

# The Case for Prolotherapy – The Closing Argument

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**C**hronic pain can dominate a patient's life. From the physiological disability of being unable to perform daily activities, to the financial cost of missed work and expensive procedures, the pain can quickly spread from the body to the pocketbook. Left unresolved, pain can dominate every aspect of life, robbing patients of their ability to care for themselves or provide a decent life for their family. When it comes to pain, modern medicine is sometimes more concerned with pain management than the treatment of the pain's underlying causes.

In this issue, the practitioners and researchers on the front lines of the fight against chronic pain outlined the evidence for Prolotherapy. In this issue, you read the evidence that shows that Prolotherapy is an effective tool to not only manage pain, but to resolve it. The case for Prolotherapy is supported by the idea that medicine should be evidence-based. Put simply, a procedure should be supported by literature, and it should be cost effective compared to its benefits. In the case for Prolotherapy, the verdict is that it is effective at reducing pain, affordable, and low risk. In short: Prolotherapy is evidence-based medicine.

## PROLOTHERAPY AS A FIRST RESORT

Many patients discover Prolotherapy after experiencing untold numbers of costly and ineffective treatments, eventually being told that there are no other options for treating their joint pain. Imagine for just a moment, if all of that time, energy, and money could be saved by making Prolotherapy a treatment of first resort. Imagine a world where skilled doctors perform Prolotherapy in lieu of other costly, invasive, and ineffective procedures. This is not to say that Prolotherapy is a cure-all, but if even a portion of joint replacements and other surgeries could be prevented, the cost savings would be staggering. More importantly, the patient's quality of life would be dramatically improved.

The U.S. Preventative Services Task Force (USPSTF) ranks a procedure based on the quality of the evidence to support it, and the benefit of the procedure weighed against its risks. The evidence presented in this issue qualifies as both A and B level evidence, that is, gold standard evidence in support of Prolotherapy. Moreover, when a procedure is supported by A and B level evidence, USPSTF guidelines provide that the treatment be offered to eligible patients. This means that patients should be offered Prolotherapy as a primary treatment option, and not merely as a last-ditch effort when all other procedures have failed. By postponing healing, we are wasting time and money and failing the patient.

## THE VERDICT FOR PROLOTHERAPY

In this issue you have read just some of the evidence that Prolotherapy is an effective treatment for a wide range of injuries caused by injured ligaments and other soft tissue structures. The evidence shows that Prolotherapy has a role in preventing arthritis and restoring joints. It is an outpatient, low-risk procedure that allows the patient to resume normal activities nearly instantaneously. It is well-established, non-experimental, evidence-based medicine. So why is Prolotherapy not the most practiced treatment for musculoskeletal injuries?

The irony is very real. Insurance companies routinely cover procedures that are not supported by evidence and, in fact, have been shown to be destructive. Cortisone, for example, has been shown to not only have no pain relieving effects three weeks after treatment, some research notes that cortisone accelerates the development of degenerative arthritis in the treated joint. Nevertheless, if research leads, insurance companies will hopefully follow. If doctors offer Prolotherapy appropriately, patients will see the value in this treatment. As patients experience the benefits and these results continue to be published, they will demand the treatment even more.

A patient's path to recovery is beset with obstacles. From choosing which procedures to undergo, to arguing with the insurance company, navigating modern medicine is no easy task, particularly while coping with pain and attempting to heal. Prolotherapy is evidence-based therapy. Not only should it be covered by insurance companies as one of many other pain-reducing therapies, evidence validates its use early, rather than late, as a pain-reducing therapy. By offering evidence-based medicine, patients are assured that they are receiving the best care possible. Patients deserve nothing less. ■