



Bucharest 2-4 October
2025

8th
International
Symposium
Intra
Articular
Treatment



Chondrotoxicity of intra-articular injection products

Nicola Manocchio¹, Alberto Migliore², Calogero Foti¹

1. Physical and Rehabilitation Medicine, Tor Vergata University, Rome, Italy

2. Unit of Rheumatology, Ospedale S. Pietro FBF, Rome, Italy

E-mail: nicola.manocchio@uniroma2.it

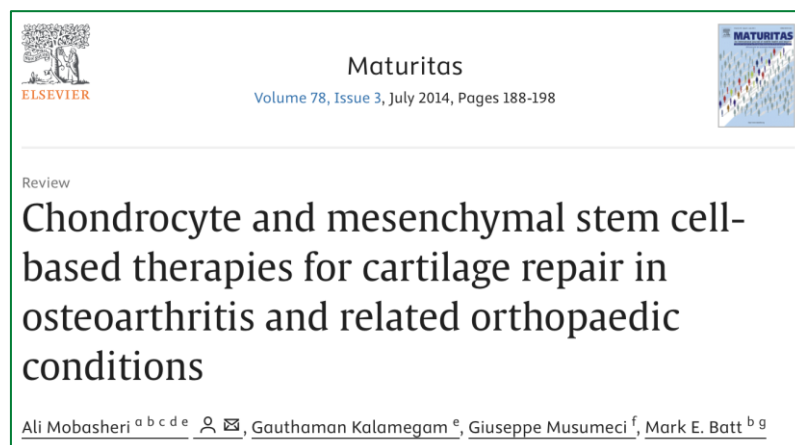
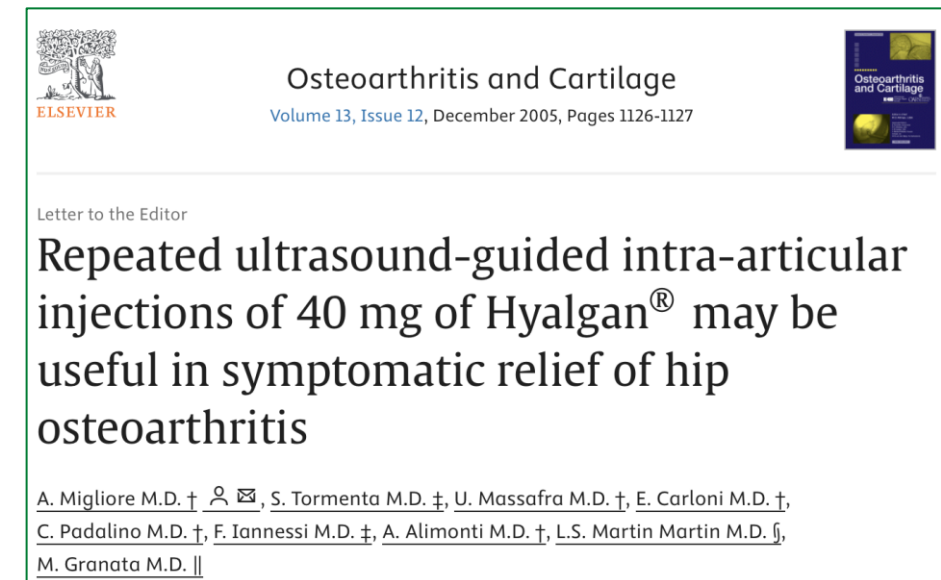
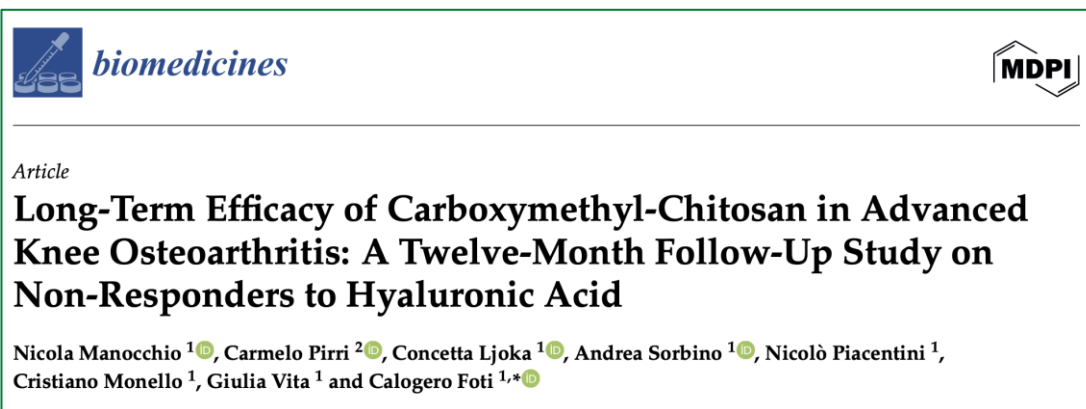
Author has nothing
to disclose

