

Placental Tissue Matrix  
Skye Biologics PX50®

Case Report

July 23, 2016

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Diagnosis

Left knee pain

Intro

Patient is a 13 year-old female who presented on August 12, 2016, complaining of right shoulder pain. The pain had started after a volleyball tournament at the end of June, and was not getting better with rest and time.

Using a B-mode ultrasound with 8 to 13MHz high frequency GE 12L linear transducer, Dr. Tierney performed a diagnostic exam, which revealed the following:

1. Inferior glenohumeral instability
2. Acromioclavicular instability irritating the supraclavicular nerve
3. Supraclavicular nerve irritating in the anterior to mid deltoid
4. Generalized ligamentous laxity

She was recommended to receive the Skye Biologics Placental Tissue Matrix Allograft to the right acromioclavicular joint and glenohumeral joint.

Treatment

Under ultrasound guidance, a needle was guided to inject the acromioclavicular joint and glenohumeral joint with 0.5 cc .5% Ropivacaine with 0.5 cc Skye Biologics Placental Tissue Matrix Allograft, PX50®. The shoulder was subsequently taped for 14 days, and patient instructed to wear a sling for 3 days and to avoid weight bearing on the left arm for 10 days.

#### Follow-up

On September 15, 2016, 5 weeks after the injection, patient reported she had favorable relief from the PX50®, as her pain and shoulder instability had notably improved. Repeat ultrasound exam revealed some acromioclavicular instability and some ligamentous laxity, but patient was reassured that the healing process was still underway. Patient was instructed to keep taping with Leukotape and continue progressing through physical therapy and monitor for improvement in strength. Patient was cleared to start training for the fall soccer season.

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®
	8/12/16	9/15/16
Average Pain	5	1
% Reduction in Pain	80%	