



What are doctors trying to treat in knee arthritis?

Knee arthritis is almost universal as we age, and though we don't understand all the causative factors, it is clear age and family history are two of the most important. Other factors such as prior injury, patient weight, and joint stress also play a role. We are beginning to understand these factors more in recent years.

To understand what we do to treat knee pain in arthritis, we must first understand what happens to an arthritic knee joint, and what actually causes the patient to have pain.

Cartilage loss and joint changes

End stage knee arthritis is the culmination of long term changes. The change most commonly noted is the loss of articular cartilage. However almost every aspect of the joint changes, including ligaments, bone and tendons, as well as the surrounding muscle. Nonetheless, most physicians consider the cartilage loss as the primary issue leading to knee pain.

What happens in knee surgery?

During knee replacement surgery the ends of the two major knee bones and the remaining cartilage are sawed off and disposed. The hope is that this will relieve the pain, removing injured cartilage. But such extensive surgery may lead to unintended consequences. Evidence suggests even balance receptors are removed and this may lead to other issues.



Is Cartilage loss really the cause of pain?

The American Association of Orthopedic surgeons suggests no MRI if the patient is suspected of end stage knee arthritis. Only x-ray is recommended. The problem is that knee arthritis is like spine problems, many people have x-ray evidence of arthritis, but not all of them hurt. Why?

Some recent studies suggest that knee pain may be more associated with subchondral edema, or bone changes, than it is with cartilage loss. These changes can only be seen on MRI.



How can cell therapy treatments relieve the knee pain?

We believe that knee pain in arthritis is closely associated with bone changes and that if we can fix those changes, the pain may be markedly improved.

We know that stem cells have the ability to grow cartilage, bone, ligament and tendons. These cells have been used effectively to heal injured bone.

Arthrex developed a procedure called the bioplasty. This uses demineralized donor bone, along with cells, to heal the injured bone beneath the cartilage damage. We have seen great relief in short time, in our practice.



Has cell therapy been used long?

Cell therapy and stem cells have been used for half a century, but only recently in this role. In 2018, Dr. Hernigou in France, published data showing 2 of 3 patients who had knee replacement on one knee, and cell therapy on the other, preferred cell therapy.

Who should have cell therapy?

Patients who fail standard treatments and are left facing knee replacement, should consider cell therapy.

At Southcoast we are a Bluetail affiliate and benefit from the knowledge and experience that comes with over 50,000 cell therapy treatments. We can help!

Southcoast Medical
Southcoast Regenerative
843 990 8390
www.getactiveagain.com



Cell Therapy for Knee Arthritis

**CELL THERAPY CAN
WORK FOR KNEE
ARTHRITIS**

**Southcoast
Regenerative**