

Effects of Intramuscular Administration of Platelet-Rich Plasma on Denervated Muscle After Peripheral Nerve Injury

Francisco Soldado¹, Maider Beitia², <u>Diego Delgado²</u>, Gontzal Garcia del Caño³, Ane Miren Bilbao¹, Nicolás Fiz¹, Joan Sallés³, Mikel Sánchez^{1,2}

- 1. Arthroscopic Surgery Unit, Vitoria-Gasteiz, Spain
- 2. Advanced Biological Therapy Unit, Vitoria-Gasteiz, Spain
- 3. Faculty of Pharmacy, University of the Basque Country, Vitoria-Gasteiz, Spain









Faculty Disclosure Information

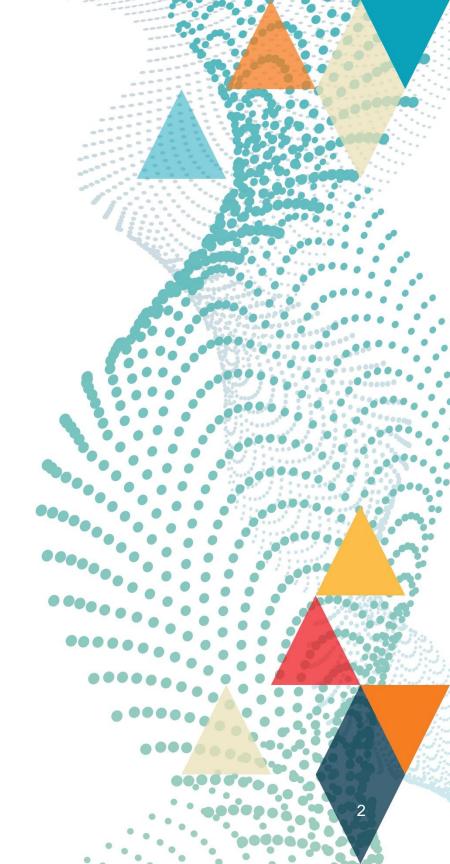
Nothing to disclosure











Introduction

- Peripheral nerve injuries (PNI) are one of the most prevalent injuries of the musculoskeletal system (more 10⁶ per year).
- Following peripheral nerve injury, prolonged **denervation of the muscle** prevents adequate reinnervation, even if nerve repair is carried out.
- Muscle deterioration and atrophy, and loss of function worsen as denervation is prolonged, which
 may prevent adequate reinnervation after nerve repair.

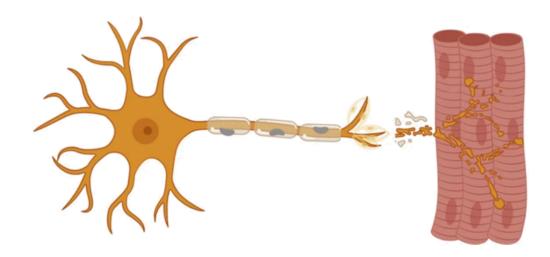


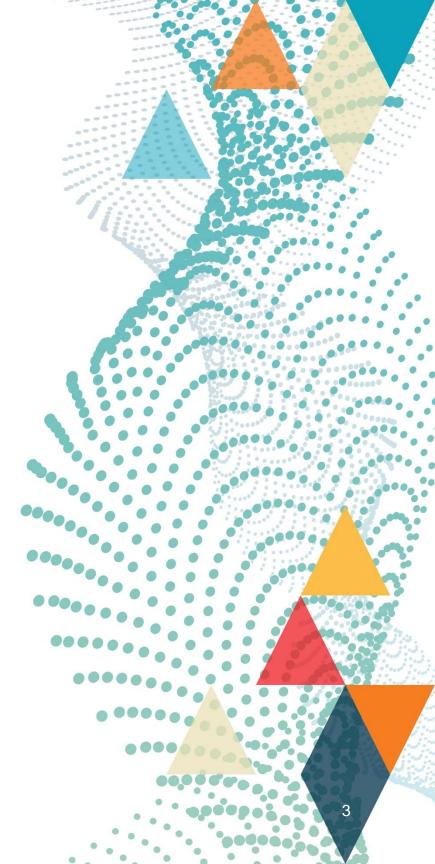
Image modified from Fissel et al. J Neuroinflammation. 2021 Mar 15;18(1):71. doi: 10.1186/s12974-021-02121-2.





