



PROLOTHERAPY OF THE KNEE, HIP, SHOULDER AND LOW BACK

SIRACUSA, ITALY

Dr. Stephen Cavallino, M.D.

DEFINITION OF PROLOTHERAPY

Prolotherapy is a natural injection treatment that involves the injection of glucose into the weakened and unstable components of the musculoskeletal system.

Prolotherapy facilitates the regeneration of ligaments and tendons.

Maintaining healthy, robust ligaments and tendons are essential for optimal joint function.

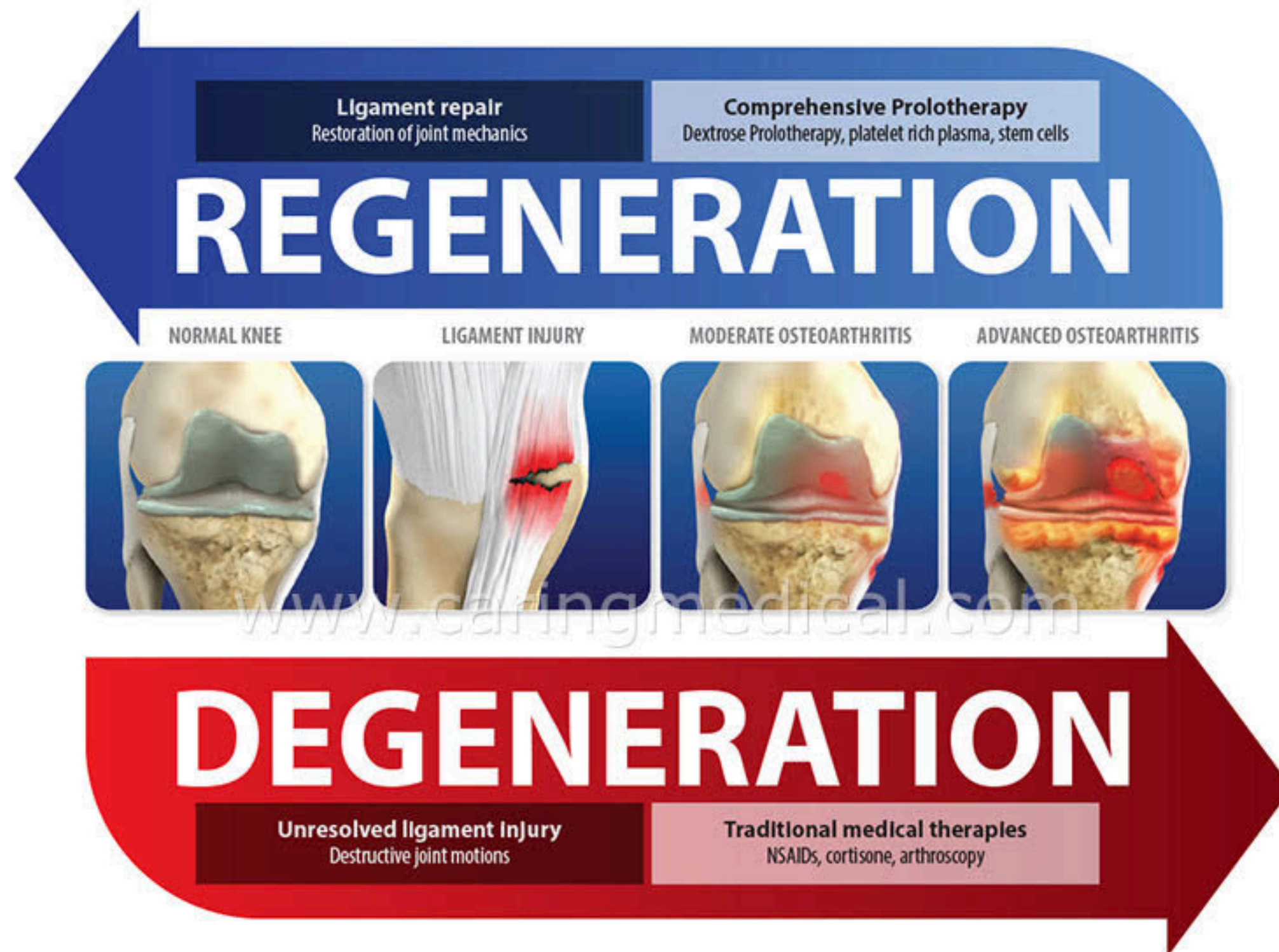
DEFINITION OF PROLOTHERAPY

Prolotherapy inhibits degenerative processes and, as a result, stimulates regenerative processes.

Prolotherapy establishes a functional joint equilibrium and a substantial decrease in the cause of pain.

DEFINITION OF PROLOTHERAPY

Degenerative vs. Regenerative cascade. Traditional treatments intensify the degenerative cascade whereas Prolotherapy restores joint physiology and biomechanics.



THE PROLOTHERAPY

Today's class will concentrate on the role of injection therapy in assisting physicians with the management of chronic pain and musculoskeletal disorders.

THE PROLOTHERAPY

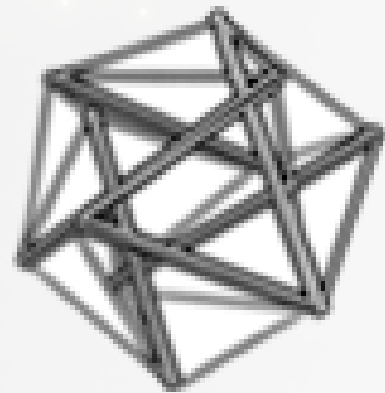
WHAT IS PROLOTHERAPY?

It is an injectable therapy that employs a natural solution (glucose) to alleviate the cause of chronic musculoskeletal pain by promoting the formation of new connective tissues.

BIOTENSEGRITY

BIOTENSEGRITY OF THE MUSCULOSKELETAL SYSTEM

BIOTENSEGRITY



TENSEGRITY
IN BIOLOGY



Dr. Stephen M. Levin, M.D.

BIOTENSEGRITY

DOCTORS POSSESSING EXPERTISE IN THE «BIO-TENSEGRITY» OFFERS A DISTINCT ADVANTAGE IN PAIN MANAGEMENT

DOES
BIOTENSEGRITY
REPRESENT A
PARADIGM SHIFT
IN OUR
UNDERSTANDING
OF ANATOMY?



BIOTENSEGRITY

WHAT IS BIOTENSEGRITY?

Dr. Levin, a highly experienced physician in the field of tensegrity, states:

"OUR BODIES ARE FULL OF BIO-TENSEGRITY, AND IT IS IMPERATIVE THAT WE COMPREHEND THIS CONCEPT."

WHAT KEEPS THE HUMAN BODY INTEGRATED?

Ligaments, tendons, fascia, and various other connective tissues.

If any of these tissues deteriorate or lose functionality, it results in unbalanced musculoskeletal tension, which can be a primary source of pain.

BIOTENSEGRITY

Let us examine an ancient bridge and observe the configuration of its tension structures.



THESE STRUCTURES ARE FRAGILE AND UNSTABLE.

BIOTENSEGRITY

Let us now examine a new bridge.



THE TENSILE STRUCTURES EXHIBIT REMARKABLE ROBUSTNESS AND STABILITY.

BIOTENSEGRITY AND PROLOTHERAPY

We now recognize that **connective tissues** in the human body serve as crucial biomechanical structures for sustaining biotensegrity balance.

IF THESE STRUCTURES WEAKEN AND BECOME LESS FUNCTIONAL, THE BODY ENCOUNTERS A PROBLEM THAT REQUIRES A SOLUTION.

A remarkable regenerative therapy emerged in the United States 70 years ago, known as:

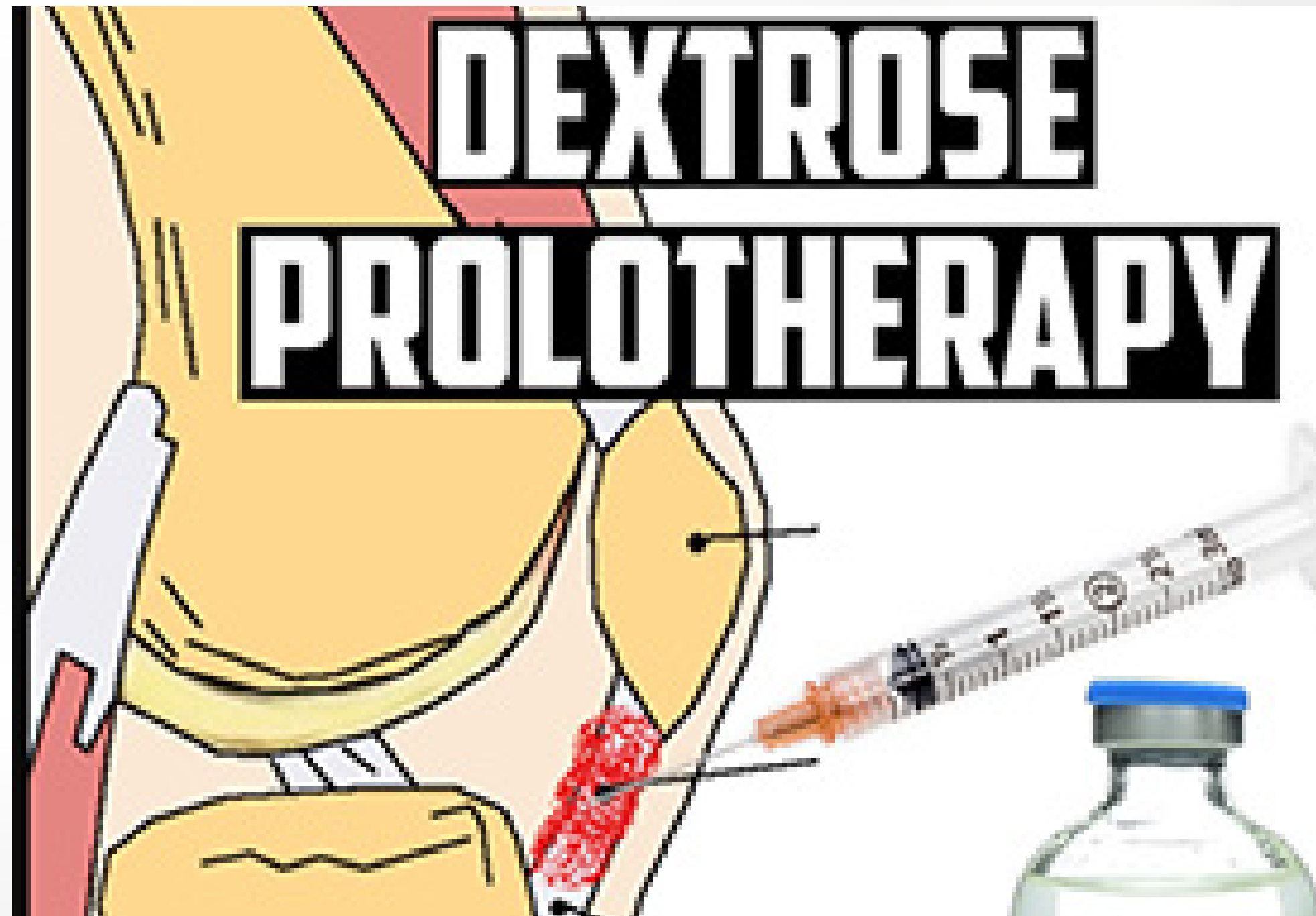
PROLOTHERAPY

WHAT IS PROLOTHERAPY?

Prolotherapy is a natural injection treatment that involves the injection of glucose into the weakened and unstable components of the musculoskeletal system.

Prolotherapy facilitates the regeneration of ligaments and tendons.

Maintaining healthy, robust ligaments and tendons are essential for optimal joint function.





CLINICAL INDICATIONS

MSK PATHOLOGIES THAT NEED PROLOTHERAPY

Let us now examine several examples of pathologies for which prolotherapy is indicated.

CLINICAL INDICATIONS FOR PROLOTHERAPY

ARTHRITIS

ROTATOR CUFF TENDINOPATHY

ALL FORMS OF CHRONIC TENDINOPATHY

ALL PARTIAL LIGAMENT INJURIES

LATERAL AND MEDIAL EPICONDYLITIS OF THE ELBOW.

SPINAL DISCOMFORT (LUMBAR, THORACIC, CERVICAL)

MORTON'S NEUROMA AND METATARSALGIA

TRIGEMINAL NEURALGIA

NUMEROUS ADDITIONAL MUSCULOSKELETAL INSTABILITIES

CLINICAL INDICATIONS FOR PROLOTHERAPY

SPORTS AND NON-SPORT INJURIES
TRAUMA AND SPRAINS OF THE MSK
HEADACHES AND MIGRAINE
WHIPLASH INJURY
CERVICAL TRAUMA
SCARS AND ADHESIONS
CMC ARTHRITIS



LIGAMENTOUS PATHOLOGIES

PROLOTHERAPY IS A NON-INVASIVE ORTHOPEDIC INJECTION TREATMENT

The human body is RICH with ligaments.

Without ligaments, joints cannot function; thus, if the ligaments of any joint are weak (laxity), a functional joint pathology known as "joint instability" arises.

Joint instability can lead to degenerative symptoms, including pain, functional impairment, and the onset of osteoarthritis.



Hyperextended Knee

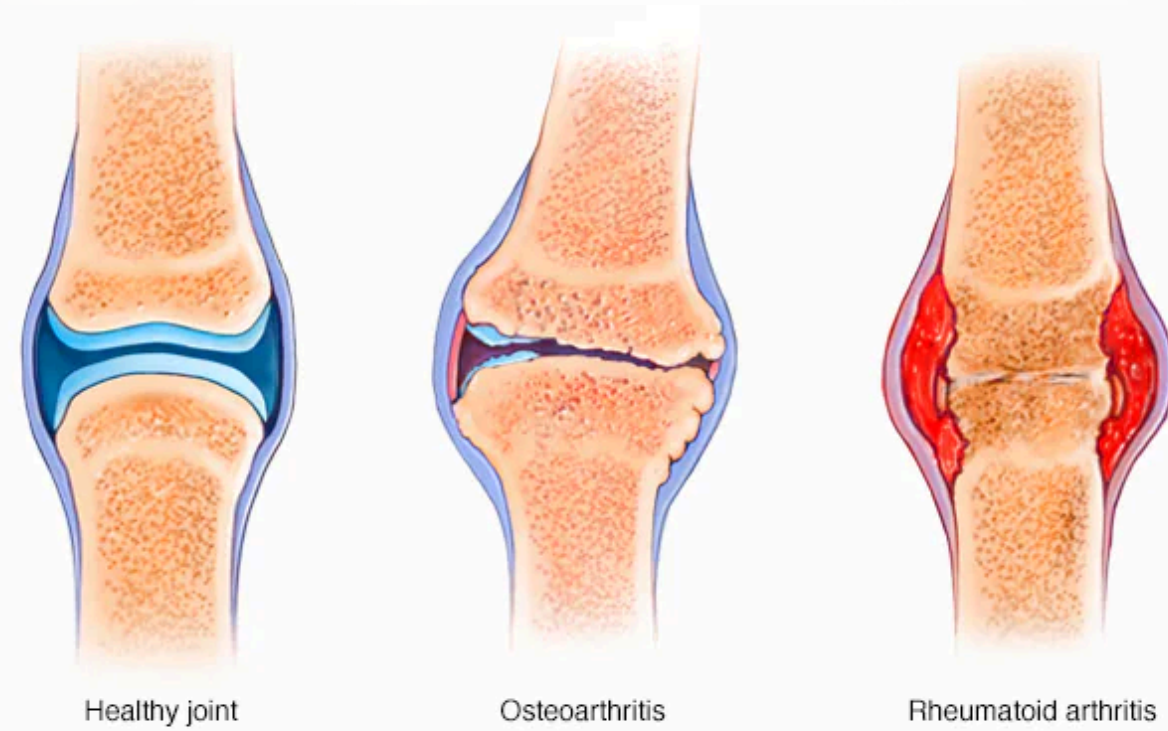


ANKLE LIGAMENT DAMAGE

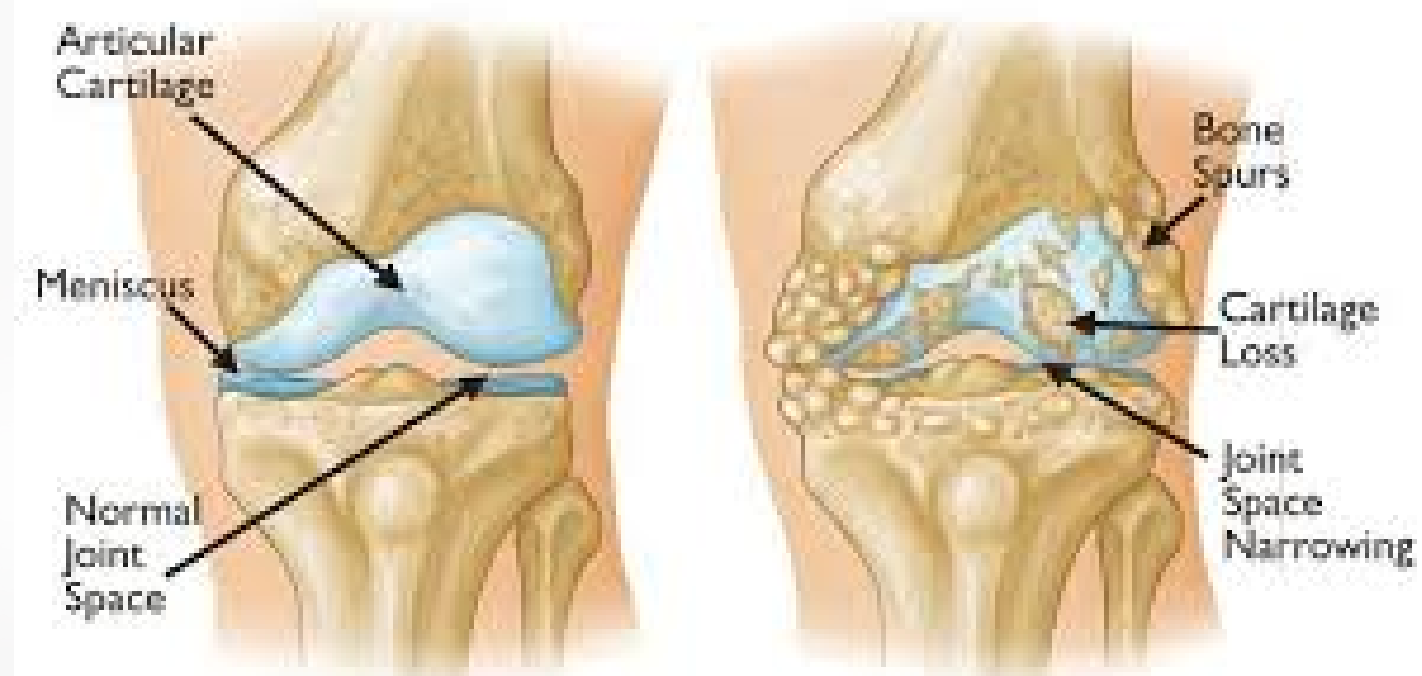


ARTHRITIS

Prolotherapy is highly effective for various types of degeneration.