BACKGROUND

Bucharest 2-4 October 2025



- Intra-articular (IA) injections are common in osteoarthritis to reduce pain and improve function



Intraarticular injection of anakinra in osteoarthritis of the knee: A multicenter, randomized, double-blind, placebo-controlled study

Arthritis Care and Research • Article • Open Access • 2009 • DOI: 10.1002/art.24096
Chevalier X.^{a,k}, Goupille P.^b, Beaulieu A.D.^c, Burch F.X.^d, Bensen W.G.^e, +5 authors

BACKGROUND

Bucharest 2-4 October 2025



The most used compounds for IA injections are:

- Corticosteroids
- Local Anaesthetics
- Hyaluronic Acids (HA)
- Platelet-rich Plasma (PRP)
- Nonsteroidal Anti-inflammatory Drugs (Nsaids)
- Collagen Medical Devices
- Bisphosphonates

Like all substances used as drugs, these compounds can also have side effects

BACKGROUND

Bucharest 2-4 October 2025



Articular cartilage is a delicate, avascular tissue reliant on chondrocytes for matrix synthesis and repair

- balanced tissue of 2-4 mm-thick hyaline cartilage
- no nerves and blood or lymphatics vessels
- complex extracellular matrix (ECM) and specialized cellular elements

This sophisticated composition confers the capacity to endure substantial compressive forces while enabling smooth, frictionless articulation of the joints