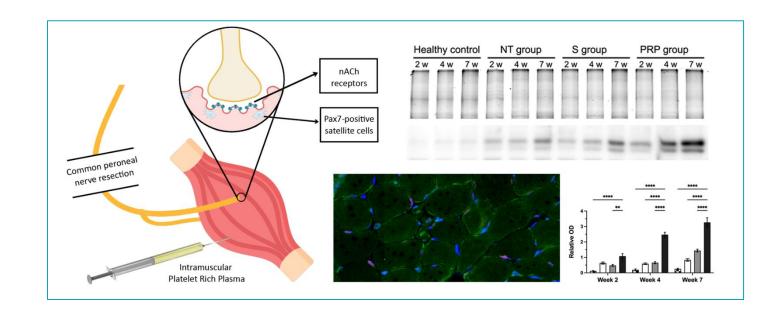






Objective

- Analyze the effect of intramuscular injection of Platelet Rich Plasma (PRP) in a denervated muscle due to peripheral nerve injury.
- The hypothesis of this study is based on exploiting the biological action and stimulation of PRP to attenuate the effects generated in the muscle by the denervation induced after peripheral nerve injury.

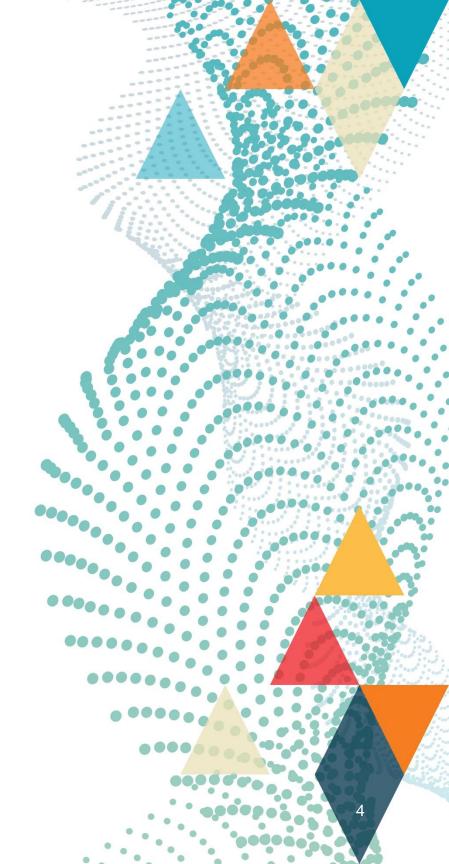










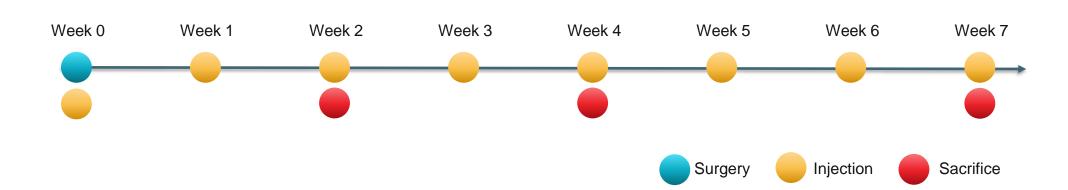


Methods

- An irreversible PNI was generated in the common peroneal nerve of 80 Wistar rats by nerve.
- Animals were divided into thre groups (N=18): **non-treatment (NT)**, **saline (S) and PRP (PRP)**. Additional group for obtaining PRP (N= 26).
- 200 uL of saline (S group) and PRP (PRP group) were infiltrated intramuscularly into the tibialis anterior muscle on a weekly basis, from surgery to sacrifice (at 2, 4 and 7 weeks)