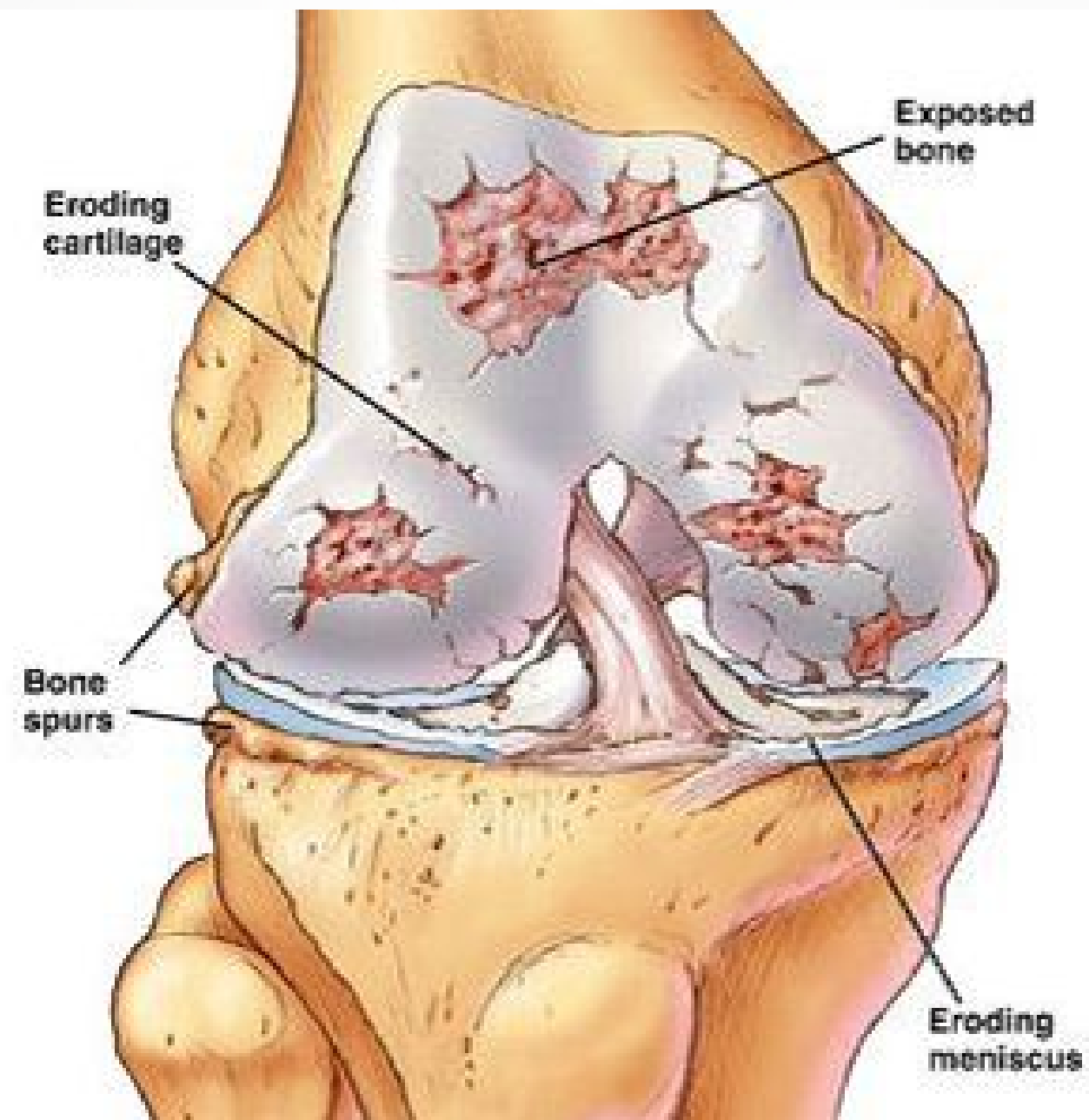


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KNEE DISORDERS

KNEE OSTEOARTHRITIS



KNEE DISORDERS

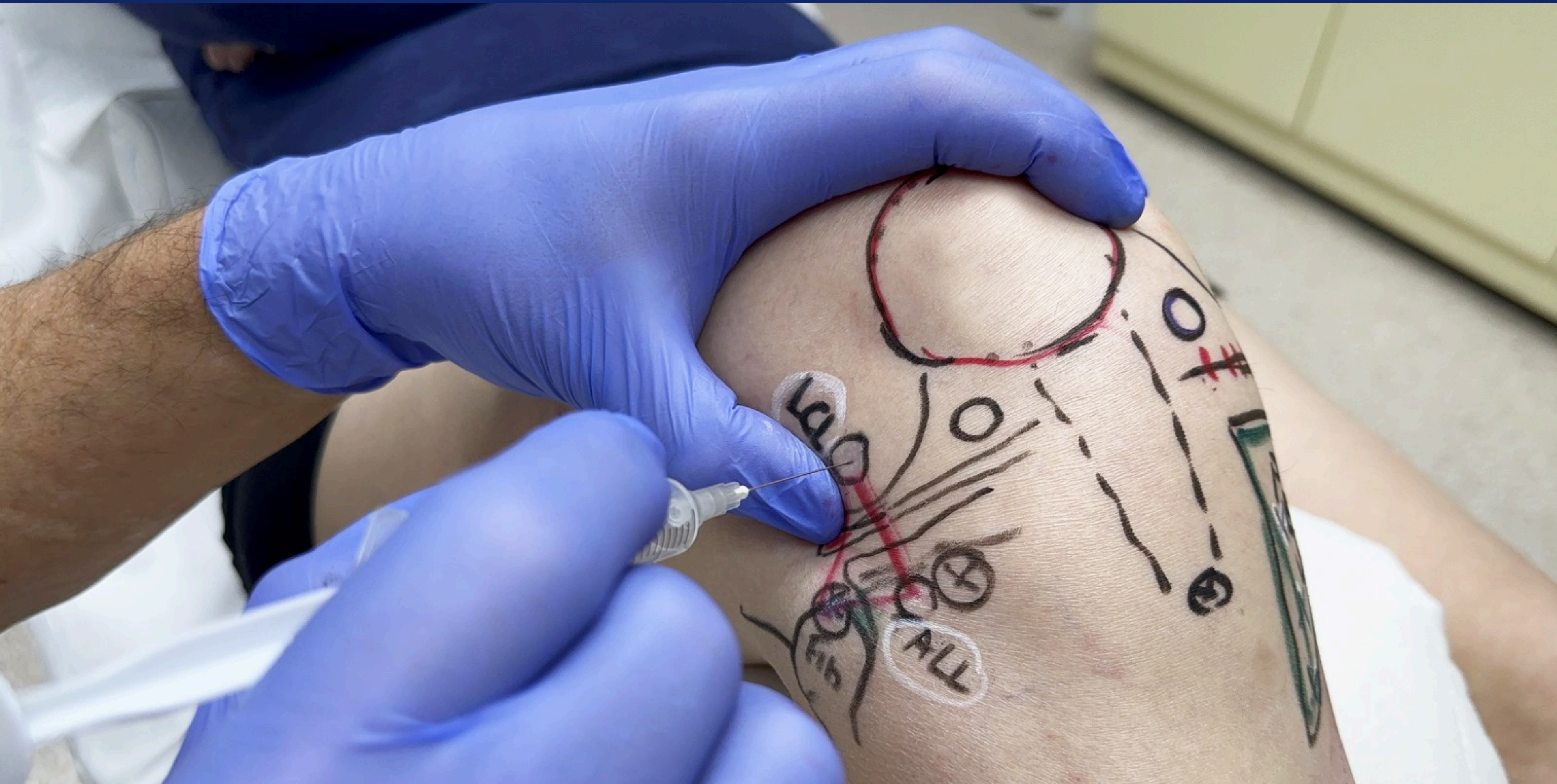
KNEE OSTEOARTHRITIS

The knee joint is the most frequently treated with Prolotherapy.

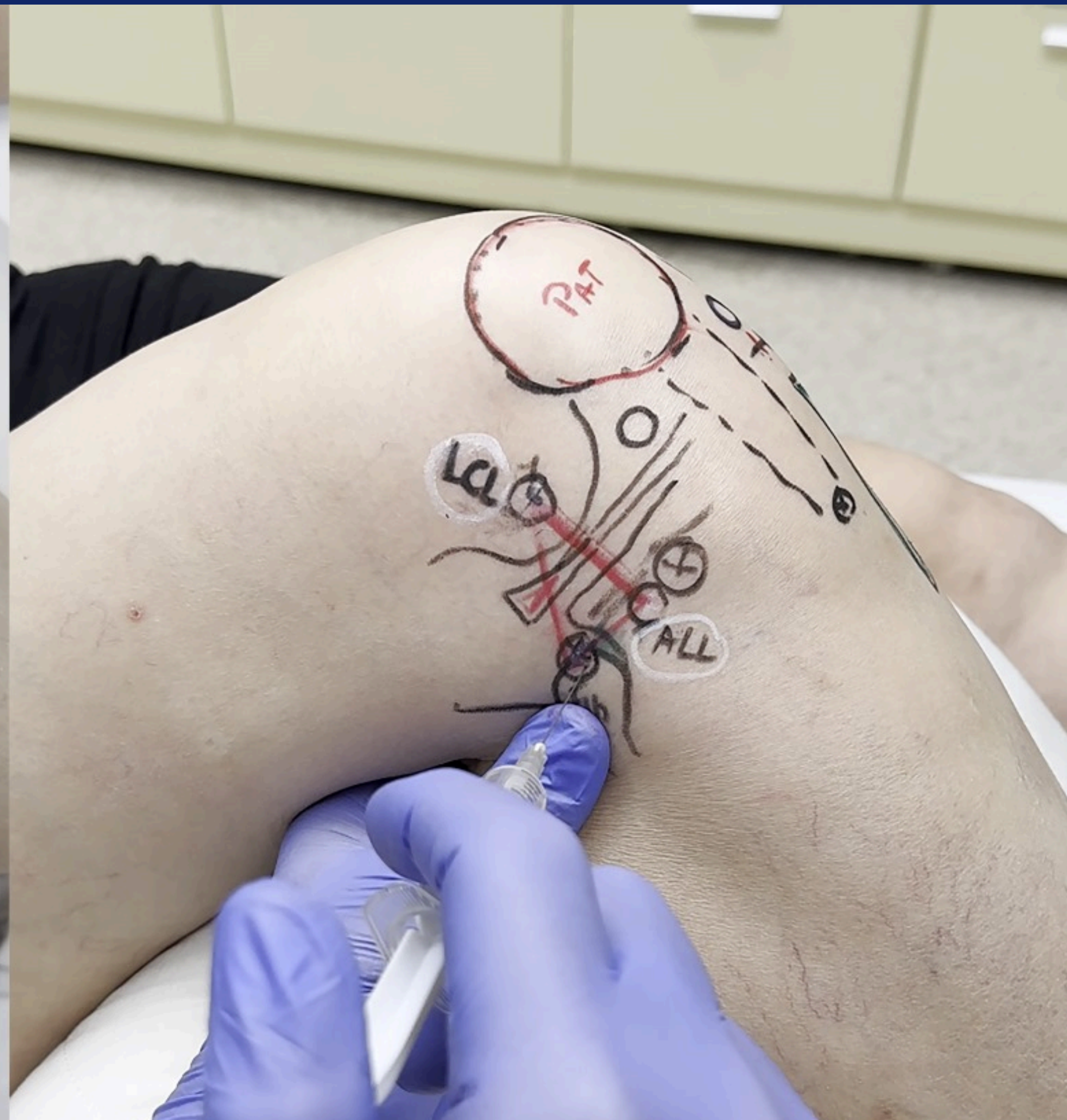
Prolotherapy has demonstrated efficacy in treating various knee pathologies, as evidenced by numerous scientific publications.

It can thus be asserted with confidence that the knee is a joint that responds exceptionally well to Prolotherapy treatments.

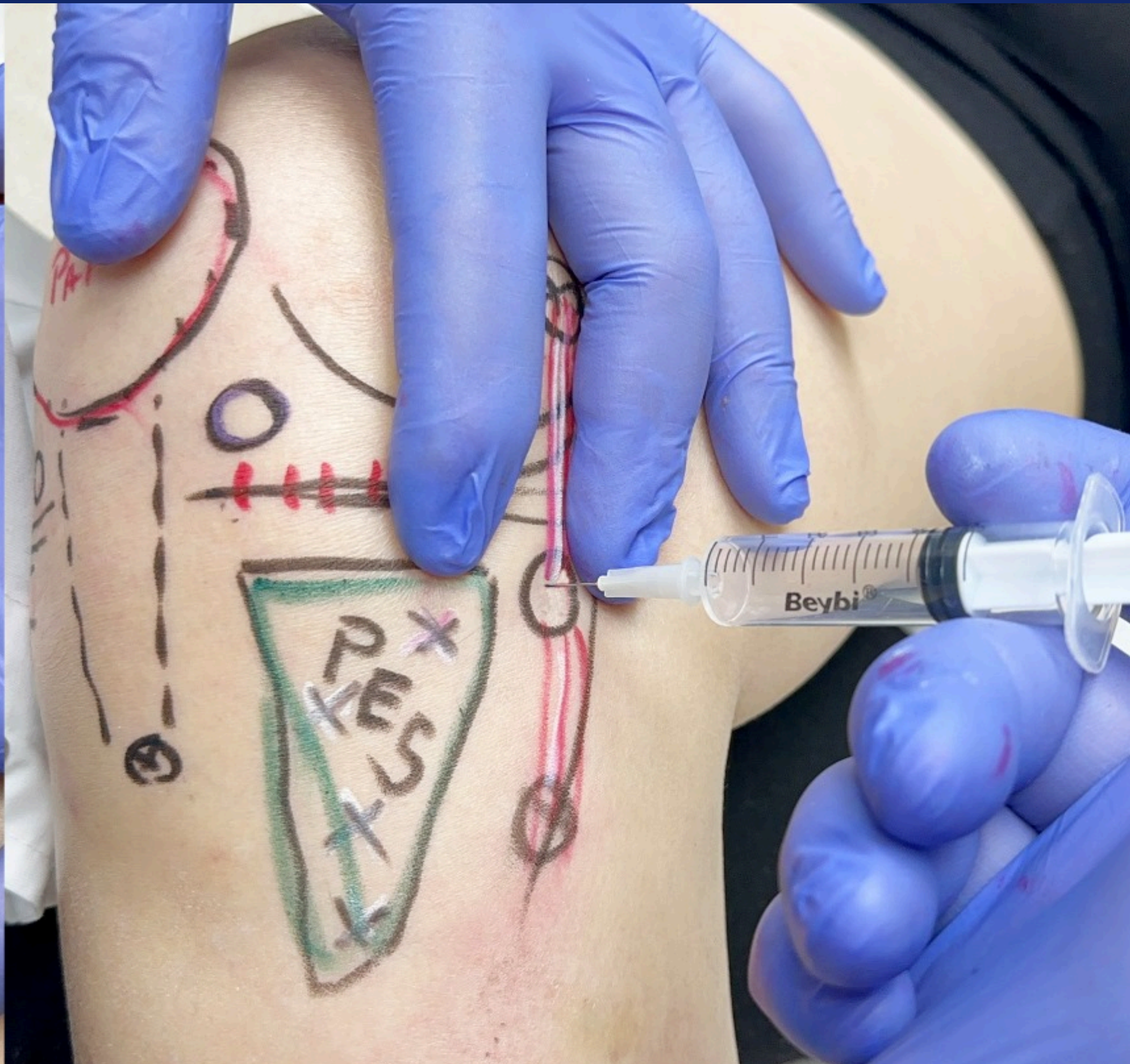
PROLOTHERAPY KNEE TREATMENT



PROLOTHERAPY KNEE TREATMENT



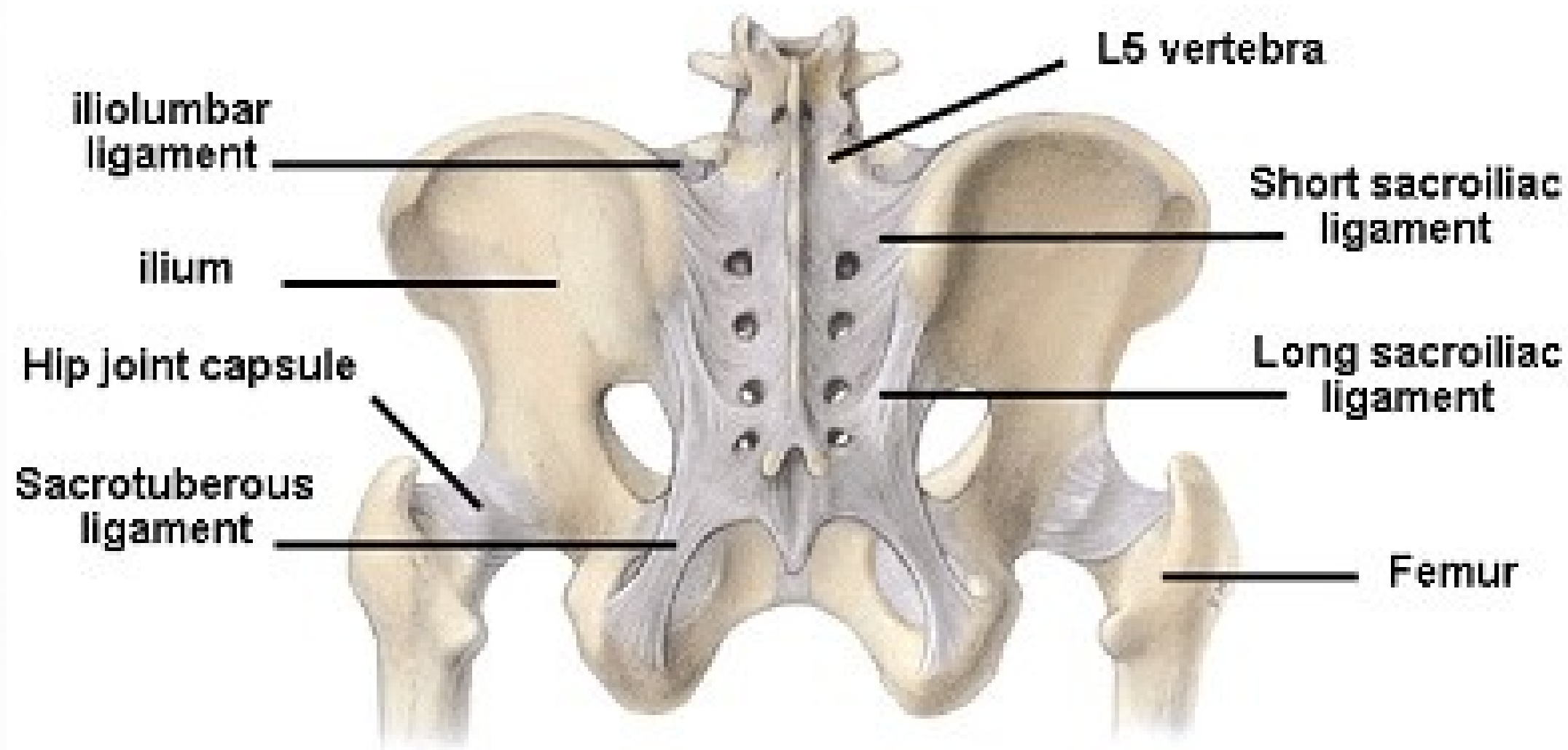
PROLOTHERAPY KNEE TREATMENT



LUMBAR DISORDER

Lumbosacral Prolotherapy is highly effective for patients suffering from disc disease or spinal pathology.

Seven out of ten patients undergoing Prolotherapy for back pain report substantial improvement. This is because the sacroiliac region is **RICH in ligaments, which Prolotherapy effectively regenerates.**