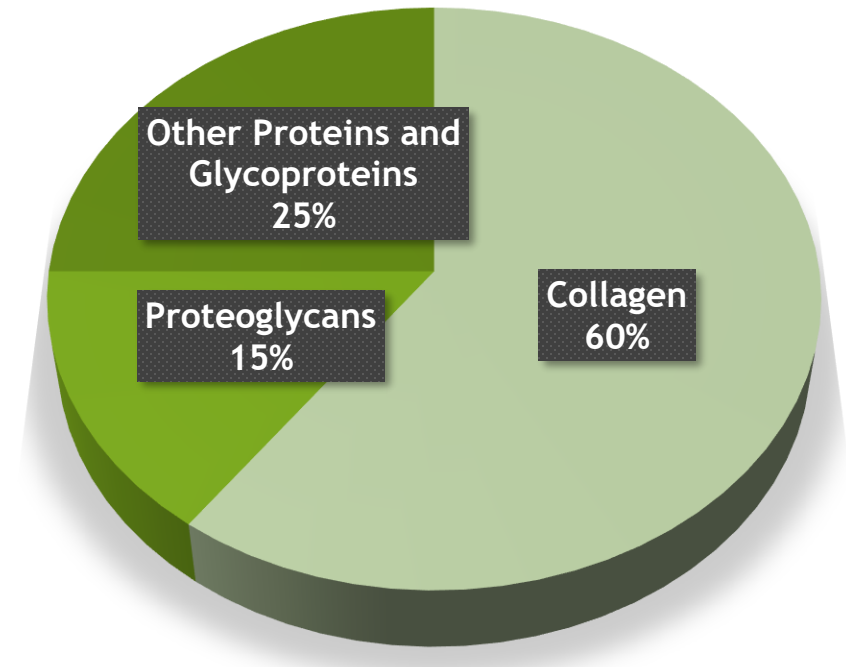
BACKGROUND

Bucharest 2-4 October 2025



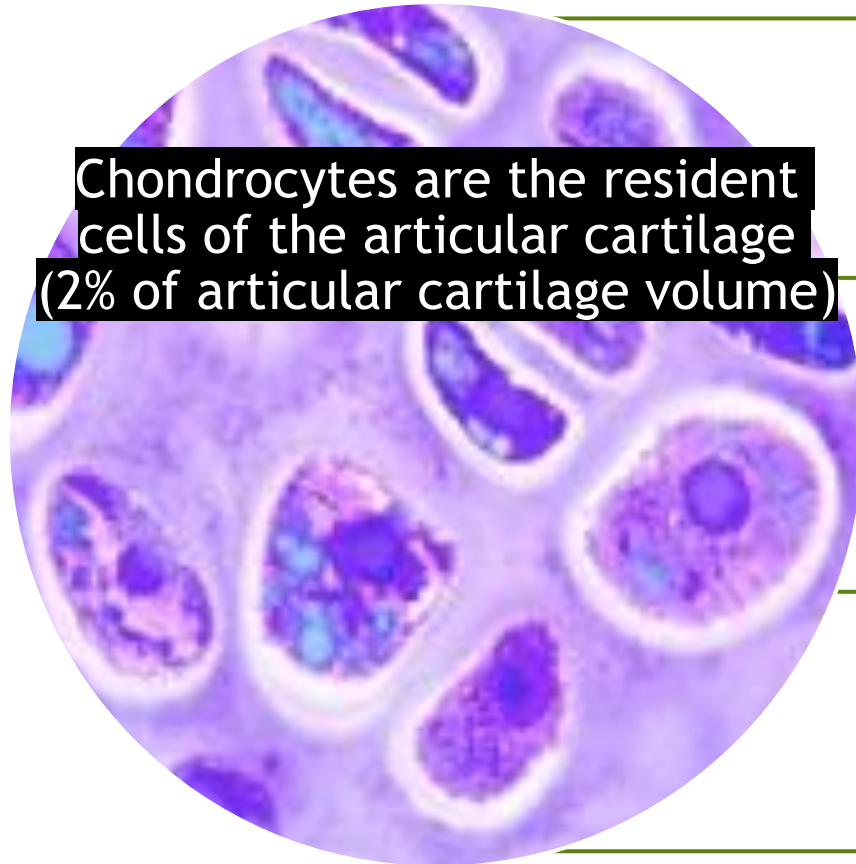
- ▶ ECM is the main structure of articular cartilage
 - ▶ **Water, collagen, proteoglycans, other non-collagenous proteins and glycoproteins** are the main ECM constituents
- ▶ **Type II collagen fibers (90%)** are stabilized by other less frequently appearing collagen types

ECM dry components



BACKGROUND

Bucharest 2-4 October 2025



Chondrocytes are the resident cells of the articular cartilage (2% of articular cartilage volume)