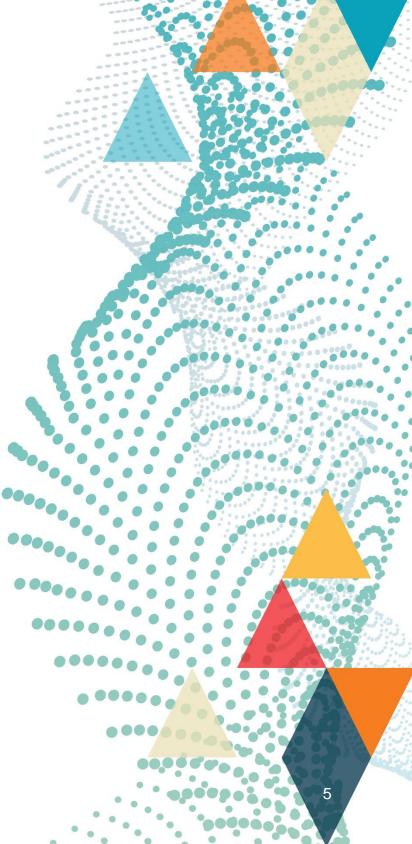






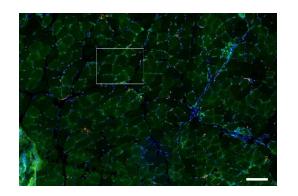


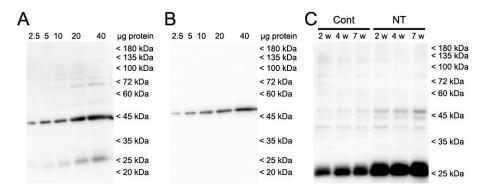




Methods

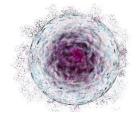
• Muscles were weighted and histologically processed for immunofluorescence and Western blotting.





Effects on nicotinic acetylcholine receptor (nAChR) and satellite cells (SC).





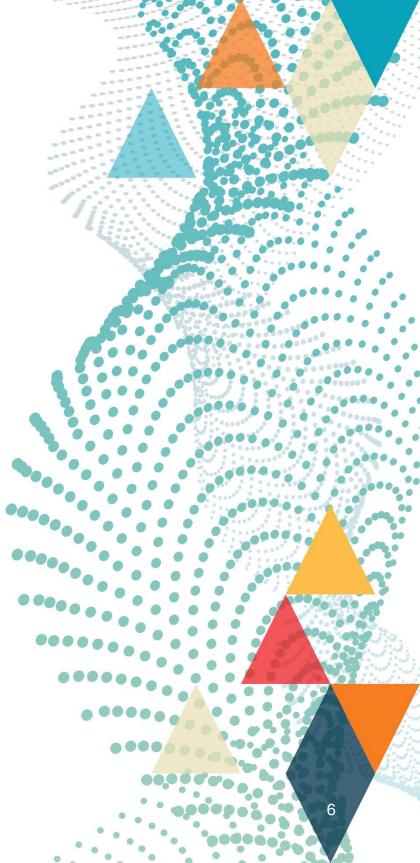
• Comparisons were performed by two-way analysis of variance (ANOVA).