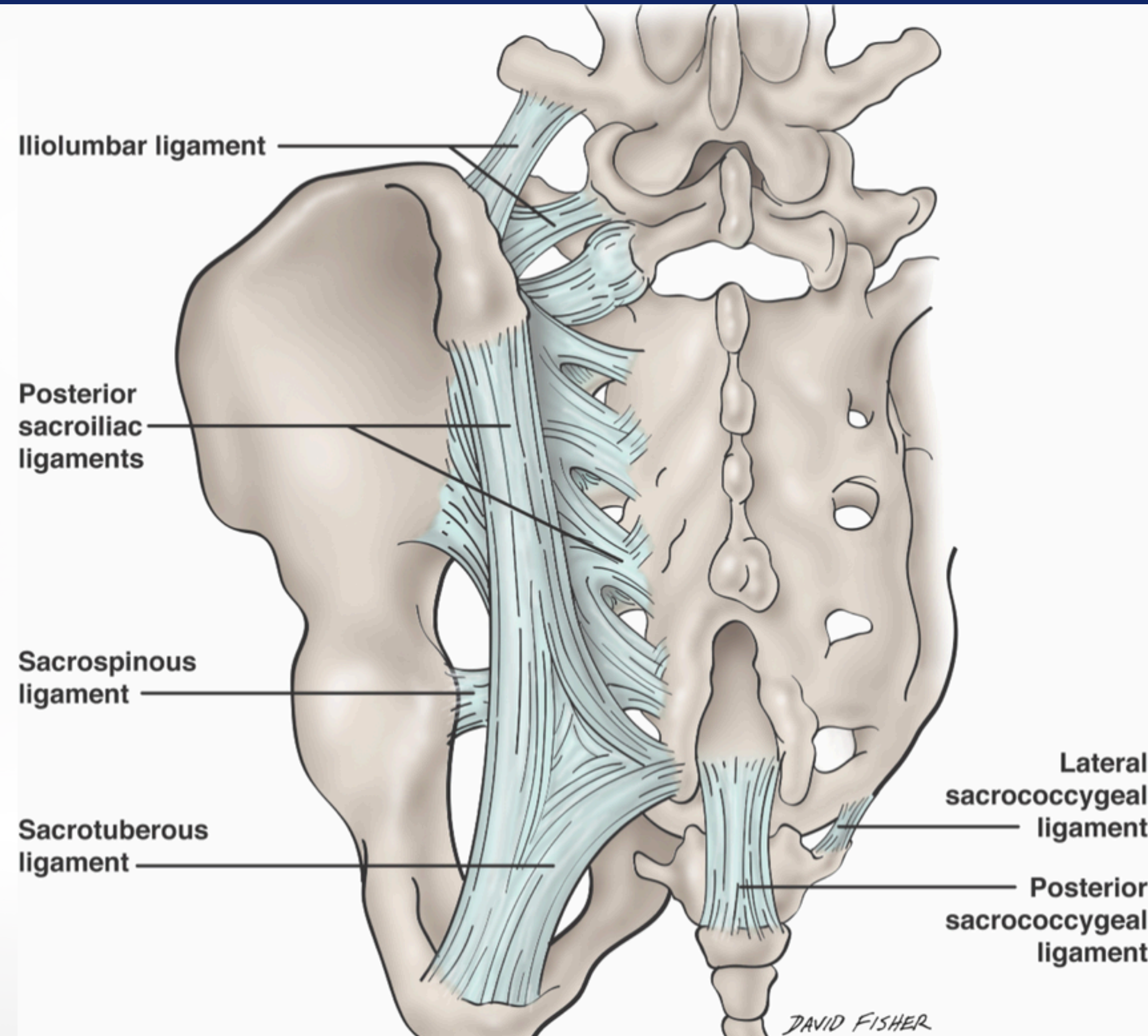
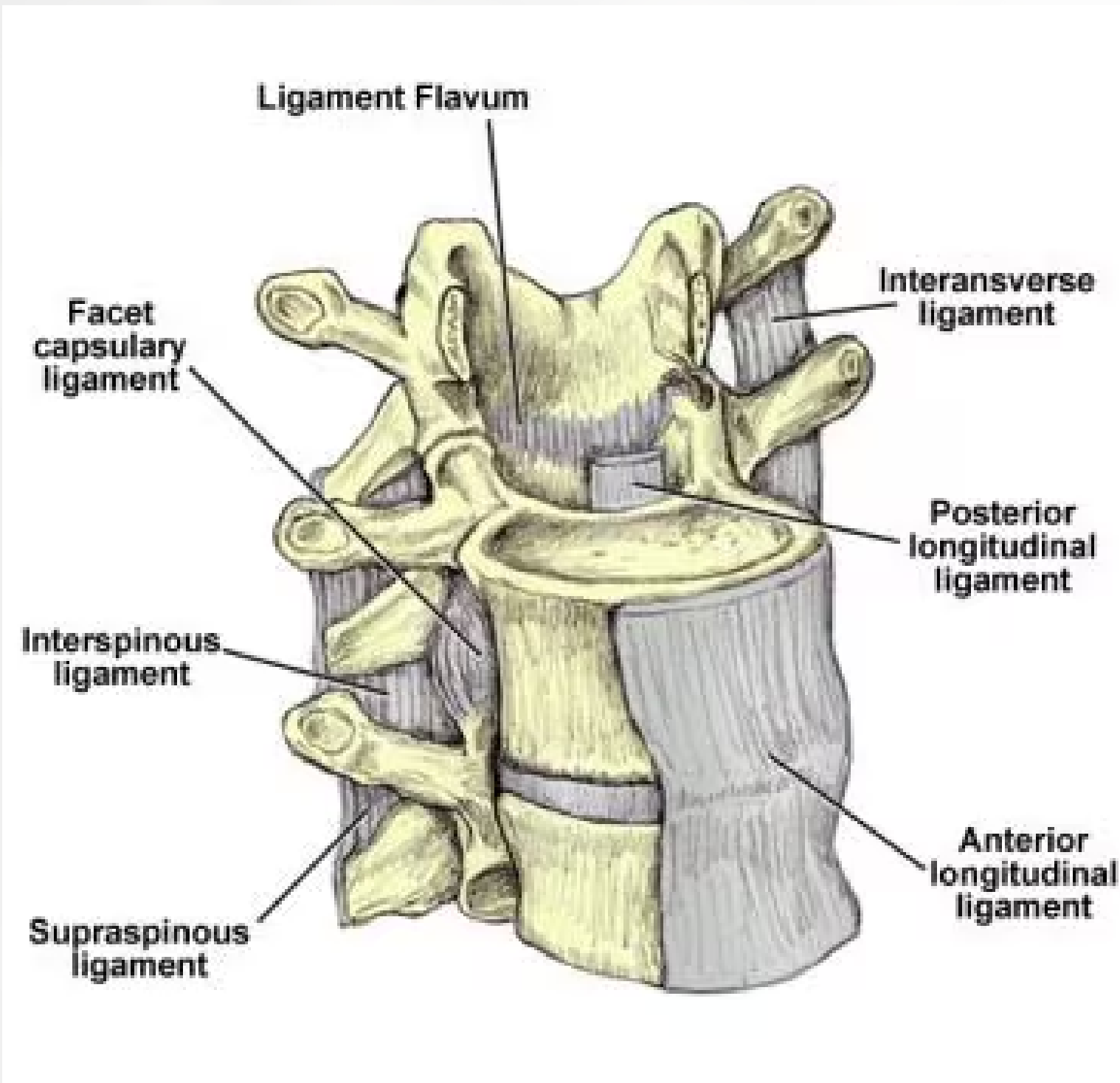


Traditional therapies frequently underestimate back pain due to insufficient understanding of ligament pathologies.

LUMBAR PROLOTHERAPY INJECTIONS

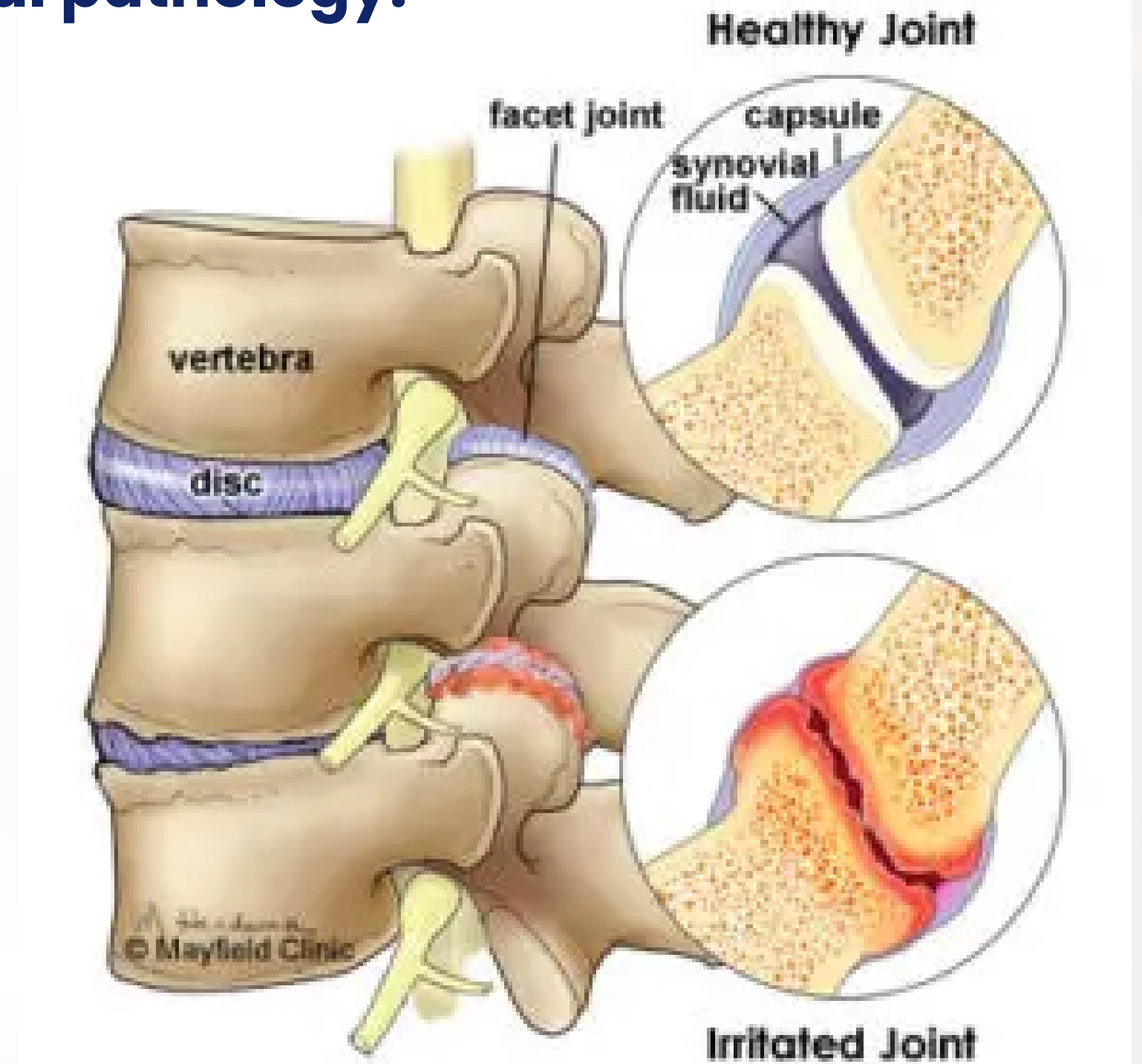
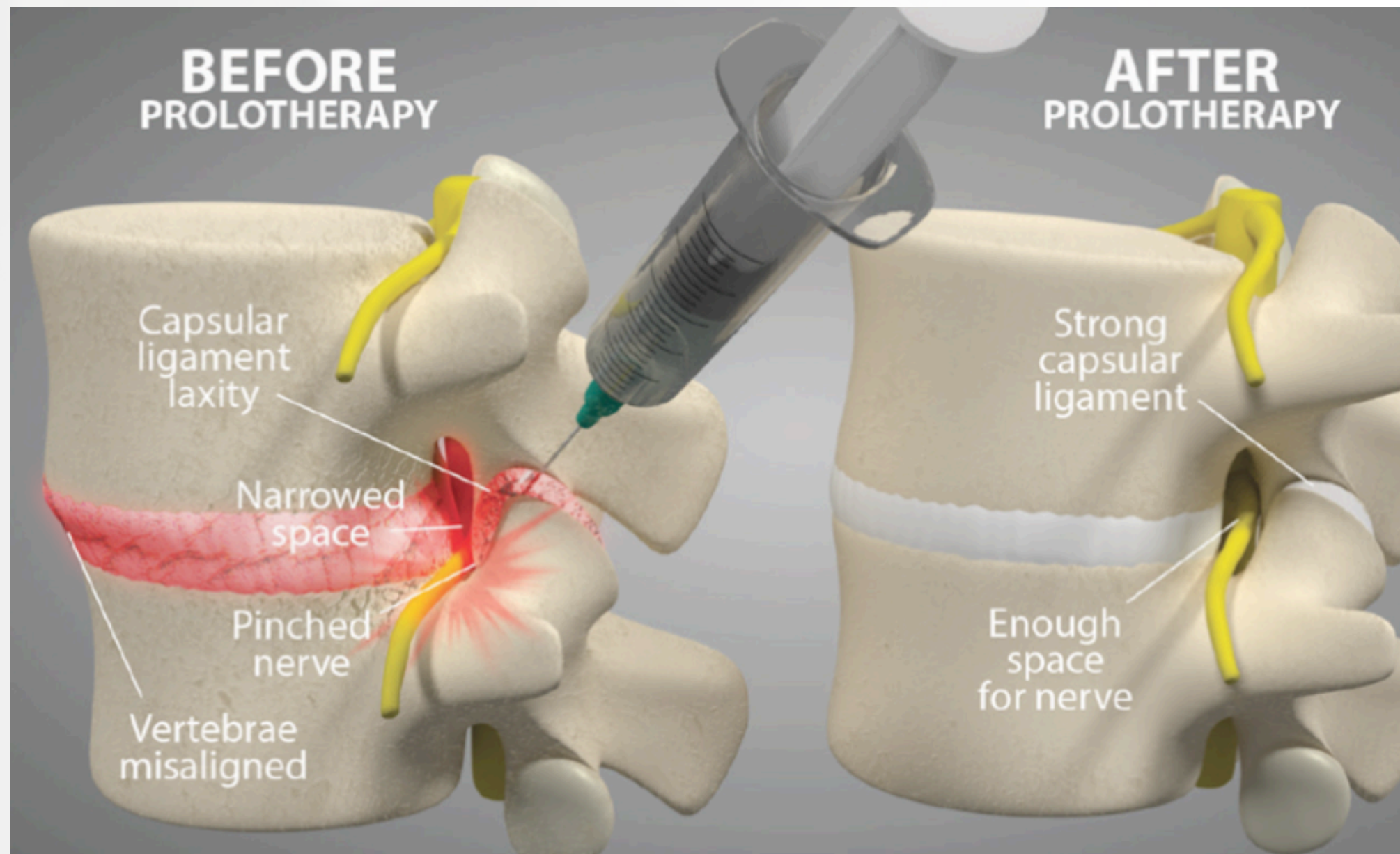


LUMBAR DISORDER



BEFORE AND AFTER PROLOTHERAPY

Lumbar **FACET CAPSULE** Prolotherapy is highly effective for patients suffering from disc disease or spinal pathology.



PROLOTHERAPY SHOULDER TREATMENT

Coracoacromial
Ligaments

Coracoclavicular
Ligaments

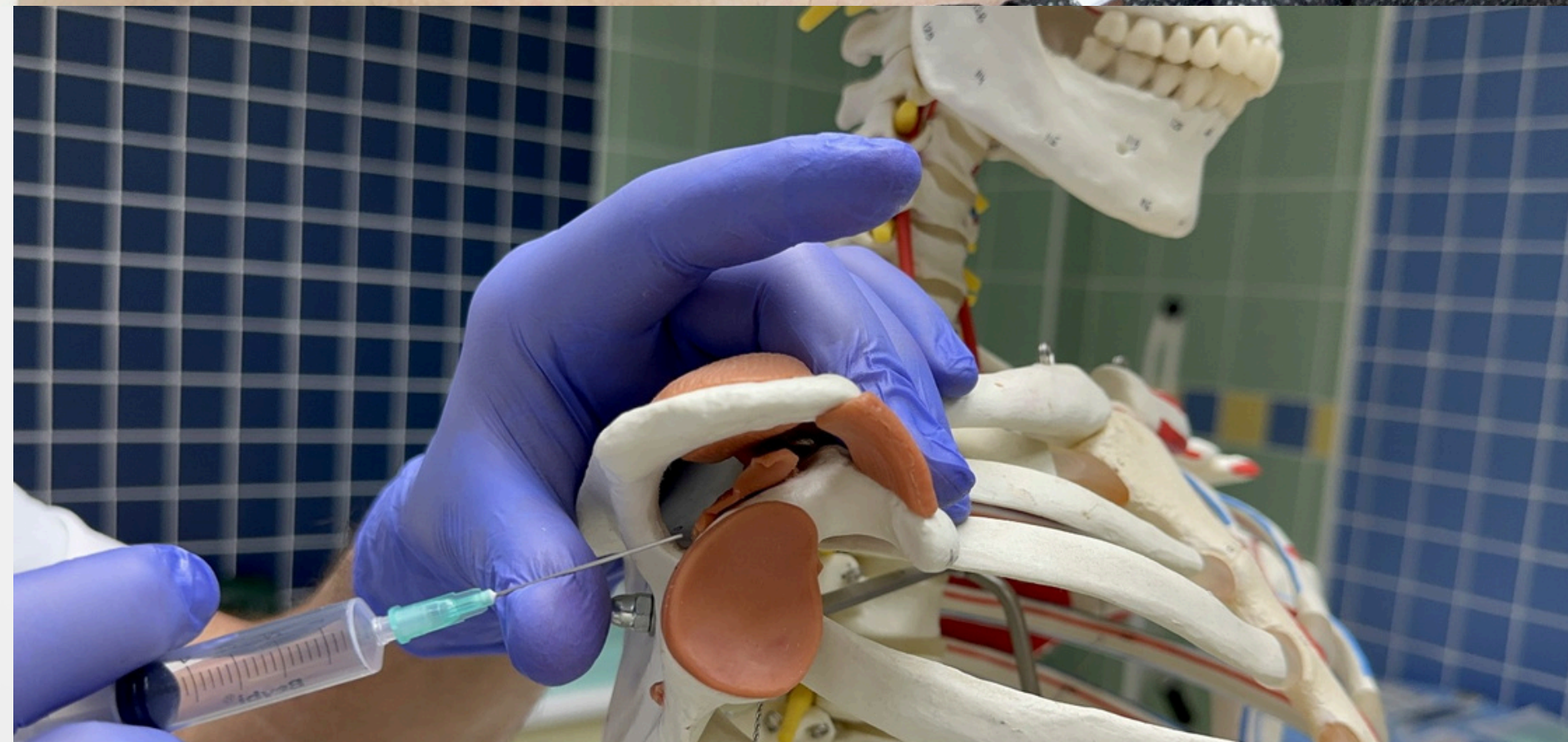
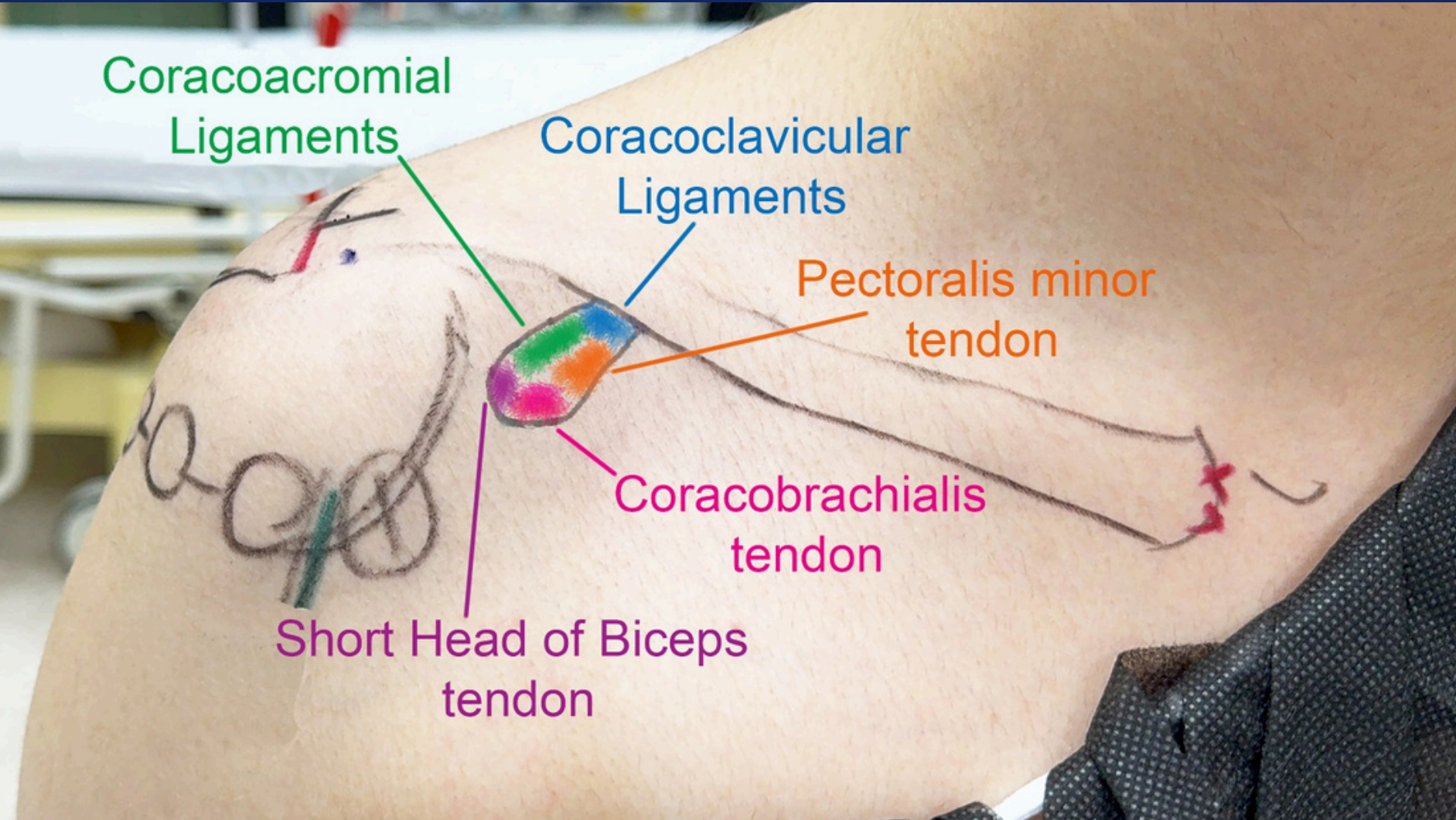
Pectoralis minor
tendon

