients in no risk or harm from long term analgesic use.

Conclusion: My special preparation single shot is superior and cost effective in comparison to other steroid repetitive use. It uses help avoid long term analgesic use and its complications in patients with DM and HTN as their renal function and Heart function are always at risk.

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