Results



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Table S2. Characteristics of Platele	et Rich-Plasm
1. PRP Preparation	
Initial blood volume	5 mL per donor animal
Anticoagulant	Sodium citrate 3.8% (wt/V)
System	Close
Centrifugation	Yes
number	1
speed	300 g / 8 min
Final PRP volume	2 mL
2. PRP Characteristics	
PRP Type	812-00-11
MPV	7.5 ± 0.2 fL
Red Blood Cells	0.03 × 10 ⁶ /μL
White Blood Cells	0.03 × 10³/μL
Activation	CaCl ₂ (10% wt/vol)
3. Application Characteristics	
Formulation type	Liquid
Administration route	Intramuscular
Dosage	1 injection per week
Volume	200 μL
Dose (range of platelets)	1.7 x 10 ⁸ - 3.1 x 10 ⁸
Tissue	Muscle (tibialis anterior muscle)
Pathology	Denervated muscle
Animal	Wistar Rat

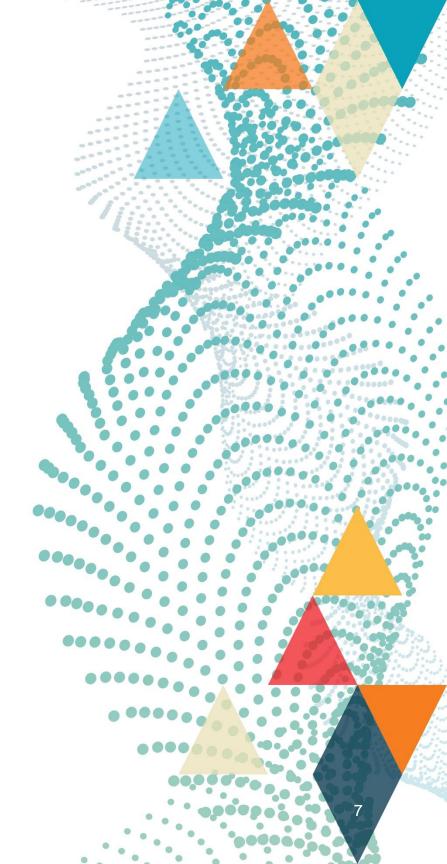
The mean platelet concentration of PRP was $1202.7 \times 103 \pm 335.8$ platelets/ μ L, achieving a platelet enrichment of 1.5 times the blood platelet concentration, without leukocytes and erythrocytes.





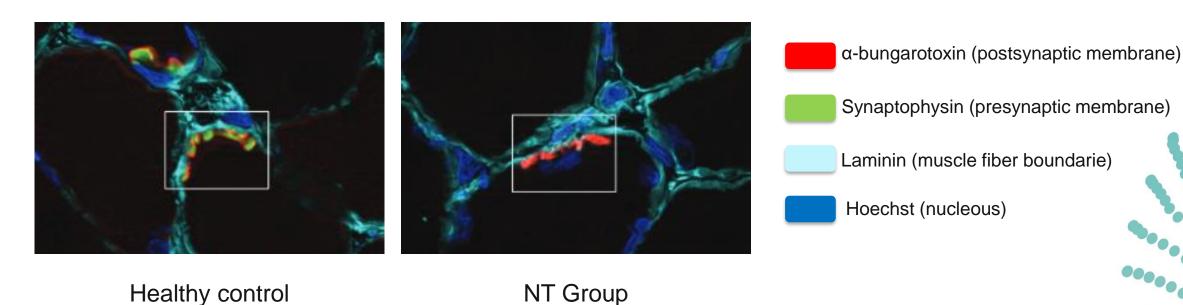






Results - Denervation generation

The effectiveness of denervation was confirmed by analyzing the motor end plates through a combination of synaptophysin and α -bungarotoxin immunostaining, showing the absence of presynaptic synaptophysin signal in denervated muscles even 7 weeks post-denervation.