Coracobrachialis
tendon

Short Head of Biceps
tendon

Inferiore Glenohumeral
Ligament

Prolotherapy
Works



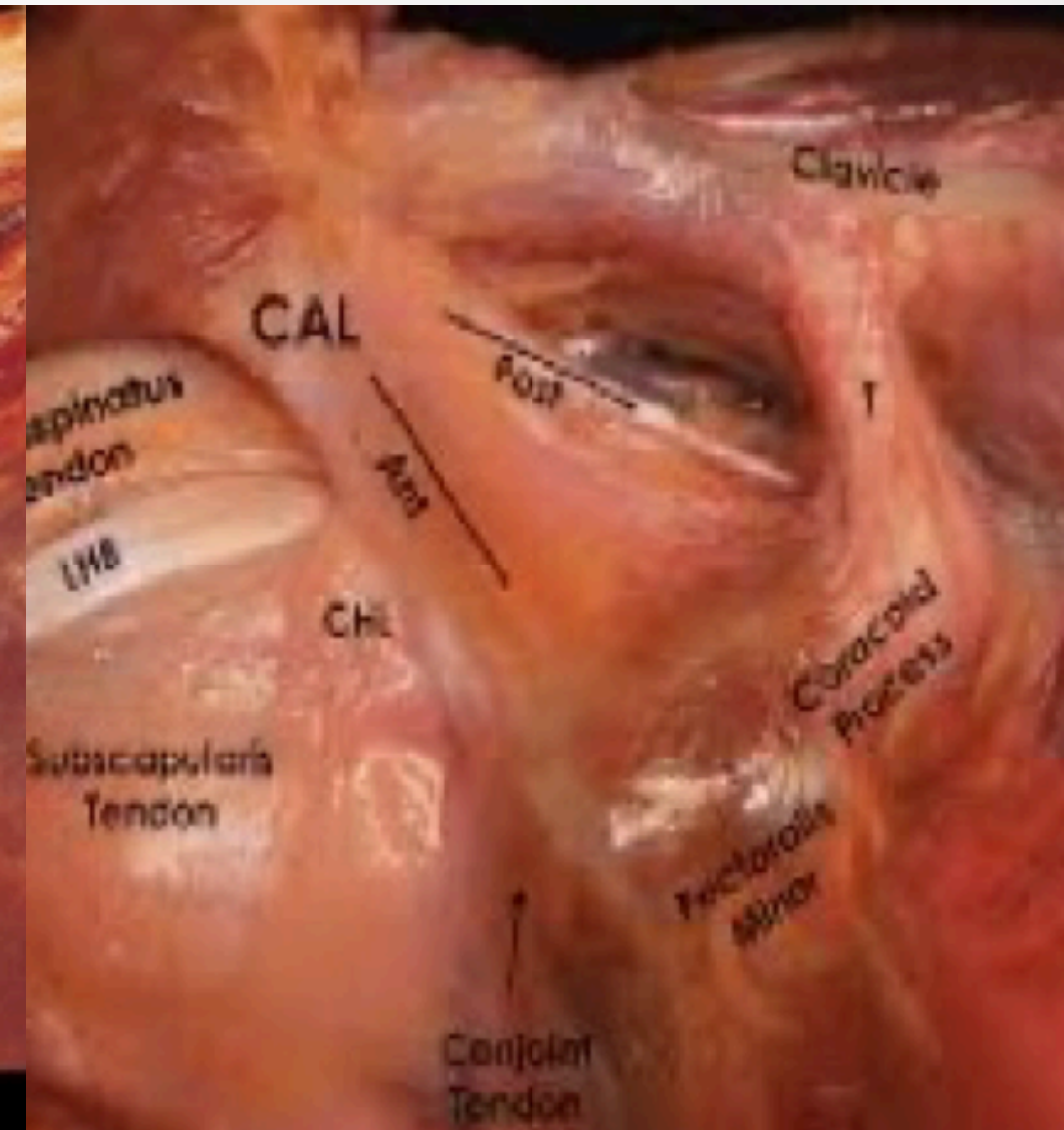
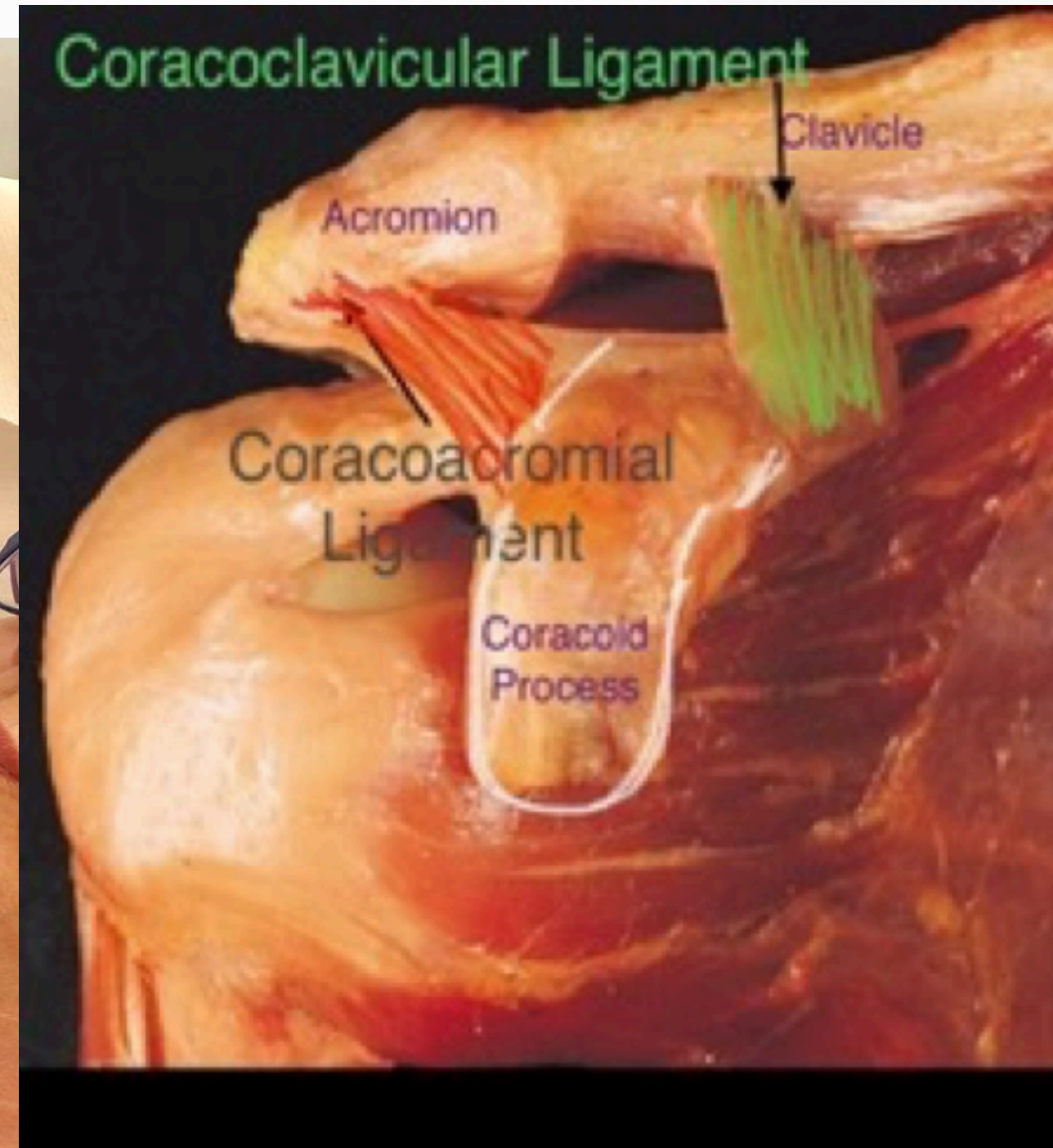
PROLOTHERAPY SHOULDER TREATMENT

GREATER TUBEROSITY SUPRASPINATUS TENDON

ALWAYS INJECTING
PERPENDICULAR
TO BONE

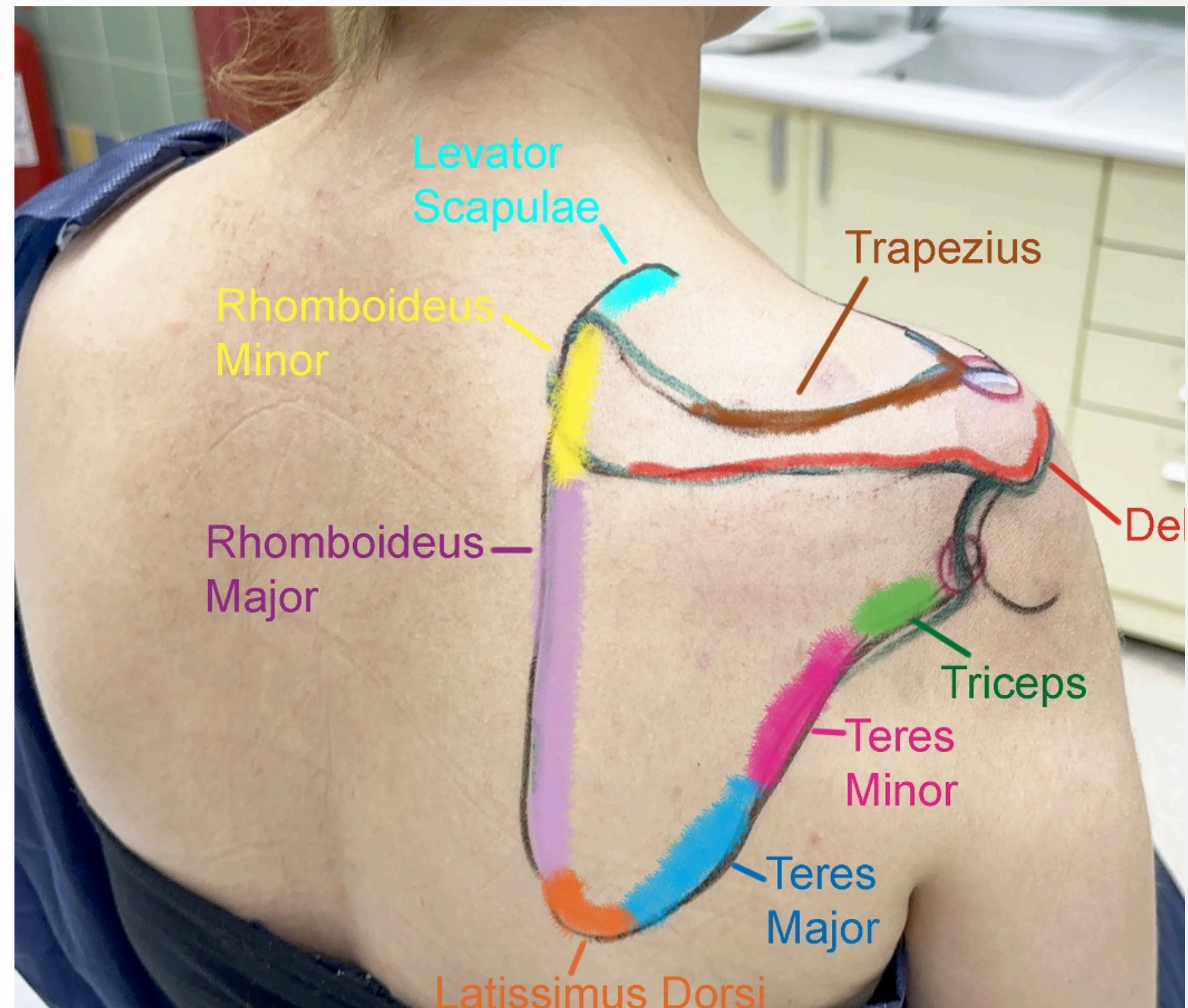
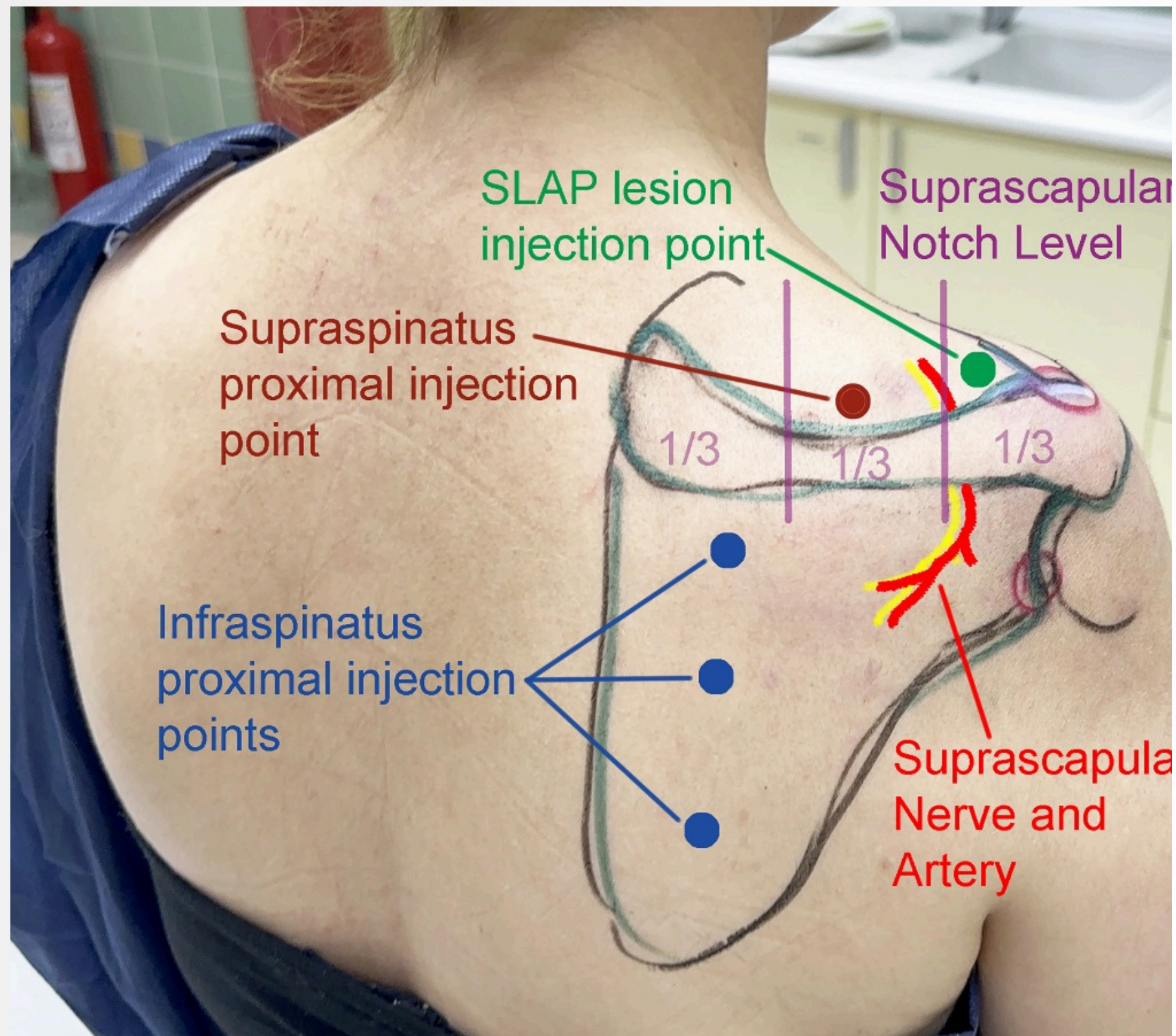
ALWAYS NOTE YOUR NON
INJECTING HAND!

Anterior Shoulder
Rotor Cuff Prolotherapy

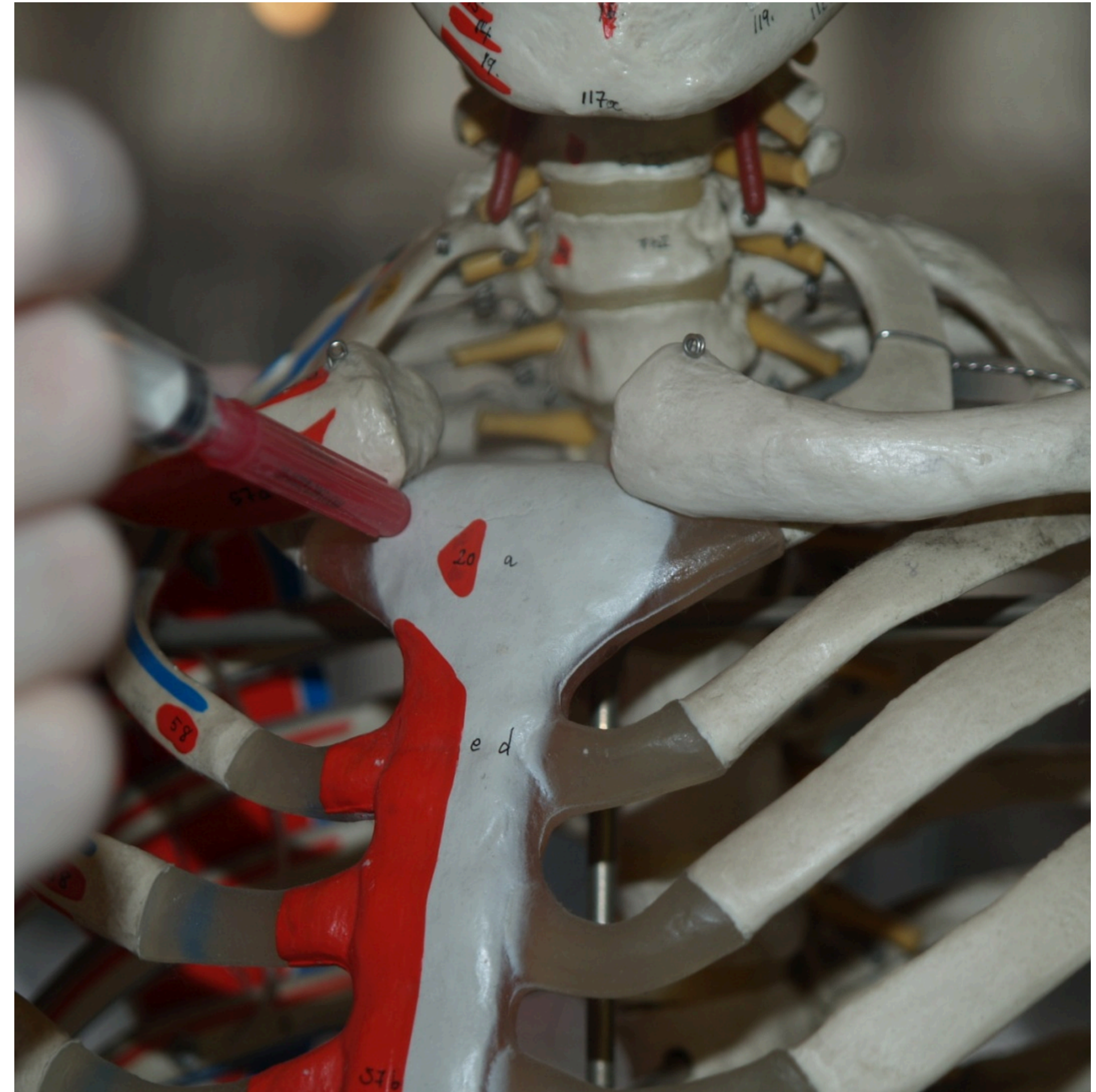
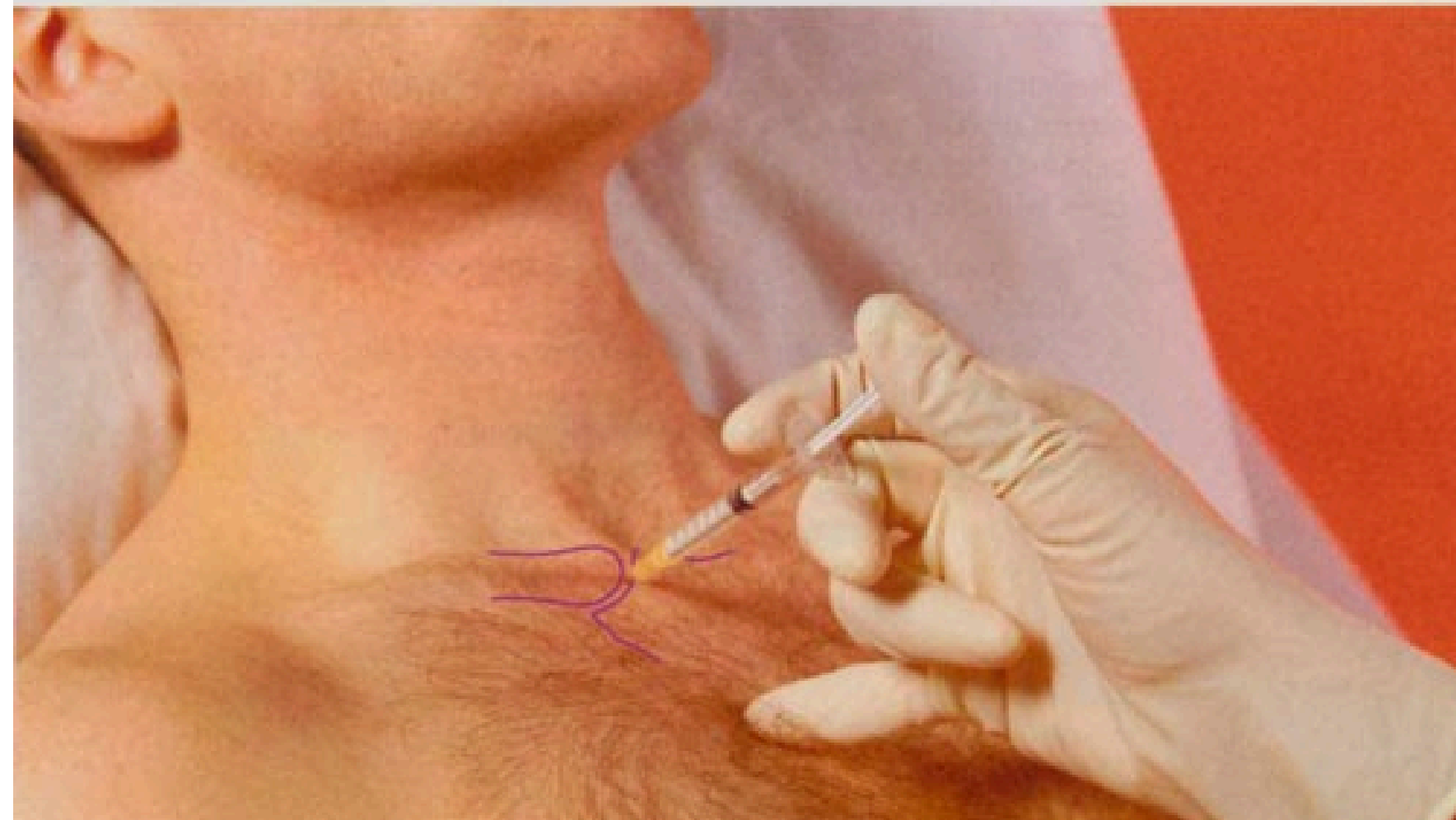
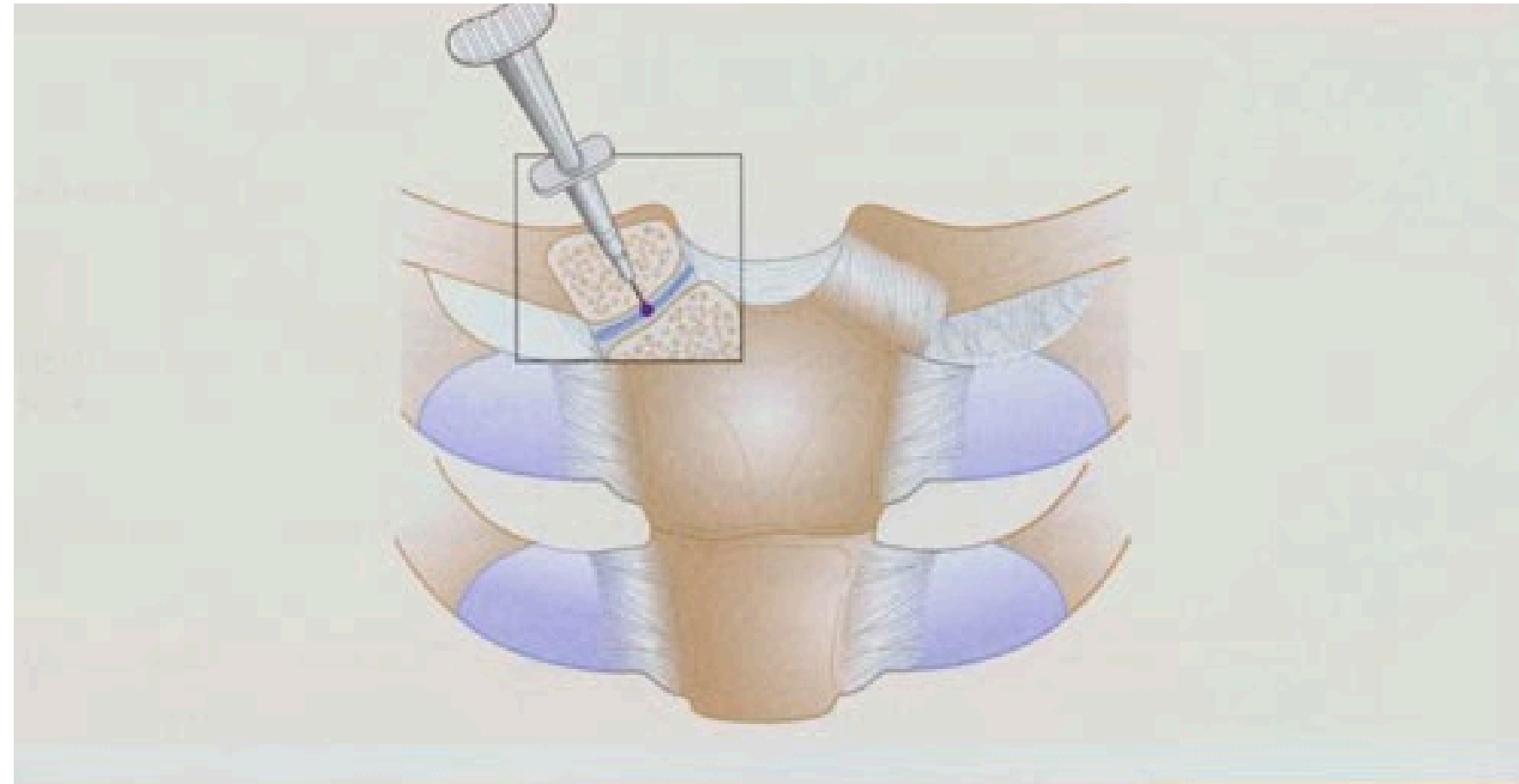