Highly specialized and metabolically active cells

Derived from mesenchymal stem cells

Involved in formation, upkeep, turnover and restoration of the ECM

Create specialized microenvironments

BACKGROUND

Bucharest 2-4 October 2025



Chondrocytes play a central role for ECM and articular cartilage

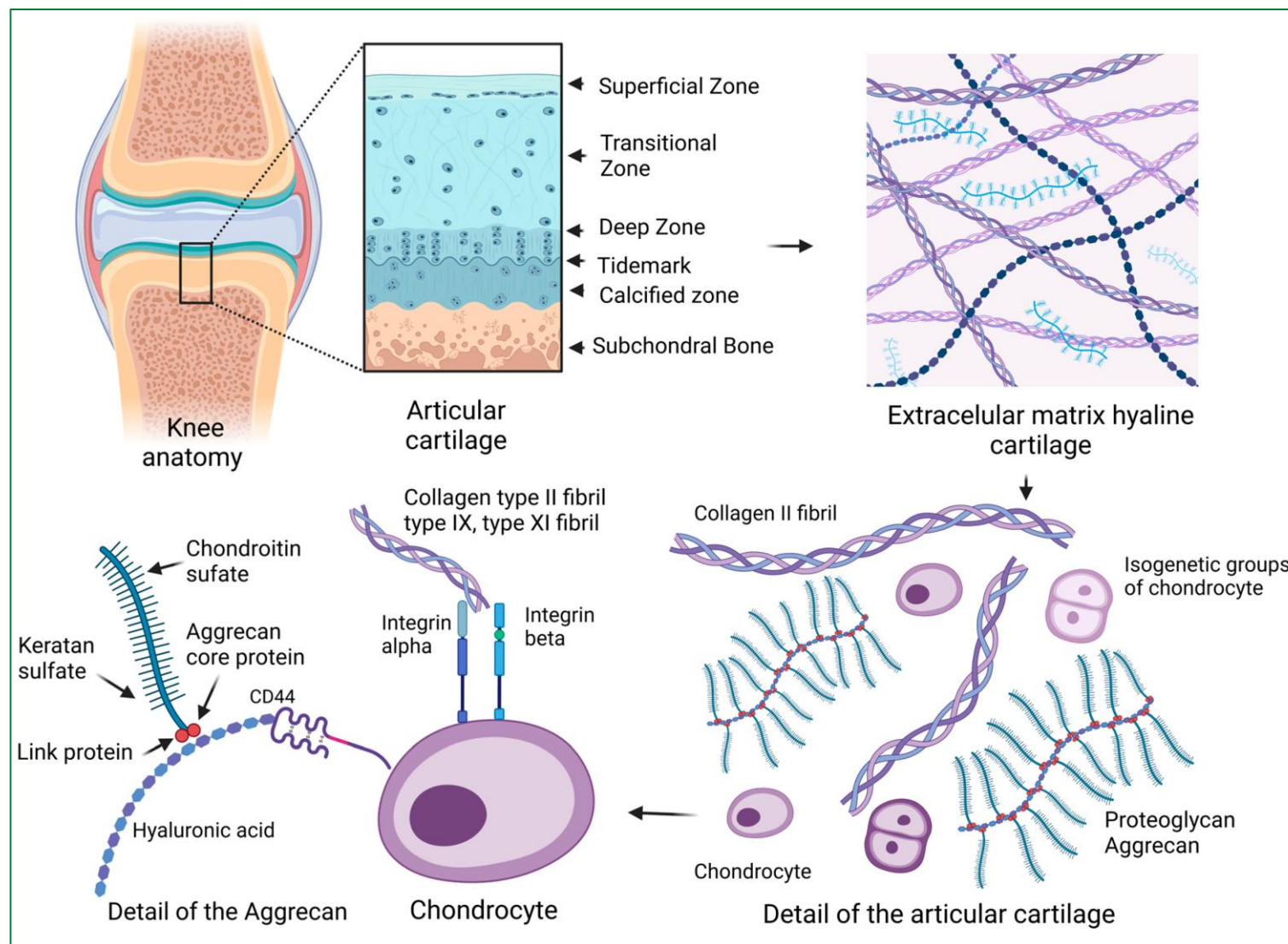
Synthesize ECM components and several enzymes responsible for its remodelling

As vascularization is lacking: primarily anaerobic metabolism

Metabolic activity can be altered by cytokines, growth factors, regulatory peptides, joint motion and load