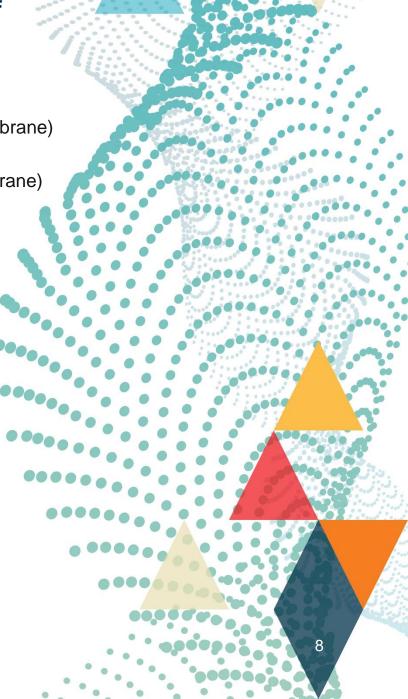
Absence of synaptophysin signal (green) in denervated muscle (Nt Group), confirming effective and irreversible denervation.



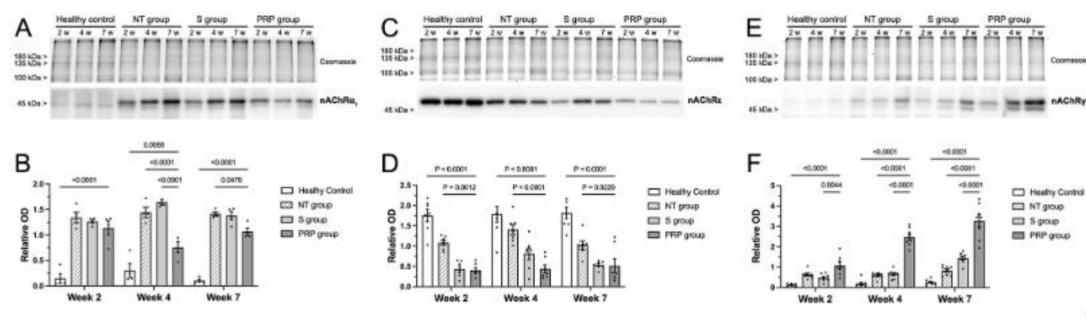








Results - Acetylcholine receptors



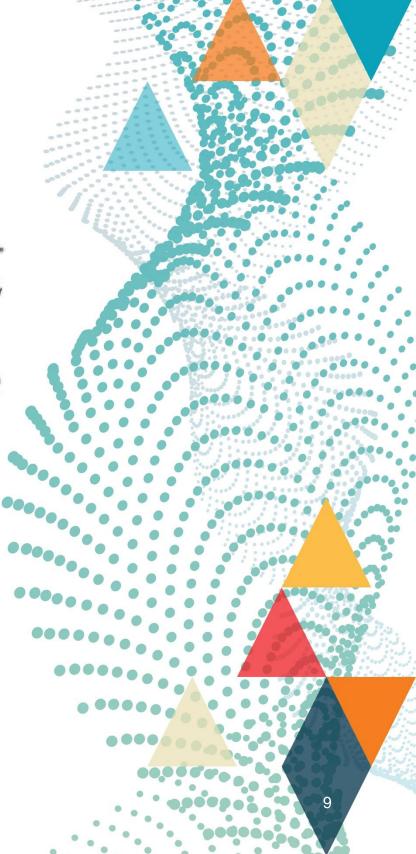
The PRP group showed changes in the nAChR clusters of the NMJ, with a significant decrease in the ϵ subunit (adult type) (C-D) and a significant increase in the γ subunit (fetal type) (E-F), compared to the other groups (p < 0.05).