**ROTATOR CUFF PROLOTHERAPY IS A GAME
CHANGER ONCE YOU HAVE REGENERATED
WITH GLUCOSE AT 15% THE LIGAMENTS
OF THE SHOULDER**

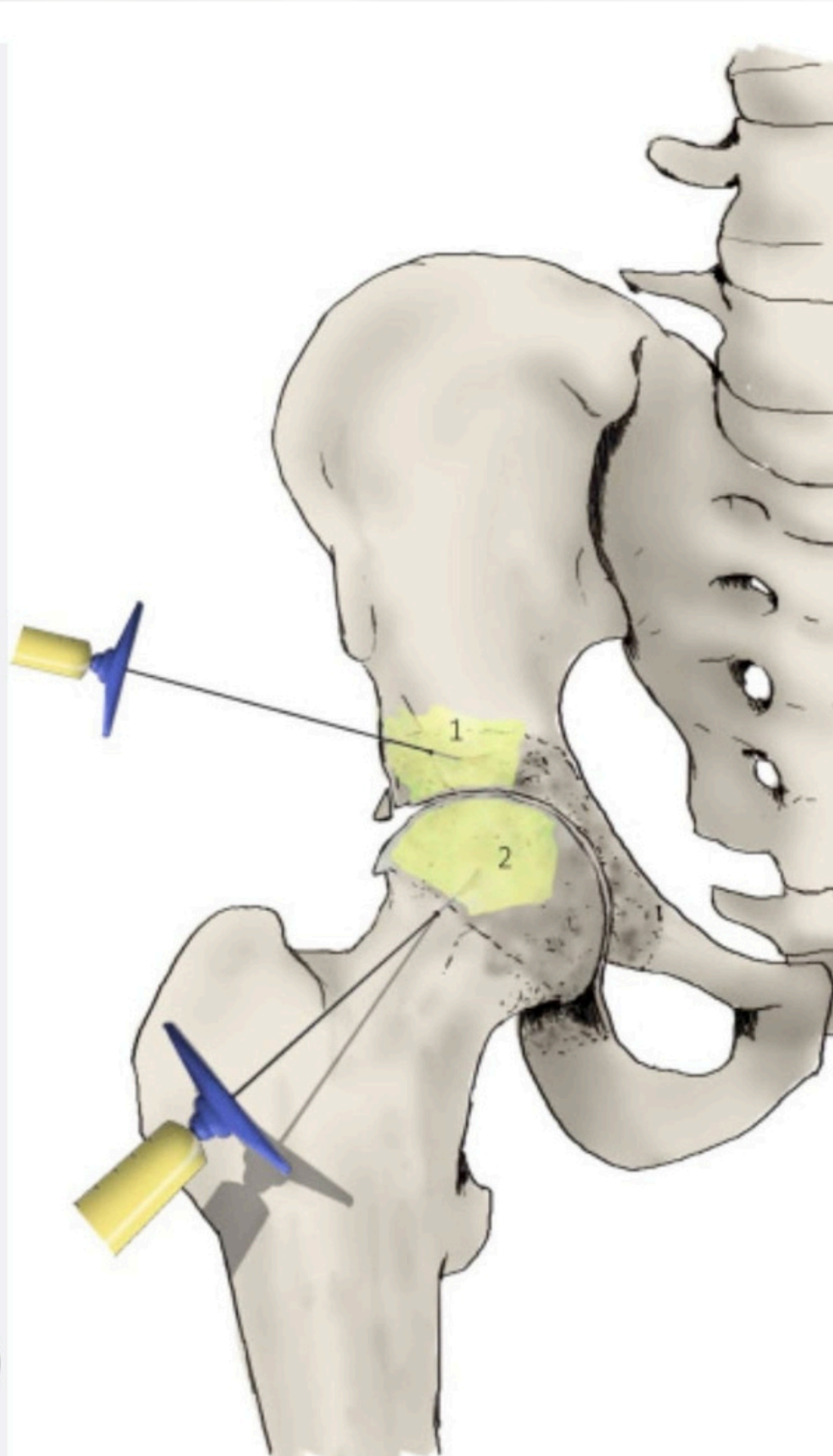
PROLOTHERAPY SHOULDER TREATMENT



PROLOTHERAPY STERNOCLAVICULAR JOINT INJECTION



PROLOTHERAPY HIP JOINT TREATMENT



FICAT CLASSIFICATION

1
Pre-radiographic



XR: negative

MRI: edema

2
Pre-collapse



XR: mixed sclerosis &
subchondral cysts
MRI: edema

3
Collapse



XR: crescent sign,
or cortical collapse
MRI: bone necrosis

4
Advanced Arthritis



XR: advanced DJD
MRI: same

PROLOTHERAPY HIP TENDON TREATMENT

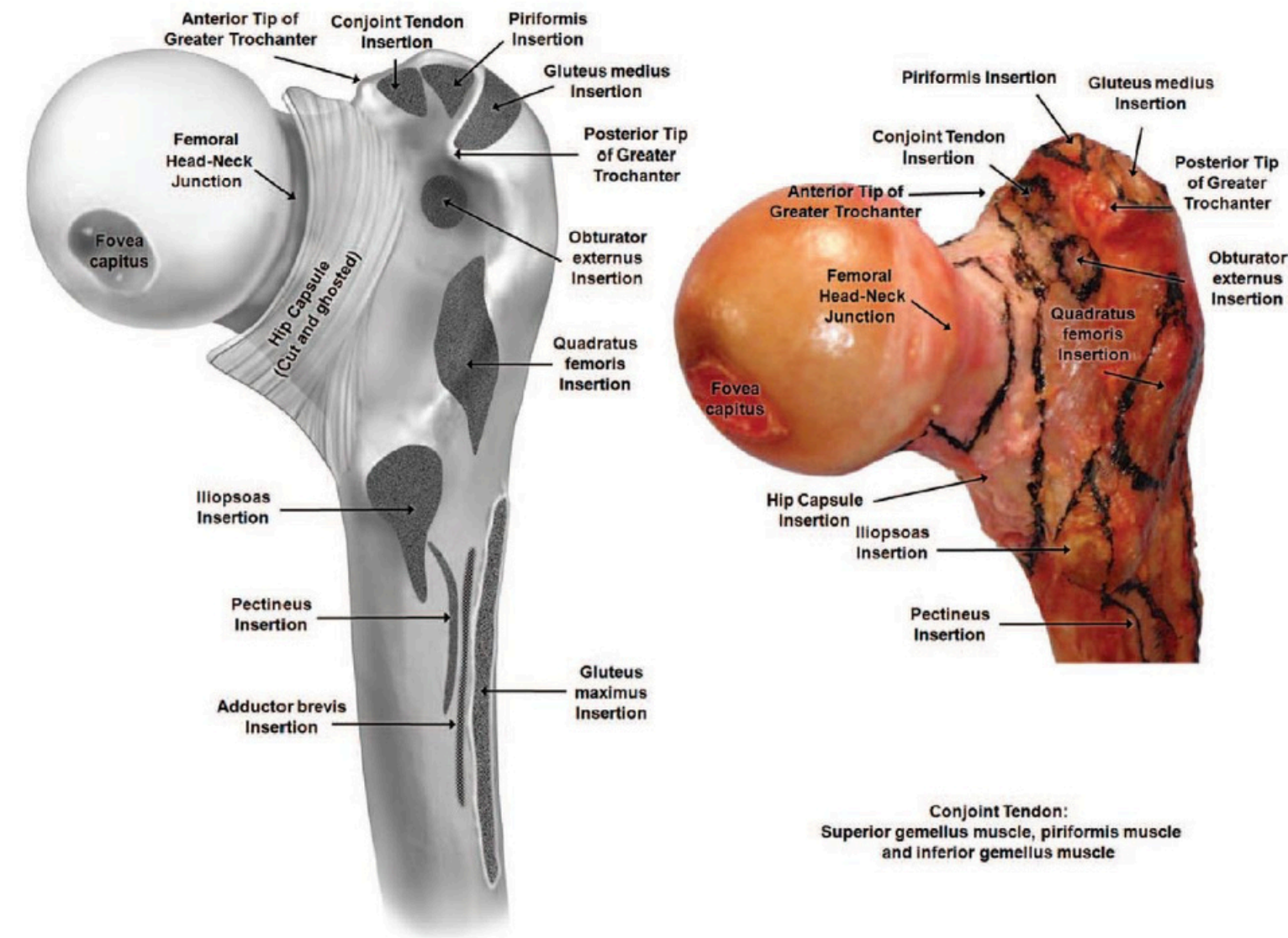
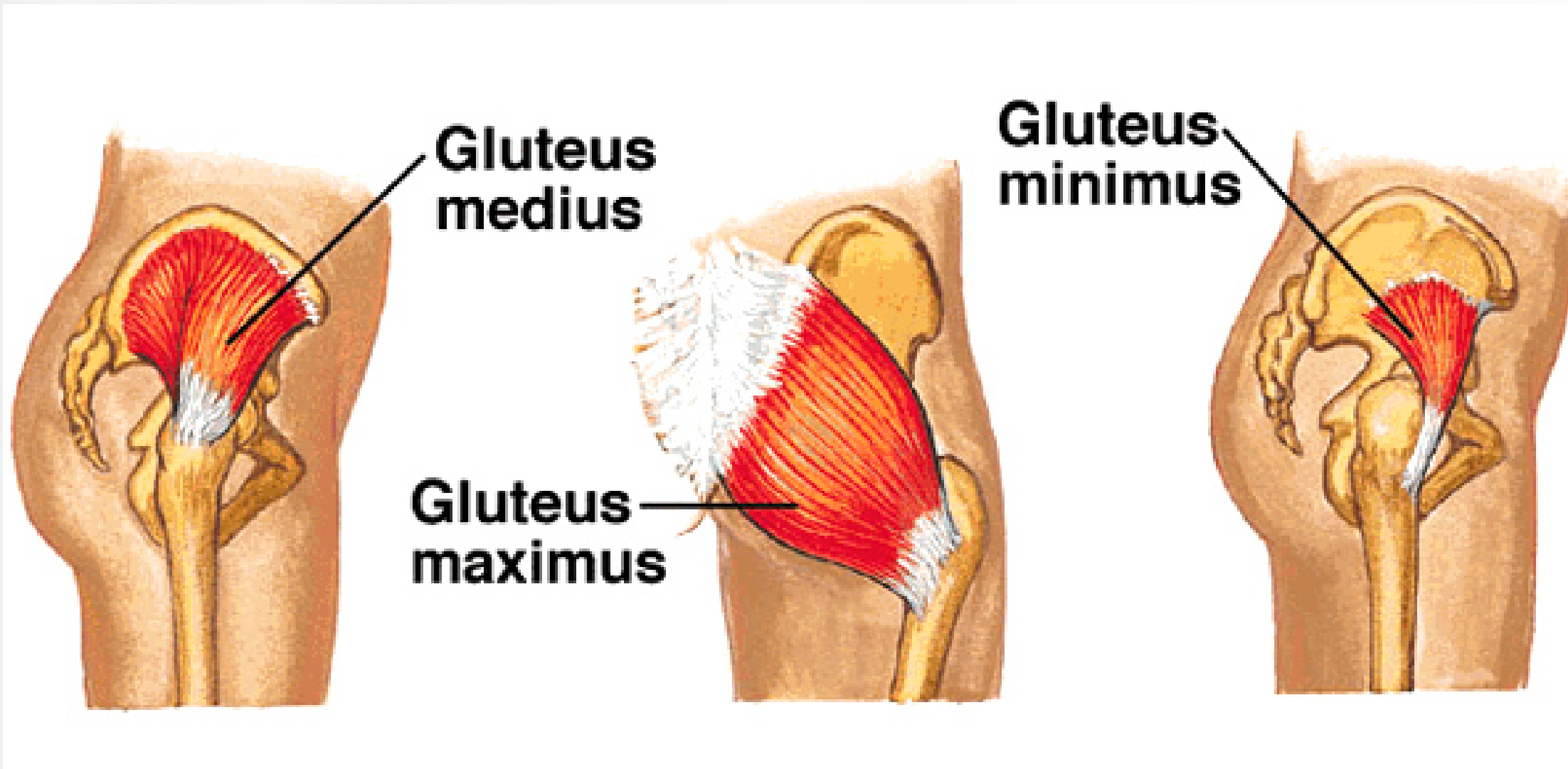


Figure 3. (Left) Illustration and (right) photograph of the posteromedial proximal femur of a left hip looking anterolaterally at the footprint insertions on the medial surface of the greater trochanter and posterior proximal femur.

**HIP PROLOTHERAPY IS A GAME CHANGER IF
THE JOINT IS NOT IN ADVANCED ARTHRITIS BY
TREATING THE HIP CAPSULE AND ITS
LIGAMENTS**



PROLOTHERAPY GENERAL INDICATIONS

PROLOTHERAPY CLINICAL PROTOCOL

Any physician intending to practice Prolotherapy must comply with the following guidelines:

- 1. Conduct a thorough clinical evaluation and accurate anamnesis.**
- 2. Evaluate all clinical and diagnostic assessments.**
- 3. Clarify to the patient:**
 - What are the principles of Prolotherapy, and how does it function?**
 - Prolotherapy is a safe and effective treatment.**
 - What constitutes the strategic treatment plan?**
 - That Prolotherapy utilizes solely glucose and local anesthesia.**

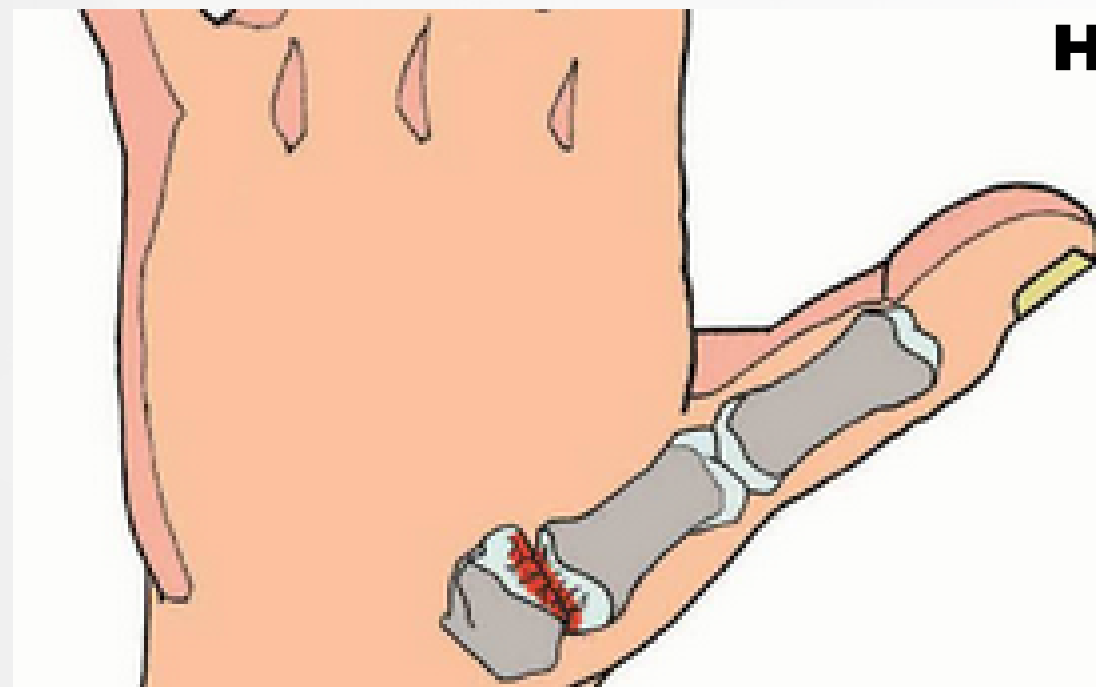
PROLOTHERAPY IS AN INJECTABLE THERAPY.

SAFE – as each injection must be administered directly to bone.

ELEGANT – due to its precision and has minimal discomfort.

EFFECTIVE – because more than 90% of patients report an improvement in their condition.

REGENERATING – because Prolotherapy inhibits degeneration and stimulates the regeneration of new connective tissue.



