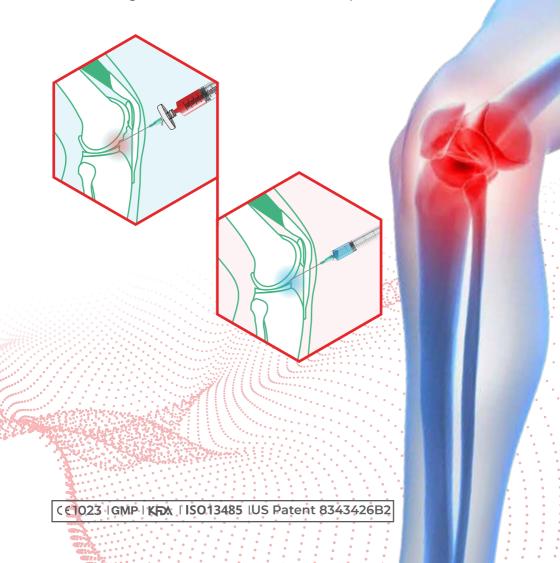


"Dual action system for enhanced regeneration and extended pain relief"





What is Osteoarthritis(OA)?

- Osteoarthritis (OA) is a progressive degenerative joint disease caused by cartilage breakdown.
- ✓ It is characterized by loss of cartilage, inflammation and joint dysfunction.

Patients with OA typically experience



Loss of joint flexibility



Chronic pain



Limited movement

Currently the available treatment options for OA include

Hyaluronic Acid (HA) injections



PRP Therapy



Joint Replacement





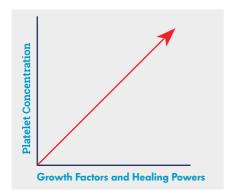
What is PRP Therapy?

- Platelet Rich Plasma (PRP) is defined as a safe, biocompatible, autologous biological product engineered from patients own's blood.
- ✓ PRP contains a cocktail of concentrated growth and healing factors, stem cells markers and bioactive proteins vital for tissue repair.

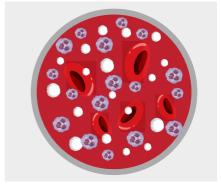


Why PRP?

PRP contains rich cocktail of platelets which act as the directors of healing cascade to stimulate new cell growth and tissue regeneration.



The more platelet concentration the more is the growth factors and healing power.



PRP Sample at least

3x the normal concentration
of platelets is a need for
PRP to be effective

PRP therapy uses injections to accelerate the healing of injured tendons, ligaments, muscles and joint using patient's own healing system.



What is Hyaluronic acid (HA)?

Hyaluronic acid, also called hyaluronate is a gel-like substance that is naturally present within the cartilage and synovial fluid in the joints.

It gives the joint fluid its viscous, slippery quality and helps in



Lubrication:

Acts as shock absorber to cushion and protect joints.



Reducing Inflammation:

reduces joint friction and pain due to tissue degeneration



Cartilage Growth:

promotes new cell growth and proliferation

HA injections are used to treat knee osteoarthritis and improve the functions of the knee joint. This treatment method is called viscosupplementation.



Studies Suggest

Hyaluronic Acid (HA)

- ✓ HA injections help reduce pain and inflammation in joints.
- ✓ HA injections provide enhanced biomechanical properties to the joints.
- ✓ HA lubricates and preserves the joint system.

LP: PRP

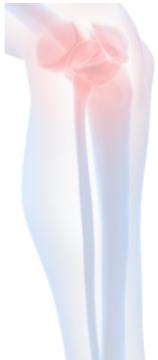
- ✓ LP: PRP injections devoid of white blood cells or Leucocyte Poor PRP have been reported to heal and regenerate cartilage tissue matrix without any excessive inflammation or swelling.
- ✓ Platelets from LP-PRP store more than 1500 active proteins that stimulate the healing of degenerating cartilage in the joints.

Recent Clinical Studies have established PRP and HA cocktail injections as a finer alternative treatment modality than PRP or HA alone for OA. For instance.

- Combinational HA+PRP injections is considered a more enhanced treatment approach for Grade III and IV knee osteoarthritis when joint replacement is not an option.
- ✓ Compared with PRP alone, Intra-articular (IA) injections of HA+PRP can improve the joint function and pain scores.
- ✓ HA facilitates elevated release of various growth factors such as TGF-β1 and PDGF-AA from PRP.
- ✓ HA+PRP have shown reduced levels of pro-inflammatory cytokines and increased chondrocytes proliferation and differentiation.



What is **(PhyloPReP**[™]?





HyloPReP™ is a "first-of-its-kind" combination therapy integrating Leukocyte Poor-PRP (LP-PRP) and Hyaluronic Acid (HA) for targeted OA repair.

*Hylo*PReP™ injection can be used to treat osteoarthritis of the knee, ankle, hip and shoulder joint.

Knee Joint	Ankle Joint	Hip Joint	Shoulder Joint
			A de



How does it work?

- → HyloPReP™ works in synergism to double your results and reduce your doctor visits to once a year.
- Injecting HA + LP-PRP fill and lubricate the joint space as well as promote growth of new cells and tissue without excessive pain or inflammation.



What makes *Hylo*PReP™ unique?

Dual action system for enhanced regeneration and extended pain relief



Based On Synergistic Lubricative Regenerative Technology



Effective Lubricates and Preserves Joint System



Versatile One-Step Holistic Approach for OA repair



References:

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- 4. Russo, Fabrizio, et al. PloS one 11.6 (2016): e0157048.
- 5. Simental-Mendía, Mario, et al. Archives of orthopaedic and trauma surgery 136.12 (2016): 1723-1732.

OUR OTHER PRODUCTS:









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