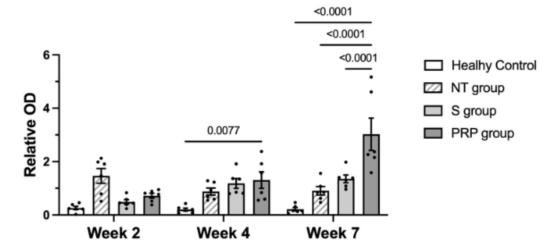


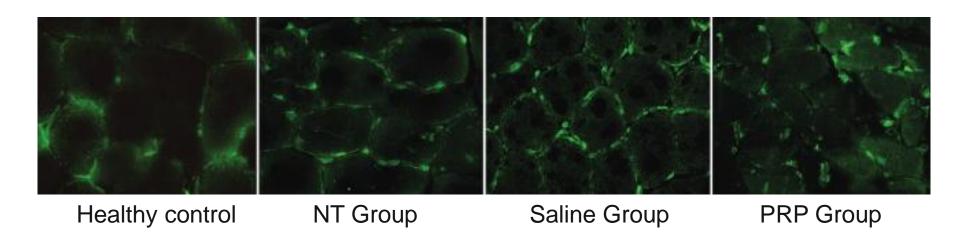




Results - Satellite Cells

The PRP group also showed significantly higher levels of the protein Pax7 (p < 0.05), indicating SCs stimulation.





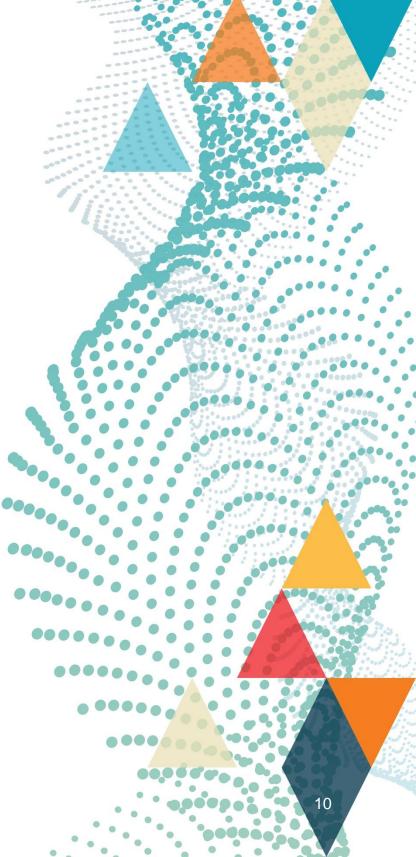
Immunofluorescence of Pax7- positive cells at 7-weeks after surgery.





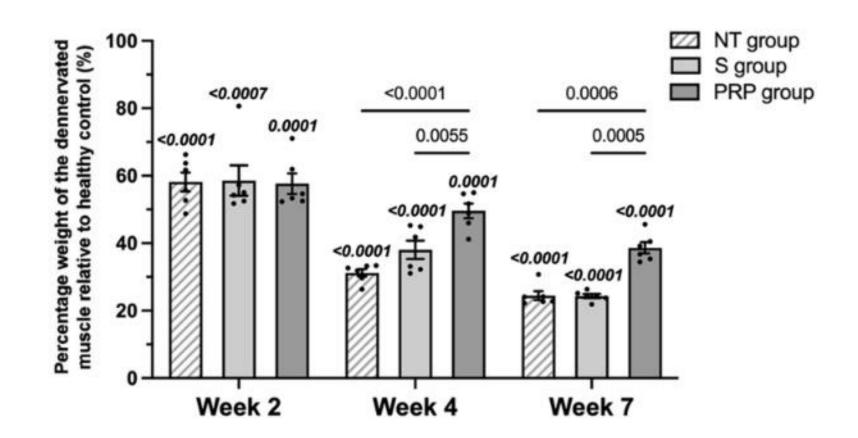






Results - Muscle weight

PRP group suffered less and slower weight loss than the control groups (saline and no-treatment), suggesting less muscle atrophy (p < 0.05).