HIP ARTHRITIS - NORMAL HIP

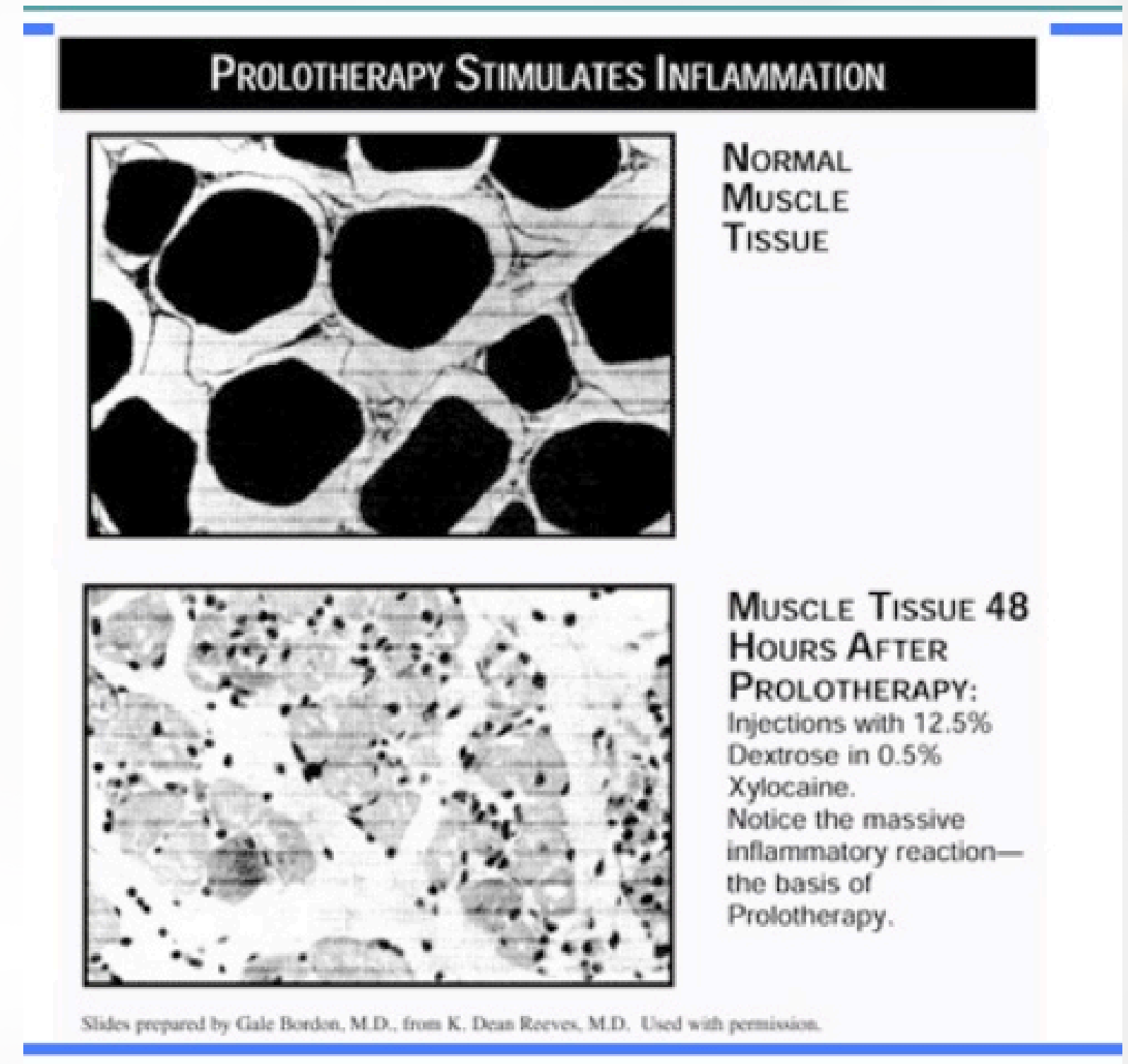


PROLOTHERAPY IS A THERAPEUTIC INTERVENTION THAT INVOLVES THE INJECTION OF A SOLUTION TO STIMULATE HEALING IN DAMAGED TISSUES.

A NON-INVASIVE ORTHOPEDIC INJECTION THERAPY

Hyperosmolar glucose (12–25%) creates an osmotic gradient that triggers localized damage and an aseptic inflammatory response.

Multiple injections into entheses, joints, and injured tissues enhance ligament and tendon strength.



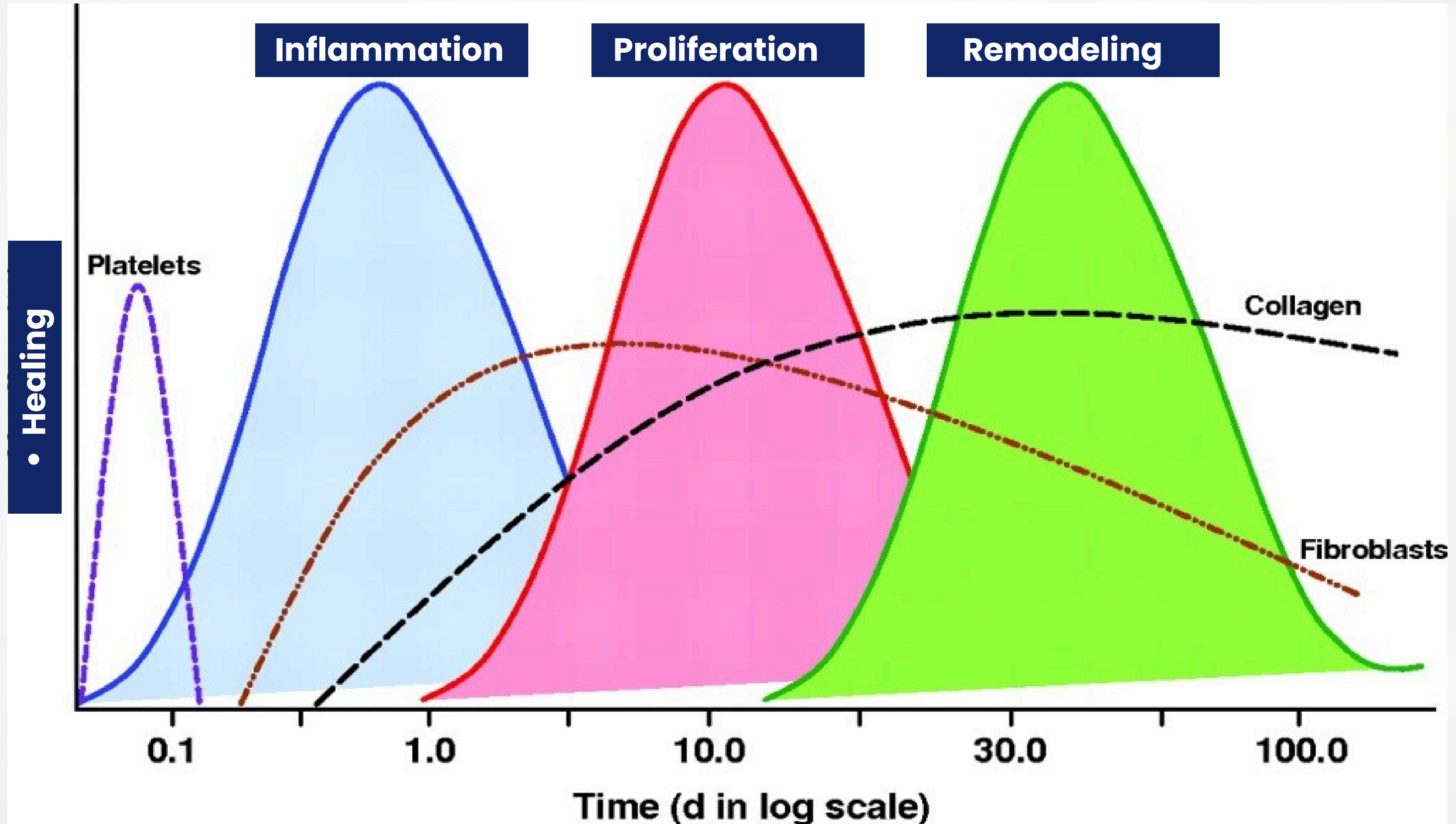
PROLOTHERAPY THERAPEUTIC HEALING CASCADE

In the initial phase of the healing cascade, known as the **inflammatory phase**, glucose injections induce localized tissue inflammation, which prompts the release of inflammatory chemical mediators.

In the second phase of the **healing cascade**, known as the proliferative phase, fibroblasts are activated to synthesize new collagen, which is deposited in the area affected by the infiltration. The immune system, consisting of granulocytes and macrophages, receives signals indicating the issue and initiates the healing cascade to release growth factors.

In the third and final phase of the healing cascade, known as the **remodeling phase**, the regenerated collagen undergoes dehydration during the regeneration process, resulting in a stronger new ligament.

MECHANISM AND FUNCTION OF PROLOTHERAPY



THE ERA OF PROLOTHERAPY

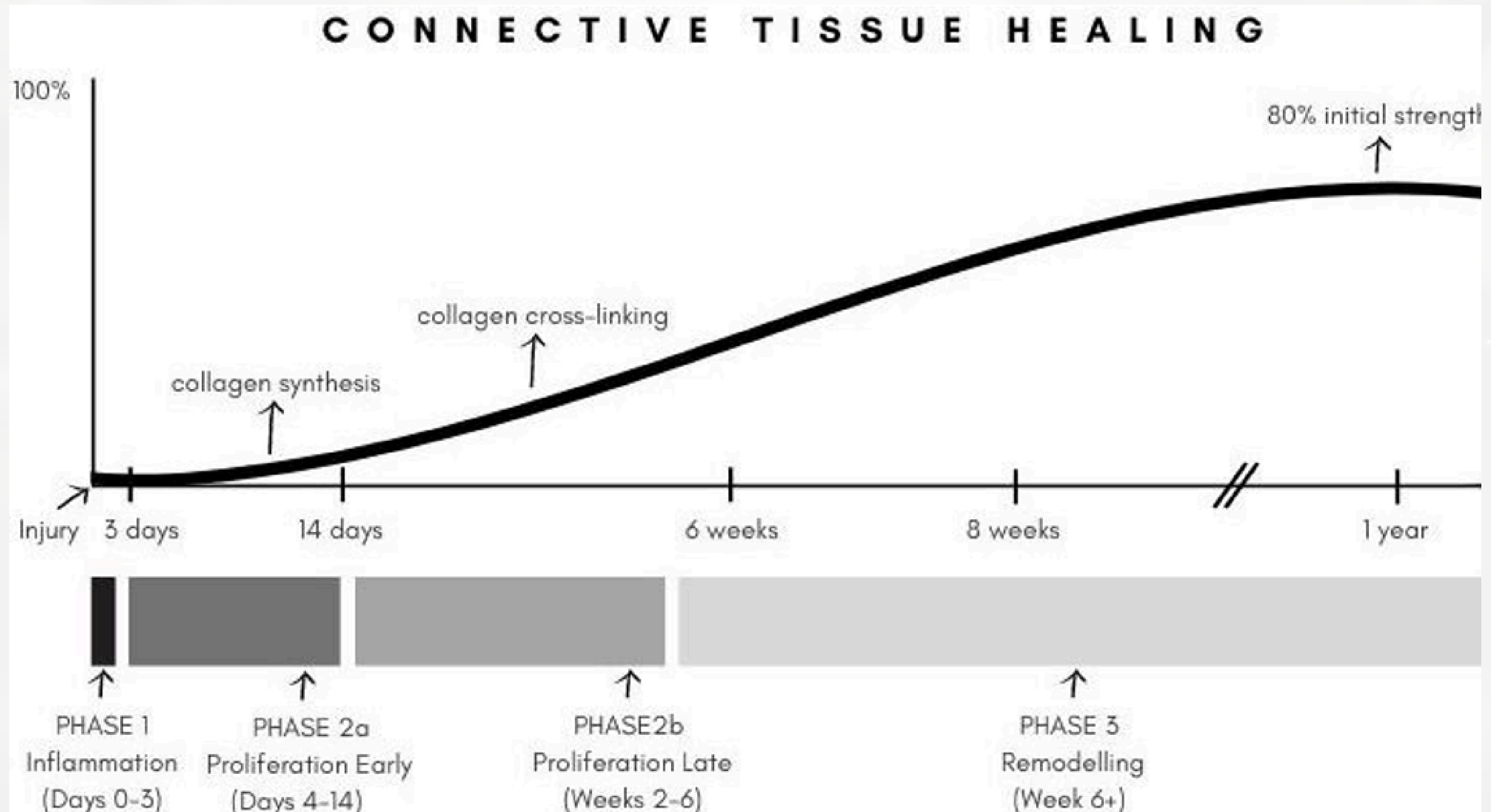
THE SIGNIFICANCE OF TIME SCHEDUALING PROLOTHERAPY SESSIONS

Patients undergoing Prolotherapy for the first time need to understand that receiving a subsequent treatment promptly is important.

It is crucial to ensure that the patient comprehends that the healing cascade mechanism adheres to specific timelines and that Prolotherapy is a treatment whose benefits manifest over short and long term.

The stability and longevity of the results also depend on adhering to the deadlines. This means we should be patient to see improving signs with less pain and better function.

MECHANISM AND FUNCTION OF PROLOTHERAPY



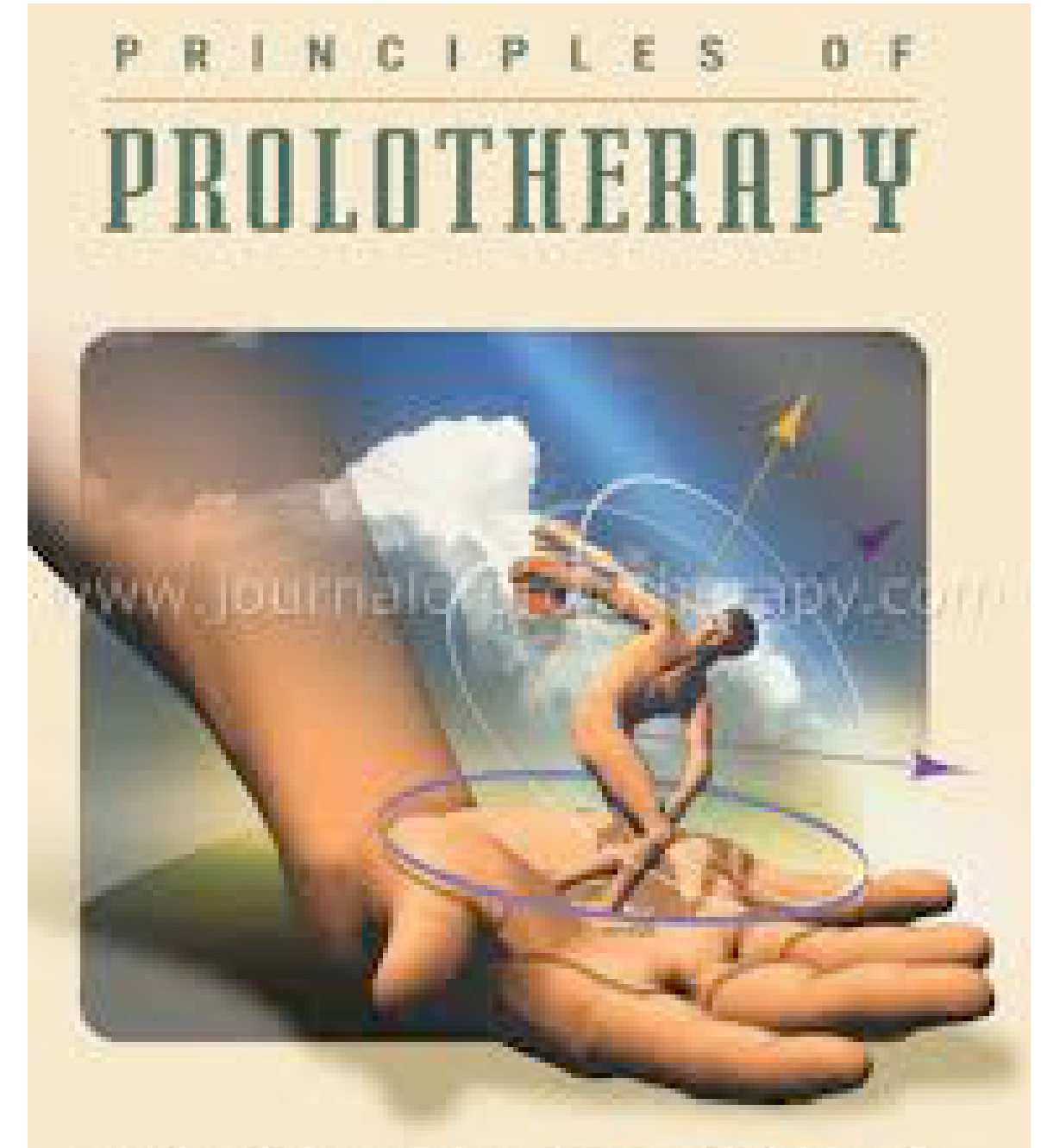
EFFECTIVENESS OF PROLOTHERAPY AND RESEARCH

Publications in objective evidence regarding the efficacy of Prolotherapy indicate the following:

Prolotherapy injections induce both microscopic and macroscopic alterations in local structures that facilitate regeneration.

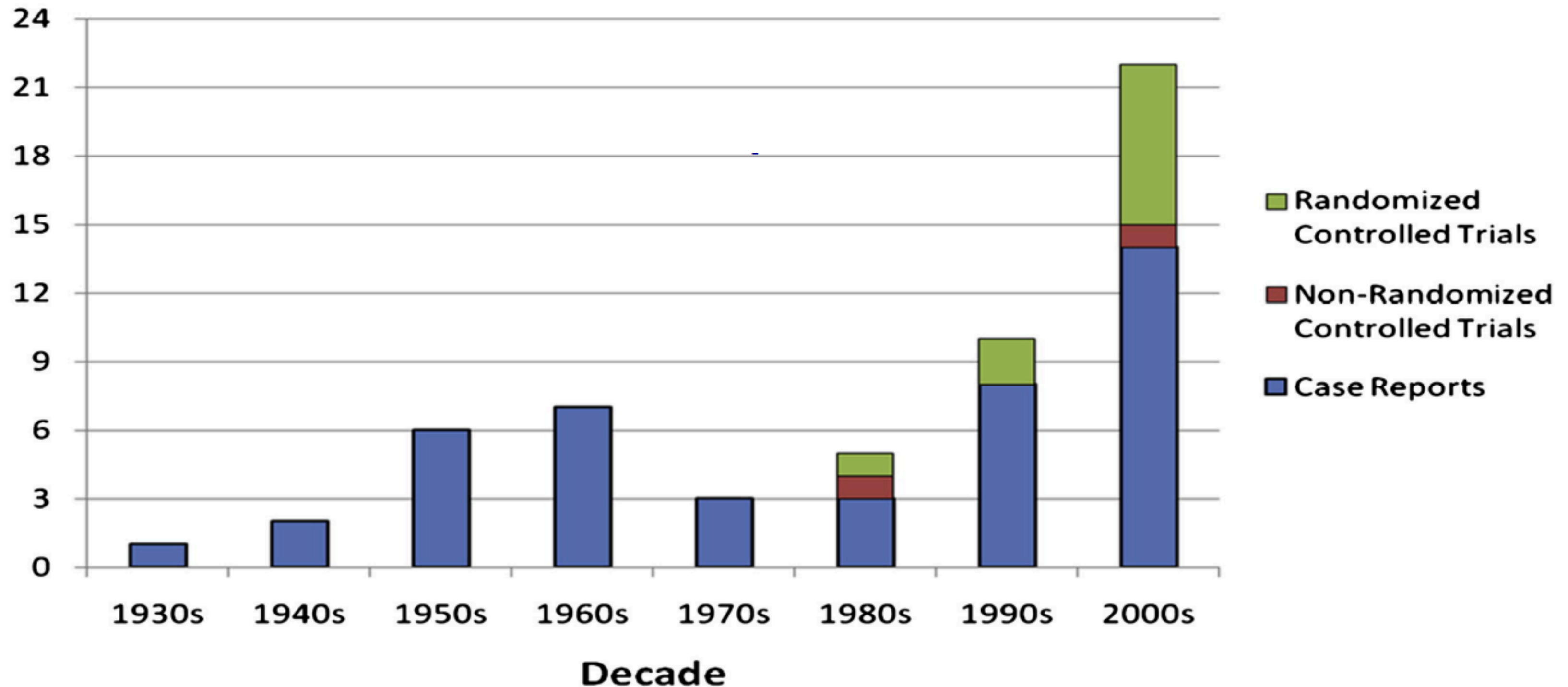
Measurable enhancements in mechanical systems are observed within local facilities.

Animal and human studies have shown a reduction in pain and an enhancement in functionality.