BACKGROUND

Bucharest 2-4 October 2025



BACKGROUND

Bucharest 2-4 October 2025



ARTICULAR CARTILAGE IS A PARTICULARLY DELICATE TISSUE, VERY DIFFICULT TO REPAIR



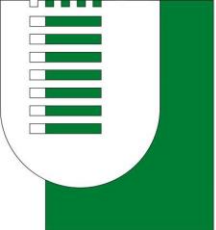
CHONDROCYTES HAVE A CENTRAL ROLE FOR ECM SYNTHESIS AND REPAIR



CONCERN EXISTS ABOUT DRUG-INDUCED CHONDROTOXICITY COMPROMISING CARTILAGE INTEGRITY AND LONG-TERM OUTCOMES



To review chondrotoxic effects of the most used IA products



Bucharest 2-4 October 2025



International Journal of
Molecular Sciences



Review

Chondrotoxicity of Intra-Articular Injection Treatment: A Scoping Review

Carmelo Pirri ¹, Andrea Sorbino ², Nicola Manocchio ², Nina Pirri ³, Antonio Devito ⁴, Calogero Foti ² and Alberto Migliore ^{5,*}

Article Metrics

Citations

Crossref



16

Scopus



13

PMC



5

Web of Science



11

PubMed



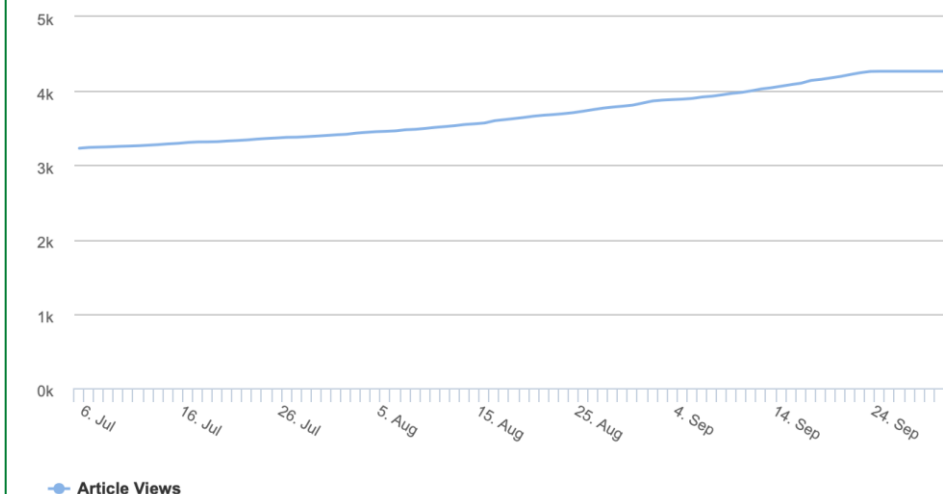
7

Google Scholar

[click to view]

Article Access Statistics

Article access statistics



► Paper available here →



- ▶ An extensive literature search was performed using the following MeSH terms on **PubMed, Scopus and Web of Science**:
 - ▶ “chondrotoxicity”, “intraarticular injection”, “corticosteroids”, “steroids”, “hyaluronate or hyaluronic acid”, “non-steroidal anti-inflammatory drug”, “anaesthetic”, “platelet rich plasma”, “collagen medical devices” and “bisphosphonates”.

