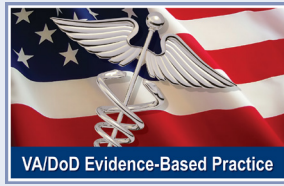


# Orthobiologics at a Glance



WHERE IT COMES FROM



HOW IT'S PREPARED



HOW IT'S USED



WHAT THE RESEARCH SAYS

## What You Should Know

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### Purpose

If you're considering orthobiologic treatments for hip or knee osteoarthritis (OA), this guide can help. It explains what these treatments are, what research has found, and what the 2026 VA/DoD Clinical Practice Guideline (CPG) recommends.

### Considering an Orthobiologic Treatment

Before considering an orthobiologic treatment, it's important to know that these therapies are still being studied. While some specialists may recommend them, more research is needed to understand who may benefit, the best dose, how often they should be used, and how they should be prepared.

### What Are Orthobiologics?

Cellular and blood-derived orthobiologics use cells or parts of your own blood in an effort to support healing and reduce symptoms. While these treatments may sound promising, more research is needed to understand how well they work and who may benefit.

# Insufficient Evidence to Recommend these Treatments

## Platelet-Rich Plasma (PRP)

### What is it?

Uses a concentration of your own blood platelets that is injected into the joint.

### Why isn't it recommended?

Some studies found improvements in pain and daily function, while others did not. More research is needed to know which patients may benefit and whether the results last over time.



## Bone Marrow Aspirate Concentrate (BMAC)

### What is it?

Uses cells and growth factors taken from your own bone marrow and injected into the joint.

### Why isn't it recommended?

Studies have not consistently shown meaningful improvements in pain or physical function compared with standard treatments.



## Stem Cell Therapies

### What is it?

Use stem cells intended to repair damaged joint tissue.

### Why isn't it recommended?

Studies have not consistently shown lasting improvements in pain, function, or joint health.



## Adipose-Derived Cellular Products

### What is it?

Use cells and growth factors taken from your own body fat.

### Why isn't it recommended?

One small study found improved function, but there is not enough research to know whether this treatment works consistently.



# These treatments are Not Recommended



## **Autologous Protein Solution (APS / nSTRIDE®)**

### **What is it?**

Uses proteins from your own blood that are injected into the joint.

### **Why isn't it recommended?**

No improvement in pain, function, or quality of life compared with saline.

## **Atelocollagen**

### **What is it?**

Uses an injectable collagen scaffold intended to support joint tissue.

### **Why isn't it recommended?**

No improvement in function compared with placebo.

## **LMWF-5A**

### **What is it?**

Uses a protein solution injected into the joint to help reduce pain.

### **Why isn't it recommended?**

No improvement in pain or function at 12 months compared with placebo.

## **Sprifermin**

### **What is it?**

Uses a growth factor injected into the joint to support cartilage.

### **Why isn't it recommended?**

No improvement in function compared with placebo.

## Before You Decide

Orthobiologic treatments continue to be studied for hip and knee osteoarthritis. While some treatments show promise, many still have limited evidence, and some are not recommended based on current research.

Use this information to have an informed discussion with your healthcare provider about whether an orthobiologic treatment is right for you.

## Questions to Ask

- What does the current evidence say about this treatment?
- What benefits can I realistically expect?
- What are the possible risks or side effects?
- Will my insurance cover this treatment, or will I pay out of pocket?
- Are there evidence-based treatments I should try first?
- How will we know if the treatment is working?

## Key Takeaway

The goal of treatment is to reduce pain, improve function, and help you stay active.

Orthobiologic therapies may be appropriate for some people, but many are still being studied. Decisions should be based on the best available evidence, your symptoms, your goals, and a discussion with your healthcare provider.

Continue using treatments supported by the VA/DoD guideline—including exercise, weight management, physical therapy, medications when appropriate, and other recommended therapies—as part of your overall osteoarthritis care.