SCIENTIFIC EVIDENCE REGARDING PROLOTHERAPY

Prolotherapy Clinical Reports



EFFECTIVENESS OF PROLOTHERAPY AND RESEARCH

Area treated	Number of patients	Average pain level prior to Prolotherapy	Average pain level after Prolotherapy	Percent of Patients who reported > 50% pain relief
Ankle	19	7.9	1.6	90%
Back	145	5.6	2.7	89%
Elbow	36	5.1	1.6	94%
Foot	19	7.1	2.3	84%
Hand	40	5.9	2.6	82%
Hip	94	7.0	2.4	89%
Knee	119	6.5	2.5	88%
Neck	98	5.6	2.3	89%
Shoulder	94	7.1	2.3	87%
TMJ	14	5.9	2.5	93%
Wrist	31	5.5	1.4	90%
Overall Average	Total: 709	6.3	2.2	89%



BIBLIOGRAPHIC RESEARCH

SCIENTIFIC EVIDENCE REGARDING PROLOTHERAPY

Numerous clinical cases (case reports**) indicates the why much interest in prolotherapy which is focused more towards musculoskeletal disorders.**

The management of tendinopathies is substantiated by numerous clinical studies, enabling us to assert that Prolotherapy treatment is backed up by numerous scientific evidences and its outcomes.

SCIENTIFIC EVIDENCE REGARDING PROLOTHERAPY

ANIMAL MODEL RESEARCH

Animal studies have demonstrated that Prolotherapy can enhance collagen production, strengthen ligaments and tendons, and facilitate the healing of damaged tissue. These findings indicate that Prolotherapy, by eliciting a controlled inflammatory response, supports the body's intrinsic healing mechanisms.

A study involving rats administered with 15% glucose injected into the Medial Collateral Ligament (Knee) revealed a 70% enhancement compared to the control group and a 30% improvement relative to the saline-infiltrated group.

SCIENTIFIC EVIDENCE REGARDING PROLOTHERAPY

RESEARCH ON HUMAN MODELS

Epicondylitis (Elbow)

Scarpone et al. (2008). Clinical Journal of Sports Medicine.

- Treated patients exhibited a reduction in pain symptoms at both the 8th and 16th weeks.
- Enhanced isometric strength relative to controls ($p^* < 0.01$).
- Grip strength demonstrated significant improvement following treatment ($p^* < 0.05$).
- Clinical improvement sustained at 52 weeks.

**= the measure of muscular strength and endurance*

SCIENTIFIC EVIDENCE REGARDING PROLOTHERAPY

Case Report 2025

Innovative Dynamic Ultrasound Diagnosis of First Rib Stress Fracture in an Adolescent Athlete

Yonghyun Yoon 1,2,3,4,* ,† , King Hei Stanley Lam 4,5,6,* ,† , Chanwool Park 2 Jaeyoung Lee 2, Jangkeun Kye 7,8, Hyeun Kim 8, Seonghwan Kim 8, Junhan Kang 8, Anwar Suhaimi 4,9 , Teinny Suryadi 4,10,11,12 , Daniel Chiung-Jui Su 13,14 , Kenneth Dean Reeves 15 and
Stephen Cavallino 16,17

<https://www.mdpi.com/2075-4418/15/19/2437>

Prolotherapy was the game changer in this case study

SCIENTIFIC EVIDENCE REGARDING PROLOTHERAPY

Case Report 2025

Ultrasound-Guided Prolotherapy for Sciatica Secondary to Sacrospinous Ligament Calcification: A Potential and Previously Overlooked Etiological Factor in Deep Gluteal Syndrome

A Case Report and Literature Review

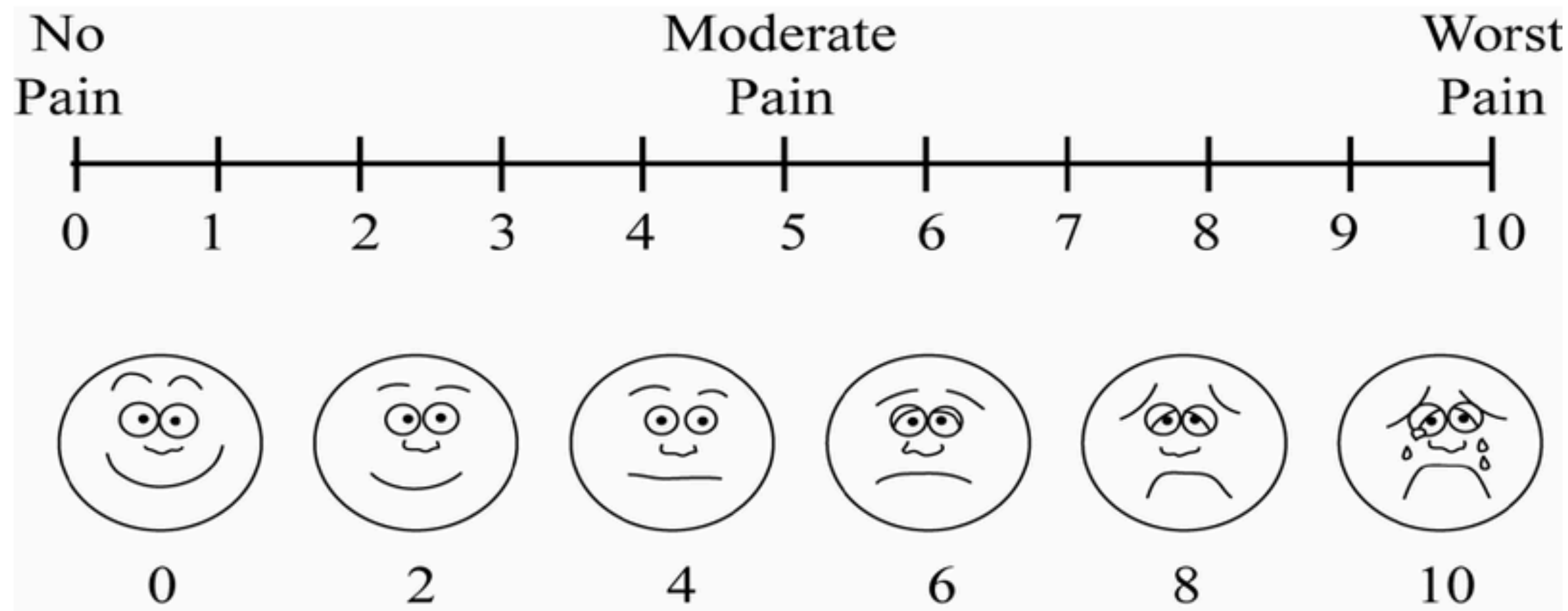
Yonghyun Yoon 1,2,3,4,5,* , King Hei Stanley Lam 4,6,7,8,* , Jaeyoung Lee 2, Rowook Park 2,9, Jaehyun Shim 2,10,* , Jonghyeok Lee 2,11, Daniel Chiung-Jui Su 12,13 , Kenneth Dean Reeves 14 and **Stephen Cavallino 15,16**

Prolotherapy was the game changer in this case study

SCIENTIFIC EVIDENCE REGARDING PROLOTHERAPY

PAIN: VISUAL ANALOG SCALE

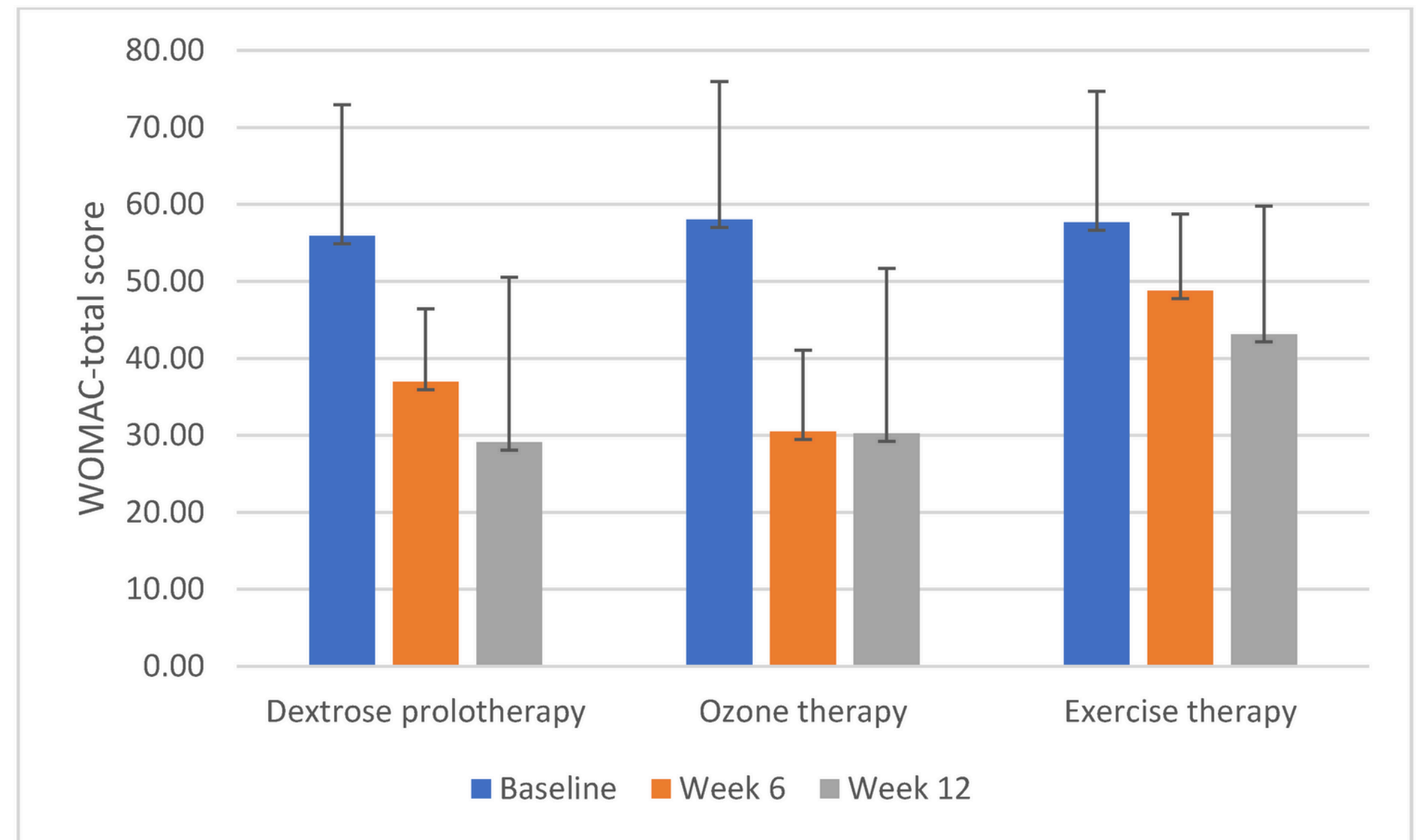
The Visual Analogue Scale (VAS) serves as a tool for assessing the intensity of pain experienced by the patient. The scale extends from 1 to 10.



SCIENTIFIC EVIDENCE REGARDING PROLOTHERAPY

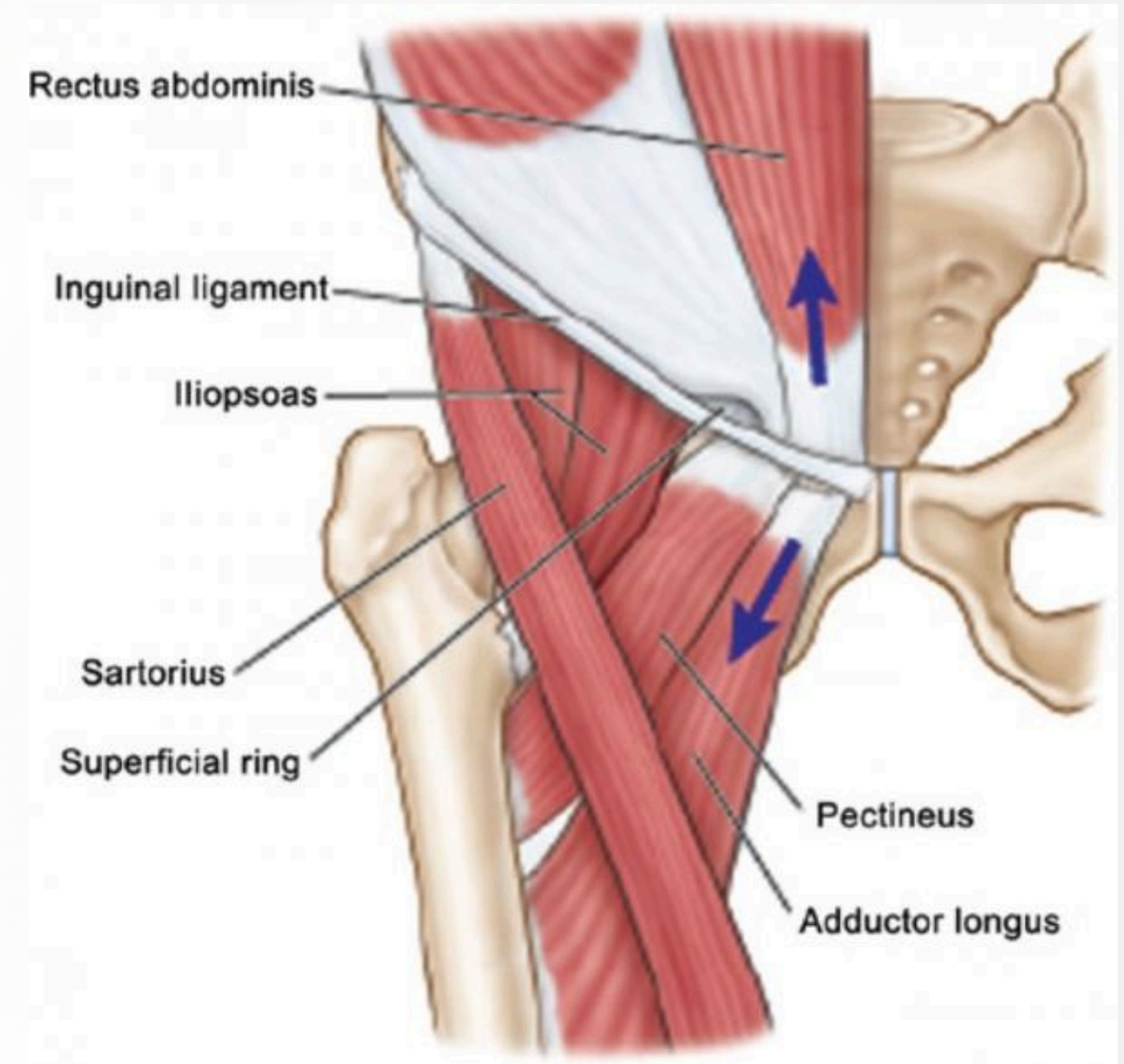
WOMAC SCORE

The Western Ontario and McMaster Universities Osteoarthritis Index comprises a series of standardized questionnaires employed by healthcare professionals to evaluate the status of patients with knee and hip osteoarthritis, encompassing aspects such as pain, stiffness, and joint physical function.



CLINICAL STUDY ON PUBALGIA IN ATHLETES.

- 75 athletes enlisted
- 72 athletes successfully completed the infiltration protocol (12.5% glucose, 0.5% lidocaine administered monthly until symptom resolution) at the tendon insertions of the adductor and rectus abdominis muscles.
- 6 athletes exhibited no improvement, whereas 66 returned to their prior competitive activities without restrictions within three months (average range of one to five months).
- VAS improved by 82% after 26 months.



Topol GA, Reeves KD. Regenerative injections in elite athletes with chronic groin pain unresponsive to conservative treatments: a consecutive case series.

Am J Phys Med Rehabil. 2008; 87(11): 890-902.



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David Rabago, Jeffrey J. Patterson, Marlon Mundt, Richard Kijowski, Jessica Grettie, Neil A. Segal, Aleksandra Zgierska

2013 May-Jun

The impact of dextrose prolotherapy on patients diagnosed with knee osteoarthritis: A thorough systematic review and meta-analysis of interventional studies.

Sorour Khateri, Fatemeh Behbahani Nejad, Farnoush Kazemi, Behnaz Alaei, Mobin Azami, Asra Moradkhani, Lobat Majidi, Yousef Moradi

2024 June

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Yose Waluyo, Sari Rajwani Artika, Insani Nanda Wahyuni, Andi Muh Aunul Khaliq Gunawan, Ahmad Taufik Fadillah Zainal, J Rehabil

2023 Feb

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A Retrospective Analysis of Hackett-Hemwall Dextrose Prolotherapy for Chronic Hip Pain at an Outpatient Charity Clinic in Rural Illinois.

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Dextrose Prolotherapy for the Management of Persistent Morton's Neuroma Pain.

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<https://pmc.ncbi.nlm.nih.gov/articles/PMC2751593/#:~:text=Prolotherapy%20with%20dextrose%20and%20sodium,epicondylitis%20compared%20to%20Control%20injections>.

Dextrose Prolotherapy for Persistent Headache and Migraine Discomfort.

<https://www.medcentral.com/pain/chronic/dextrose-prolotherapy-recurring-headache-migraine-pain>

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<https://pubmed.ncbi.nlm.nih.gov/33584052/#:~:text=Results:%20There%20was%20appreciable%20reduction,Maxillofacial%20Surgeons%20of%20India%202020>

Prolotherapy for the Management of Sports-Related Tendinopathies: A Systematic Review of Randomized Controlled Trials

<https://pubmed.ncbi.nlm.nih.gov/39502373/#:~:text=Results:%20A%20total%20of%2020,additional%20component%20of%20conservative%20treatment>

Reeves KD, Hassanein K. A randomized, prospective, placebo-controlled, double-blind study of prolotherapy for osteoarthritic thumb and finger (DIP, PIP, and trapeziometacarpal) joints: Evidence of clinical efficacy.

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EFFECTIVENESS OF PROLOTHERAPY AND RESEARCH

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doi: 10.1093/bmb/ldx006
Advance Access Publication Date: 4 March 2017



Invited Review

The effectiveness of prolotherapy in treating knee osteoarthritis in adults: a systematic review

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Abstract

Introduction: Osteoarthritis (OA) often leads to symptoms such as pain, stiffness and decreased function. OA is treated with a wide range of modalities, both conservatively and surgically. Prolotherapy has been used to treat various musculoskeletal problems and has shown some promise.

Sources of data: Searches of the electronic databases, PubMed, ISI web of science, PEDro and SPORTDiscus, were conducted for all Level 1–4 studies published from inception through to December 2016.

Areas of agreement: Ten studies were evaluated and results show significant improvement in scores for pain, function and range of motion, both in the short term and long term. Patient satisfaction was also high in these patients (82%).

Areas of controversy: Meta-analysis was not possible due to heterogeneity of outcome measures and populations.

Growing points: Moderate evidence suggests that prolotherapy is safe and can help achieve significant symptomatic control in individuals with OA.



CONCLUSIONS

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Prolotherapy is a natural infiltrative treatment that promotes regeneration. Stronger periarticular structures = more robust joints!!

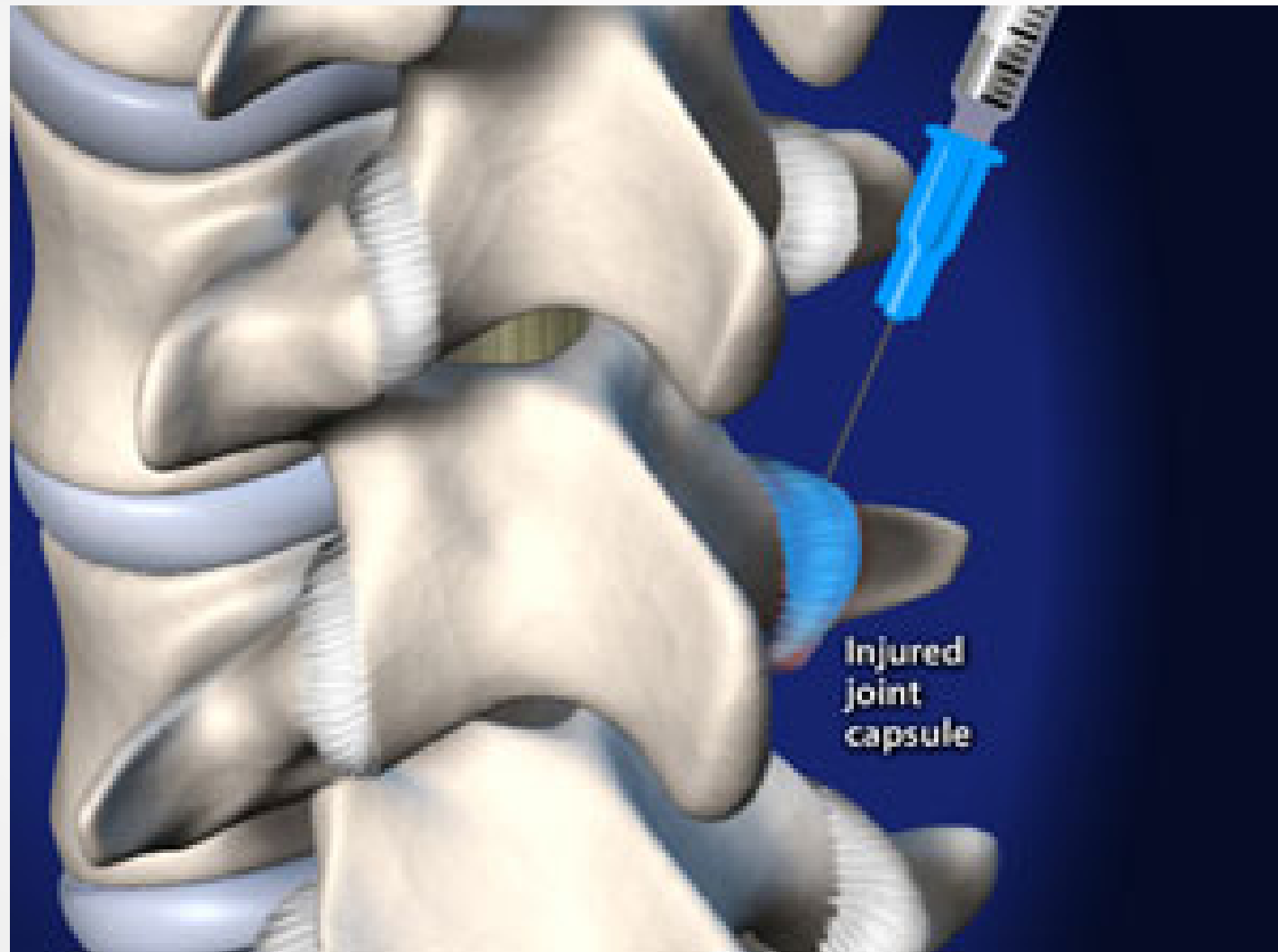
Prolotherapy is employed for the management of chronic pain. The suggested frequency for this treatment is one session every 3 to 4 weeks, during which progressively evident positive clinical signs are noted. Patients report a significant decrease in pain.

