

Placental Tissue Matrix
Skye Biologics PX50®

Case Report

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Diagnosis

Right acromioclavicular joint instability

Intro

Patient is a 71-year-old female who had pain in both shoulders, worsening after a fall when she slipped on carpet. She had four laminectomies on her back and the most recent one was less helpful. The pain radiated down both arms and hurt on the elbows.

Diagnosis

Dr. Tierney used a B-mode ultrasound with 8 to 13MHz high frequency GE 12L linear transducer to perform a diagnostic exam. The ultrasound revealed

1. Bilateral acromioclavicular instability and degeneration irritating the supraclavicular nerves
2. Effusion of the left glenohumeral joint
3. Generalized calcific Tendinosis of the supraspinatus infraspinatus conjoint insertion

4. Very mild left glenohumeral instability
5. 1st costotransverse joint capsulitis irritating the overlying dorsal scapular nerve spinal accessory nerve and sub-trapezius plexus

Initial Treatment

On November 18 2016, she received 0.5% Ropivacaine and 0.1 cc 50 mg/mL aqueous testosterone at the right acromioclavicular joint and a hydrodissection of the spinal accessory nerve, sub-trapezius plexus, and the dorsal scapular nerve, to stimulate healing in the tendons and joints, and decrease the neuralgia. In her follow-up ultrasound on December 7, 2016, the impression was grossly unchanged. Patient still reported significant pain in the shoulder and arms, even with minimal exercise and workouts. She agreed to receive the PX50[®] solution in hopes of improved pain relief.

PX50[®] Treatment

On December 7, 2016, 0.5 cc .5% Ropivacaine with 0.5 cc Skye Biologics Placental Tissue Matrix Allograft, PX50[®], was injected into the right acromioclavicular joint, and normal saline and 1% Lidocaine were used to hydrodissect the spinal accessory nerve, sub-trapezius plexus, and the dorsal scapular nerve.

Follow Up

On January 26, 2016, one and a half months after the PX50[®] injection, the patient reported significant improvement in the shoulder. She reported no pain in the right shoulder or bilateral arms. She greatly appreciated the treatment and the relief of pain she received, and was very interested in getting relief of her back pain with PX50[®].

Figure 1. Reduction in Self-Reported Pain on a 1-10 Scale, before and after PTM Placental Tissue Matrix

Level of Pain	Pre- PX50 [®]	Post- PX50 [®]
	11/2016	1/2017
Average Pain	8	0
% Reduction in Pain	100%	