Studies
were
included
if

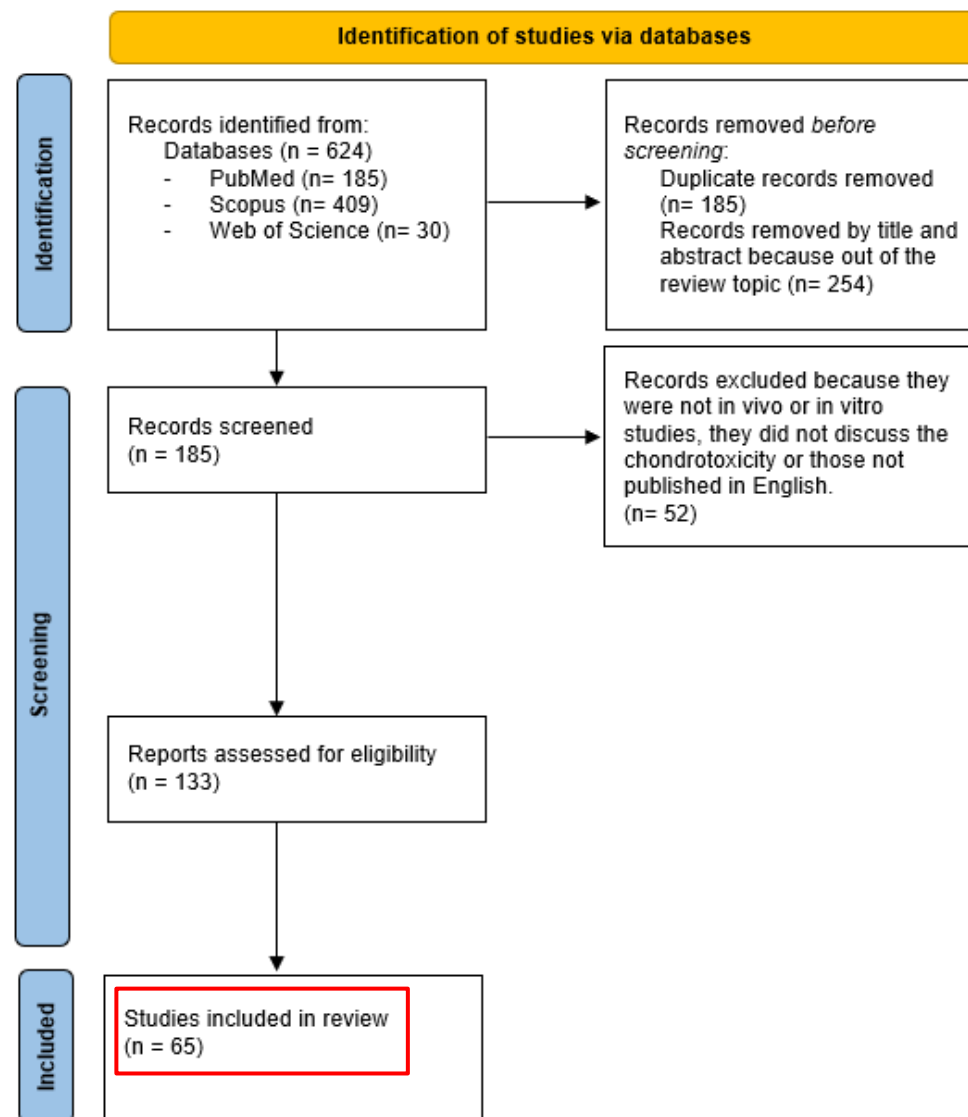
in vivo or in vitro

evaluated chondrotoxicity

published in English

RESULTS

Bucharest 2-4 October 2025



RESULTS

Bucharest 2-4 October 2025



In total
65 studies
were included in
the review

- Corticosteroids: 33
- Local Anesthetics: 18
- Nonsteroidal Anti-Inflammatory Drugs (NSAIDs): 5
- Hyaluronic Acid (HA): 7
- Platelet-Rich Plasma (PRP): 2

No paper was retrieved regarding collagen medical devices or bisphosphonates

RESULTS – Corticosteroids (n = 33)

Bucharest 2-4 October 2025



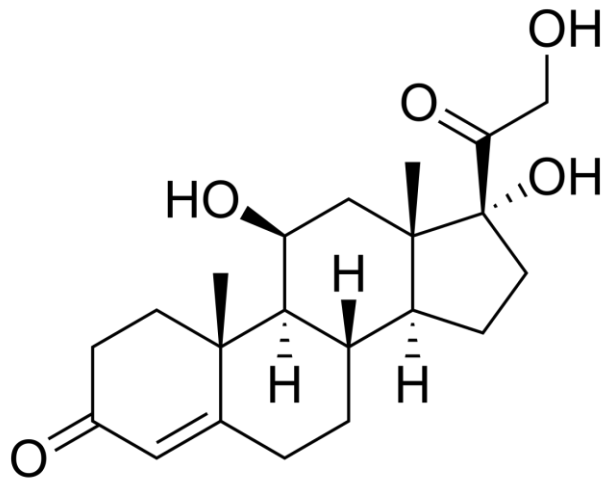
A total of 33 papers regarding corticosteroids were retrieved