Prolotherapy should be a treatment implemented in all healthcare facilities. Why?

- **Due to its minimal cost.**
- **Because it is a natural healing effective therapy.**
- **Because of its effectiveness, pain and function is restored.**

THE PROLOTHERAPY

Every physician, upon encountering a patient with chronic musculoskeletal pain, desires an expedient solution to alleviate their discomfort and provide prompt relief.



PRACTICAL GUIDELINES FOR THE PROLOTHERAPIST

It is essential to be familiar with the globally standardized Prolotherapy protocols (ESP and HHPF).

He or she must possess an extensive knowledge of human anatomy, precise to the millimeter.

Must possess the ability to illustrate the anatomy and identify the points prior to infiltration.

PRACTICAL GUIDELINES FOR THE PROLOTHERAPIST

Infiltration techniques must be employed in an appropriate and sterile environment, such as an outpatient clinic.

It is essential to maintain the hygiene of both the environment and the patient, ensuring proper precautions and sterility.

You should inform the patient that it is a natural therapy involving "guided self-healing."

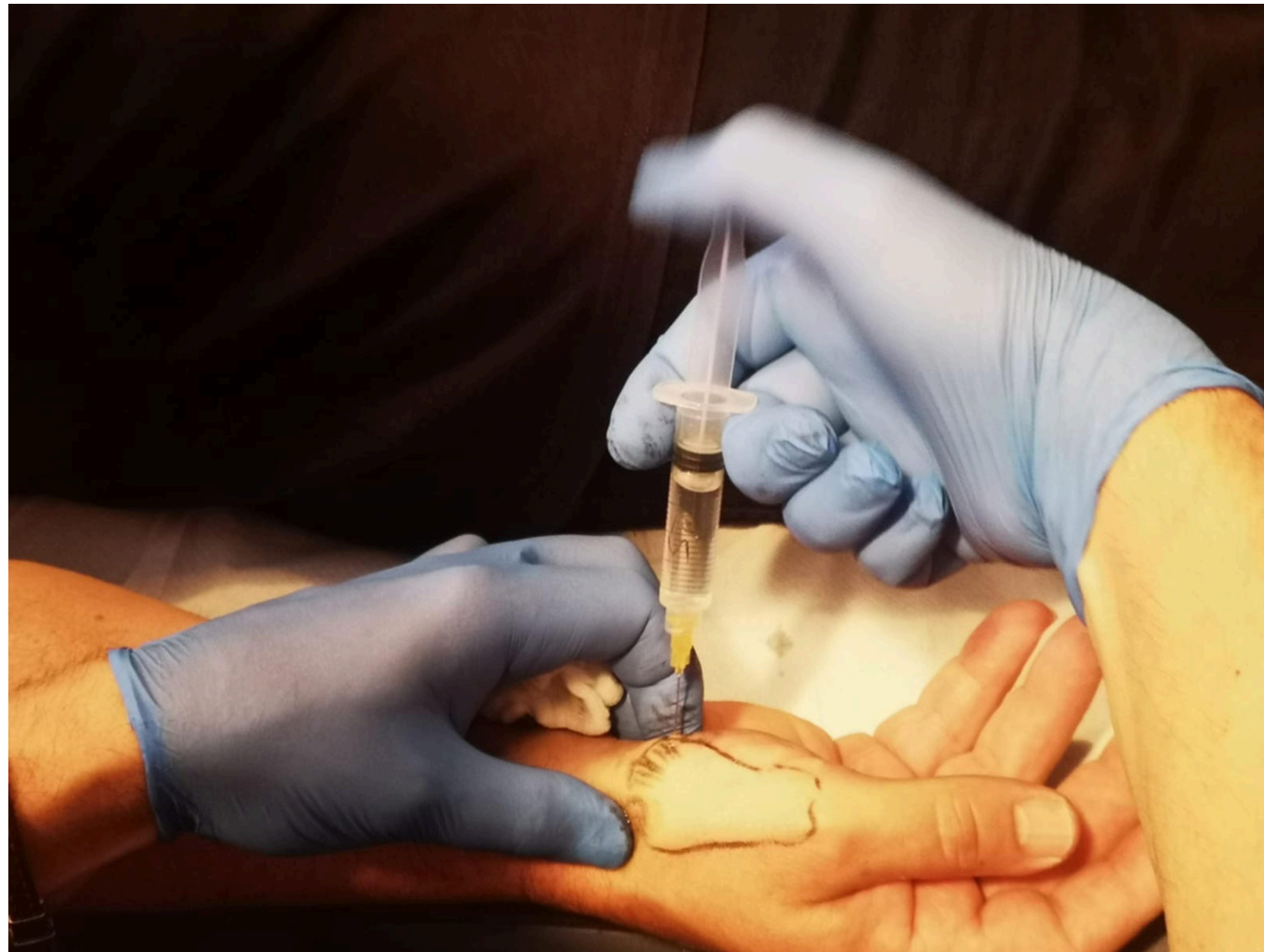


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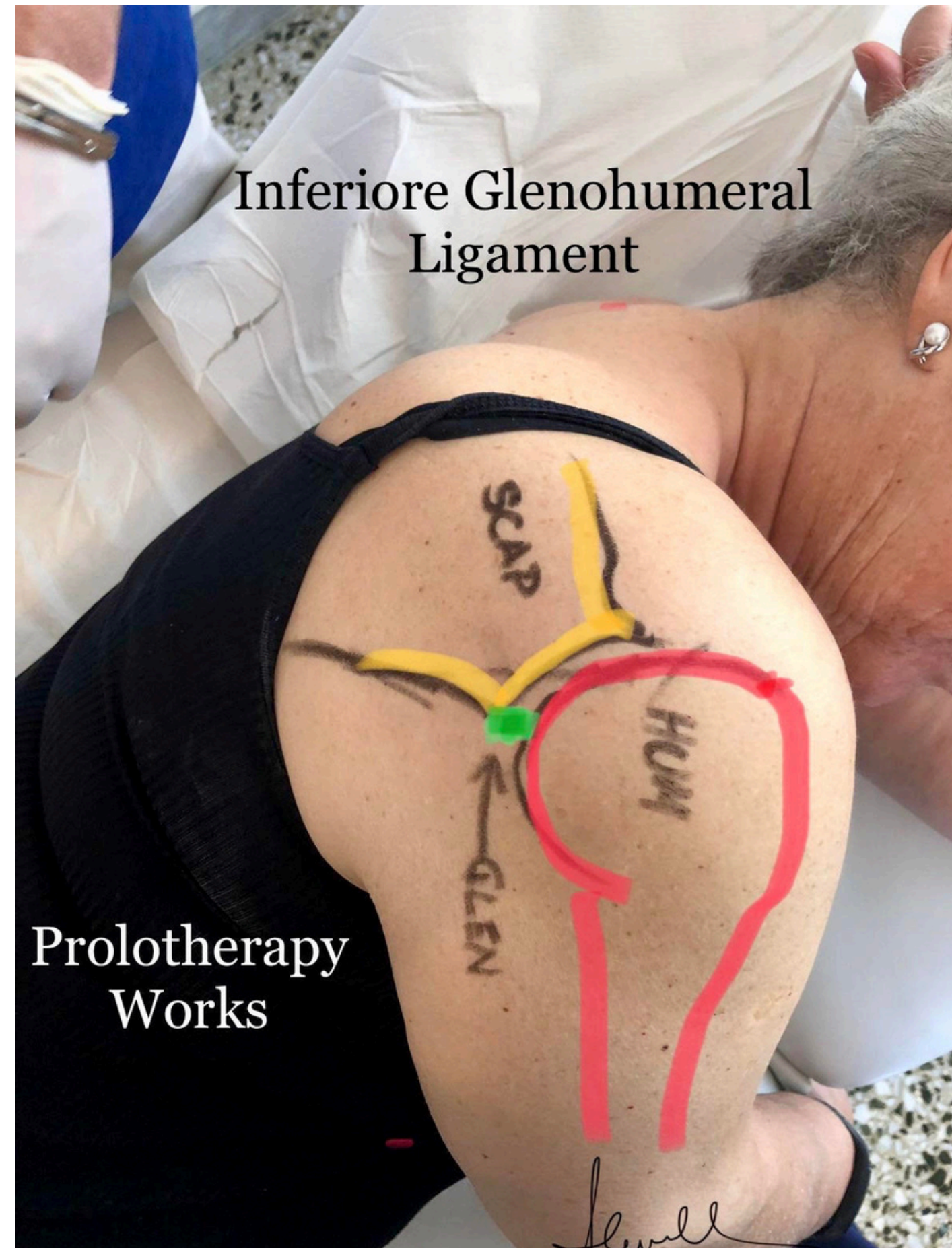
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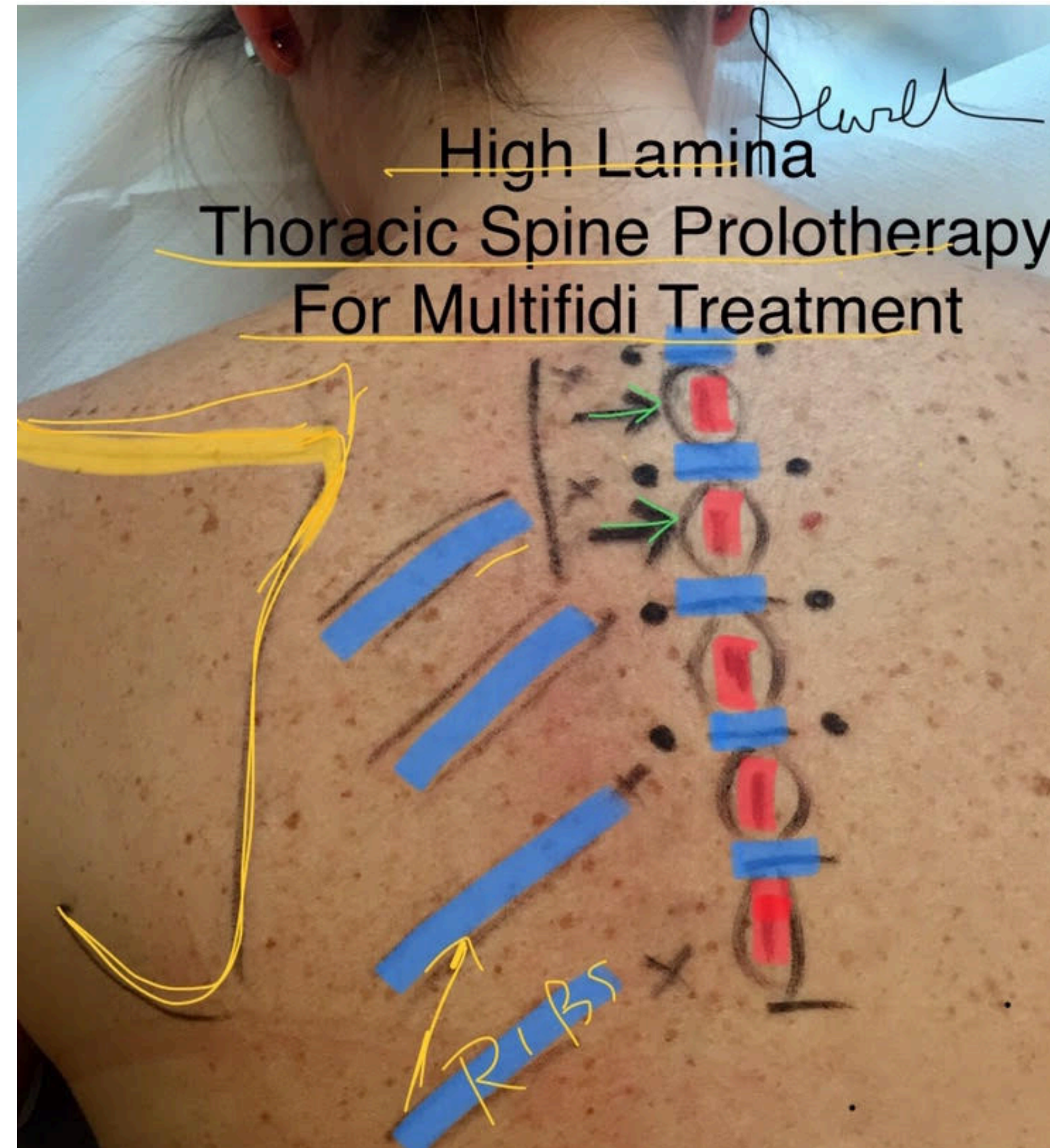
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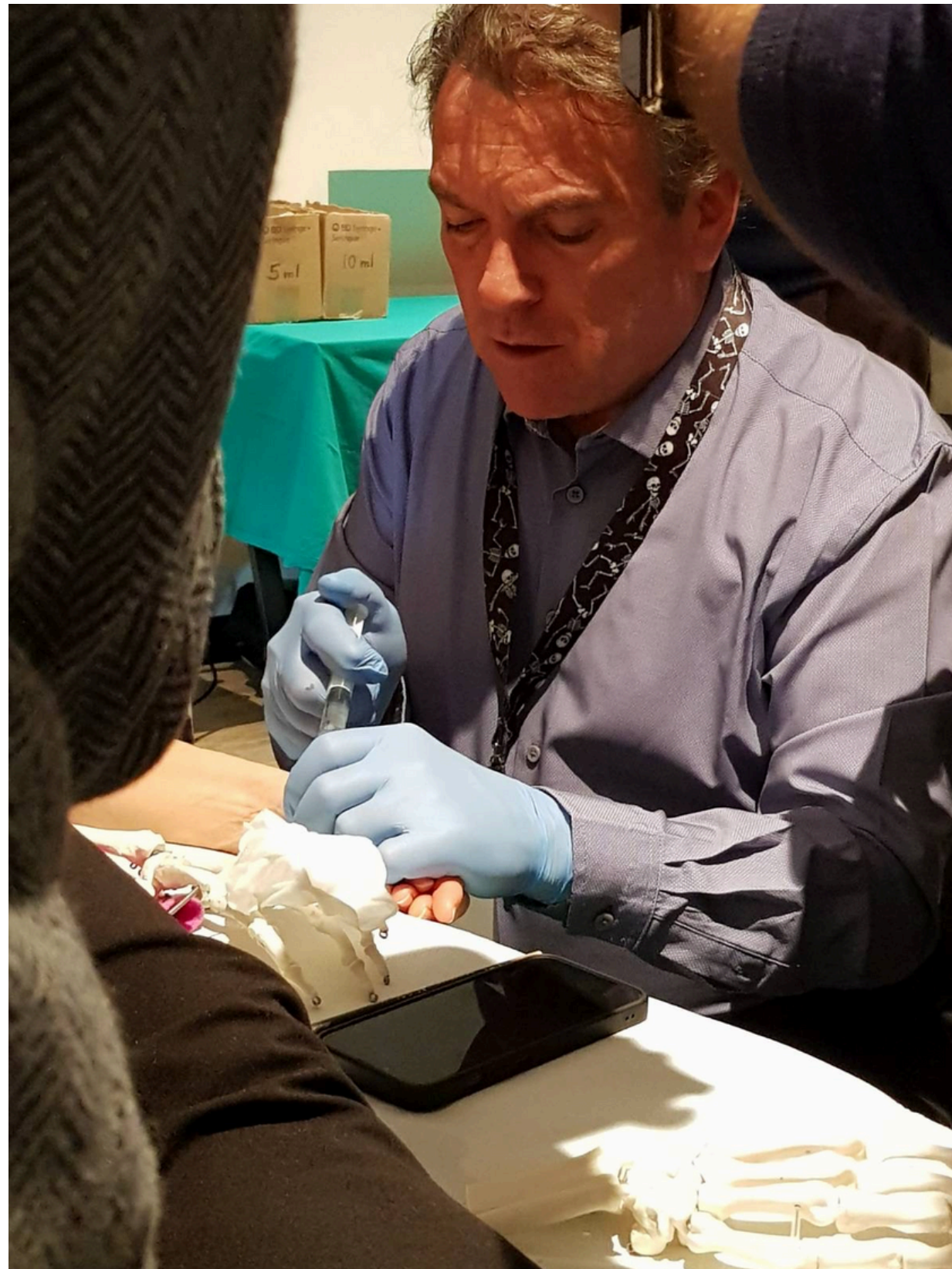
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ESP'S PROLOTHERAPY TEACHING COURSES

**The ESP Basic Prolotherapy Courses are categorized into
TWO PHASES:**

Phase One



Nine video lessons covering all the anatomical components that medical professionals must examine and study.

ESP'S PROLOTHERAPY PROGRAMS

Phase 2



Two days of in-person HANDS ON practical and operational training during which physicians acquire the following skills:

- **Preparing Prolotherapy solutions.**
- **Clinically learning how to exam patients.**
- **Illustrate the anatomical points of Prolotherapy on human models.**
- **Learning how to hold syringes at the appropriate angles for injection technique skills in various anatomical regions.**

During the two days of in-person training, physicians will have the opportunity to observe live patient treatments conducted by myself and the doctors affiliated with my Faculty.

THE COMPREHENSIVE REGIMEN OF PROLOTHERAPY

Upon completing this initial complimentary module, I encourage you to pursue the comprehensive Basic Prolotherapy Course by viewing the nine video lessons focused on the following anatomical regions:

1. **Knee** Prolotherapy
2. **Shoulder** Prolotherapy
3. **Lumbosacral spine** Prolotherapy
4. **Hip** Prolotherapy
5. **Foot and Ankle** Prolotherapy
6. **Wrist and Hand** Prolotherapy
7. **Elbow** Prolotherapy
8. **Cervical Spine** Prolotherapy
9. **Post-treatment** and additional applications of Prolotherapy

Following the review of the nine teaching modules, we will meet in the classroom for two days of face-to-face brainstorming training.



We depend on our
patients' smiles

The Courses, Missions, and Master
Class take place in various
countries around the world.
Contact us to find out the calendar
of upcoming events.

Contact

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Dott. Stephen Cavallino



EUROPEAN SCHOOL OF PROLOTHERAPY

Teaching how to treat
patients is our priority

COURSES

Basic Prolo e Neuoprolo

The ESP Basic Prolotherapy and Neuoprolotherapy Courses are categorized into two phases:

PHASE 1:

10 video lessons covering all the anatomical components that physicians must examine and study.

PHASE 2:

Two days of in-person practical and operational training during which physicians acquire the following skills:

- Prepare the Prolotherapy solutions.
- Clinically assess patients.
- Illustrate the anatomical points of Prolotherapy on human models.
- Hold the syringes at the appropriate angles for infiltrating various anatomical regions.

During the two days of in-person training, physicians will have the opportunity to observe live patient treatments conducted by Dr. Stephen Cavallino and the physicians of the ESP Faculty.

EDUCATIONAL EVENT

Mission

Once the basic courses have been completed, we invite doctors to take part in the annual ESP Prolotherapy Mission, which we usually carry out in poor countries around the world.

During the Mission, physicians have the opportunity, under the guidance of expert prolotherapy tutors, to practice Prolotherapy, acquiring the basic technique of this simple injection therapy.

During the Mission, hundreds of patients in difficult economic circumstances, who are suffering greatly and cannot afford to pay for any kind of treatment, are taken care free of charge.

Master Class

Every year, the European School of Prolotherapy organizes a Master Class in Regenerative Medicine, which brings together numerous qualified and specialized doctors from different countries around the world to share their specialist knowledge through exclusive lectures and workshops open to all participants.

Each edition of the Master Class has achieved excellent results in terms of high attendance and outstanding outcomes, as well as great satisfaction with the overall success of the training initiative.

For reference:

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<https://www.proloterapia.it/>



THANK YOU!



Dr. Stephen Cavallino, M.D.