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David Berkoff loads platelet-rich blood plasma, shown in yellow above the red blood.

Blood therapy for pros makes its way to masses

By Sarah Avery
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DURHAM, N.C. — Chuck Rickard is no pro golfer, but playing means enough to him that he recently let a doctor poke a needle deep into his aching ankle for a treatment he hopes will speed his return to the greens.

Rickard, 64, a retired college administrator, is among a growing number of weekend warriors, arthritis sufferers and surgery patients who are gaining access to an experimental blood therapy that not long ago was reserved for elite athletes.

For all its hype, plasma-rich platelet therapy, or PRP, is a fairly simple process. It uses a person's own blood, which is spun at high speeds to separate it into its main components — red and white blood cells, and platelets.

The platelets, which are light and gravitate to the top during the spin cycle, contain growth factors that promote healing. The concentrated dose is then injected into the damaged area, where it goes to work.

David Berkoff, a Duke University sports-medicine physician who began offering PRP last summer, said the approach shows promise, although, be-

yond anecdotal evidence, few studies have been done to validate its effects. Of the early findings, there are indications PRP can speed healing of tendons and ligaments, which can be notoriously slow to repair, as anyone with tennis elbow can attest.

"It's not magic, and it doesn't fix everything," Berkoff said. He said he recommends it only for certain of his patients, including Rickard, who has arthritis in his ankle from a high-school basketball injury.

Despite the lack of studies, PRP has

See **BLOOD THERAPY** Page D2

Using your own blood to heal

BLOOD THERAPY
Continued from D1

been gaining enthusiastic supporters, including pro football and baseball players who have careers riding on their ability to overcome injuries quickly.

Though there is nothing illegal about the treatment — it's not performance enhancing — doctors offer caution. Jeffrey Spang, a sports medicine specialist at University of North Carolina-Chapel Hill, said the therapy has much going for it, but remains unproven.

"The basic science research is very promising, and for that reason, people are excited about it," Spang said. "But the reality is, it's still an investigational process."

Spang said PRP has moved into the marketplace now, before studies have shown conclusive benefits, because technology has become available that allows doctors to isolate the platelets in their offices.

Previously, he said, the separation process required equipment that was available only in laboratories. Now, using special syringes, doctors can draw blood and use common centrifuges. The main expense is in the special syringes, which sell for hundreds of dollars.

At Duke, PRP costs about \$300 per injection, and it's not covered by insurance because it's considered experimental. Many patients require a second or third injection.

But aside from injection pain, there are few side effects, because the process uses the patient's own blood products.

Rickard said he was eager to try the therapy because the other options offered were surgery, either a full ankle replacement or a fusion of bones that would impair his mobility. He said he also wasn't enthusiastic about steroid shots, which ease the pain but do nothing to heal the damaged tissue.

"When I heard about this, I thought, give it a try," Rickard said. His biggest worry was the pain of the injection; numbing agents can't be used, because they interfere with the platelet's healing powers.

Still, Rickard said the jab was less painful than he anticipated. As Berkoff wrapped up the 15-minute procedure, Rickard said he was eager to get home and let the healing begin.

"The theory with this is the body heals itself," Rickard said. He's just happy to give it a head start in plenty of time for spring golf.