

Amniotic Fluid and PRP injection aftercare

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If It Hurts – Don't Do It

Please use caution with activity. You can be sore from the procedure. Muscle spasms from the injection are not uncommon, and you should be prepared to have some pain or discomfort the first week. Use pain as your guideline and limit activity early in your recovery. Use heat for muscle spasms (deep ache, grabbing pain with transitions), and ice for inflammation (sharp, localized, burning, nerve pain). You may alternate hot and cold as needed. Deep diaphragmatic breathing and stretching with heat can help with muscular pain. Get up and walk frequently. "Motion is lotion!"

The Anti-Inflammatory Effect

The first week after injection, some people enjoy the anti-inflammatory benefit of stem cells, resulting in a dramatic decrease in pain; however, many people have increased pain from the procedure. You must not overdo it! Use caution with activity, no matter how good you feel. The old pain may return in a few days. Do not take anti-inflammatory medication, like Aspirin, Motrin, Aleve, or other NSAIDs, Tylenol is fine. You need your body's natural inflammatory process to start the healing process to create the matrix in your tissue/joint to gravitate the stem cells.

Immediately After Injections

Every case is unique and side effects differ for each person. Some patients may experience more pain and inflammation than others; please contact us if you have any questions or concerns. Certain joints and body areas can be more painful to inject, such as the spinal discs and the ankles. Expect varying degrees of pain in the first few days after the procedure, and treat with ice and/or heat and medication if necessary. If your severe pain lasts for more than a few days, contact us for advice. Treatments that can help with managing the pain and benefit the healing process include ultrasound, electrical stimulation, cold laser, gentle myofascial release, core and joint stabilization, stretching, trigger point dry needling, kinesiology tape, massage, ice and heat, and medication.

Weeks 1 & 2 After Injections

Restrict yourself to light activity and the tasks of daily living. You may be sore, but it is better to move than to be completely sedentary. Use pain as your guideline. In the early weeks of regenerative healing, your body's natural inflammatory process will use cytokines, leukocytes, proteins and inflammation to create a "scaffold" for the cells to bind to. The cells are just starting to form and divide, so you want to be very cautious and avoid overloading, shearing, or compression on the joint that was injected. Avoid too many frequent stairs, if possible (for hip and knee injections), and limit lifting to 5-10 pounds on occasion. No running or weight lifting the

first 6 weeks! Minimize load, compressive forces, and torque on the joints and discs. Range-of-motion and gentle stretching exercises are appropriate. Light and easy walking can be very helpful to minimize soreness for spine patients.

Manage muscle soreness and spasms with heat (hot shower, heating pad) and inflammation from procedure with ice. Avoid NSAIDs (ibuprofen, Aleve, anti-inflammatory medication). You need your body's inflammatory process to help with healing. Walking in the pool is a nice way to get some motion; it can unload your joints and be soothing. You can get in the pool once your injection sites are healed. Use a kickboard, buoy, or noodle for support in the water. Analgesic creams or gel (like Bengay) can help with pain. It is not uncommon to have increased soreness in your tissues and joints from the procedure. Mild to moderate pain is acceptable for a few days, but severe pain is not. If your pain becomes severe, or you cannot manage your pain with the above recommendations, contact us at 505-261-1121.

Weeks 3 & 4 After Injections

Avoid repetitive loaded exercise, like stair steppers, running, or weight lifting. You may walk, use an exercise bike or elliptical machine or swim/walk in the pool. These exercises have minimal compressive loading or pounding to joints. Keep all workouts to less than 50 percent of normal/pre-injection distance/weight/reps. Give the new stem cells time to implant themselves in the healing tissues. Proceed with caution; increase activity only within pain limits. If it hurts, don't do it! Maintain normal range of motion in injected areas with gentle exercise. Yoga, stretching, mat Pilates, tai chi, and easy walking are perfect. Continue to manage inflammation with ice and pain medications as directed if needed. If pain persists and doesn't respond to other medications or treatments, you may start taking NSAIDs, but avoid them if you can. Contact us if you are still having pain or difficulty with your healing.

Weeks 5 & 6 After Injections

You may initiate light running exercise on even and soft terrain, a treadmill, or a track. Wear lumbar or joint support. Please be careful with jarring or compressive exercise, and avoid shearing. No hiking on inclines or difficult, uneven terrain. Going up hills may feel fine, but coming down is difficult for an unstable joint. Continue with core stabilization and joint stabilization exercises. You may start to increase resistance with weight lifting, but please still be cautious.

Your stem cells are building new tissue and need oxygen/blood flow through gentle exercise but can't tolerate being stressed by too much exercise. You may continue with stationary bike, elliptical, stretching, yoga, Pilates, and swimming exercise. Avoid compressive exercise such as overhead press, calf raises with weights on shoulders, squat rack, supine leg press, prone hamstring curls, twisting, repetitive flexion/extension, deadlifts, clean and jerks, kettlebells over shoulder level, box jumping, etc. If you still are experiencing pain, please back off on activity and continue to use ice. If you have concerns or questions, please don't hesitate to call.

Weeks 7 & 8 After Injections

As long as you're not having pain, you can slowly progress to your normal workout, but never to the point of pain in the injected area. Set yourself up for success by maintaining some aerobic capacity without injuring the new juvenile stem cells. Avoid shearing or over compressive exercises. Continue to increase core and joint strengthening for optimal stabilization. Continue to use ice for pain and inflammation as needed.

Months 3–6 After Injections

The stem cells are now at their peak of healing potential; help them heal you by not overdoing it. Walking, biking, yoga, stretching, and light weights are appropriate. Be careful with distance running. Get yourself strong to support your joints. Continue to use caution with compressive activity, twisting, planting and pivoting, overhead activity, and repetitive motion. Consider physical therapy if you need guidance on proper exercise to protect your joints and injection site(s) as you continue to heal.

Special Populations

Disc Patients

Avoid overhead work if possible, for several months. This can put a lot of force on your new cells. You want to be careful and try to avoid compression with extension, repetitive flexion or twisting until your core is strong. Avoid compressive exercise such as overhead press, calf raises with weights on shoulders, squat rack, supine leg press, twisting, repetitive flexion/extension, deadlifts, clean and jerks, kettlebells over shoulder level, box jumping, etc. Highly recommended: core abdominal exercises; strengthen obliques, QLs, and gluteus medius; gentle spinal stabilization exercises; and stretching lower extremities and lower back for mobility. Pilates (mat and Reformer, chair), yoga and swimming are also appropriate. Get yourself strong before you challenge your spine. Remember what got you to the point of seeking stem cell therapy. Most likely, you were in pain and your spine was weak.

Shoulder Patients

Avoid overhead work if possible, for two to three months. Don't play tennis with the injected side for six to eight weeks. Set yourself up for success. A rotator cuff stabilization program (JOBES) and postural stabilization exercises are appropriate. Avoid shoulder/military press above head; no kettlebells over shoulder level during healing phase.

Hip, Knee and Ankle Patients

Avoid compression activities such as running, jumping, squatting, supine leg press, or pivoting for two to three months to allow the cells to settle. Pain is your guideline. Walking, elliptical, swimming, yoga, and Pilates are ideal exercises early in the recovery stage. You may resume light running and short distance running, ideally on soft terrain in weeks 6–8. Gradually increase your distance in weeks 8–12. You may start easy hiking in week 8 as long as there is no pain or swelling. Consider some physical therapy to strengthen knees and hips, and to support the joints. Ideally, you should exercise to stabilize the entire lower extremity (hip, knee, and ankle).