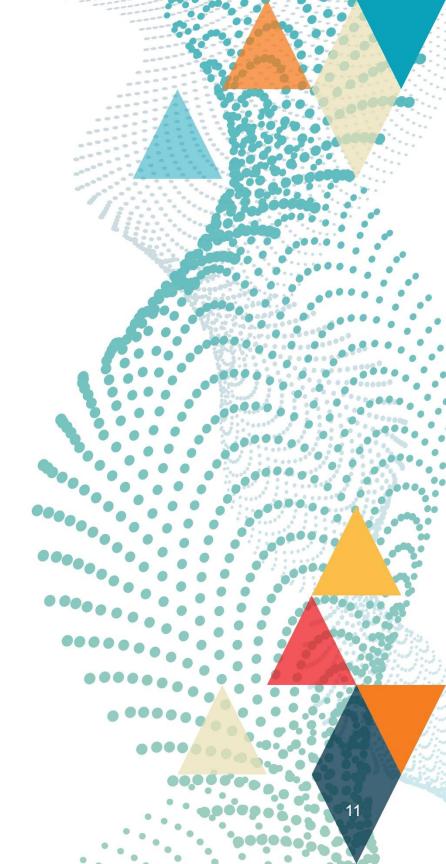






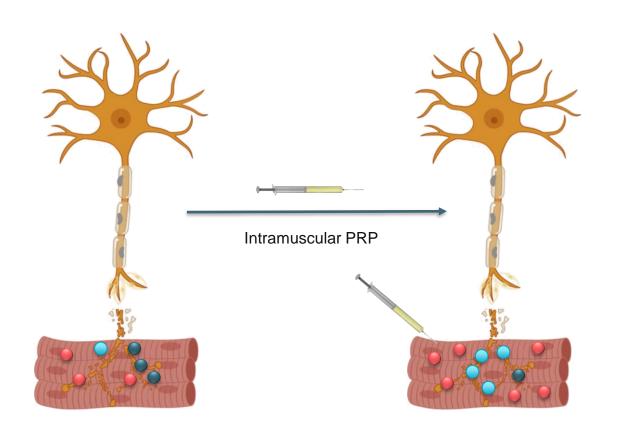


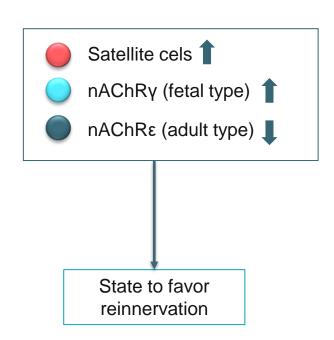




Conclusion

The findings suggest the importance of treating the denervated muscle as a consequence of injury to the nerve that innervates it, as well as the nerve itself. It could promote a faster and more effective reinnervation, enhancing and accelerating the process that would improve the patient's clinical outcomes.





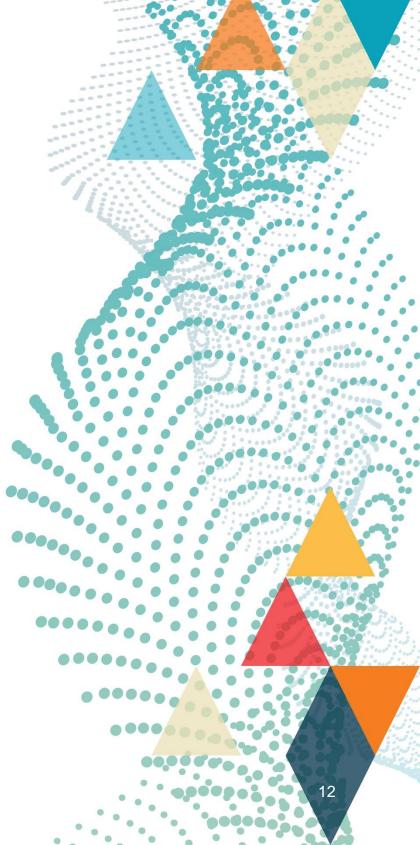












References

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- 4. Soldado F, et al. Effects of intramuscular administration of Platelet-Rich Plasma on denervated muscle after peripheral nerve injury. Connect Tissue Res. 2025 Jan;66(1):10-25.