14 on human subjects, 17 on animals, and 2 comparisons (humans and animals)

16 in vivo studies, 16 in vitro and 1 ex vivo

Explored drugs: Betamethasone, Methylprednisolone, Triamcinolone, Dexamethasone, Hydrocortisone

19 (58%) studies expressed evidence about corticosteroids' potential chondrotoxicity



RESULTS – Corticosteroids (n = 33)

Bucharest 2-4 October 2025



Corticosteroids are frequently used due to their anti-inflammatory effects

Dose- and frequency-dependent chondrotoxicity (except for triamcinolone)

Corticosteroids can improve functional outcomes and quality of life in painful conditions

Both in vitro and in vivo studies in humans and animals showed variable but concerning cartilage damage

RESULTS – Local Anaesthetics (n = 18)

Bucharest 2-4 October 2025

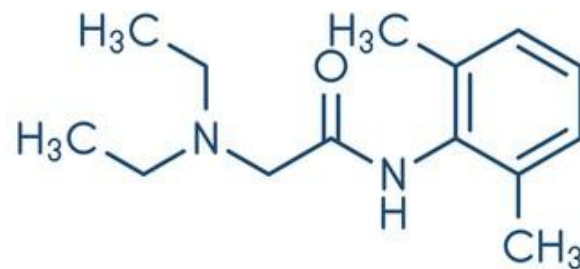


A total of 18 papers regarding local anaesthetics were retrieved

4 on human subjects, 14 on animals

6 in vivo studies, 12 in vitro

Explored drugs: Bupivacaine, Lidocaine, Ropivacaine, Mepivacaine



lidocaine

17 (95%) studies expressed evidence about local anaesthetics' potential chondrotoxicity

RESULTS – Local Anaesthetics (n = 18)

Bucharest 2-4 October 2025



Widely used to achieve analgesia (often combined with corticosteroids), crucial for the success of an IRP

Ropivacaine and liposomal formulations of bupivacaine appeared less toxic

Bupivacaine, lidocaine, and ropivacaine showed dose- and time-dependent chondrotoxicity

Vitamin C may mitigate chondrotoxic effects

Importance of limiting dose and frequency

RESULTS – NSAIDs (n = 5)

Bucharest 2-4 October 2025



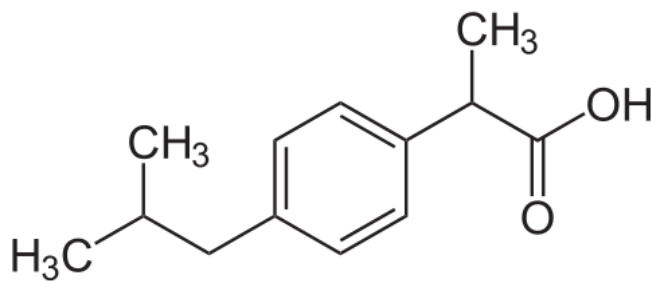
A total of 5 papers regarding NSAIDs were retrieved

3 on human subjects, 2 on animals

1 in vivo studies, 4 in vitro

Explored drugs: Dexketoprofen, Ketorolac, Naproxen, Ibuprofen, Aceclofenac, Diclofenac

4 (80%) studies expressed evidence about NSAIDs potential chondrotoxicity



RESULTS – NSAIDs (n = 5)

Bucharest 2-4 October 2025



Widely used in OA for oral administration to reduce pain and functional impairments

Limited and inconsistent data on chondrotoxicity

Ketorolac and Naproxen showed potential cartilage damage

IA injections not common - this route might reduce systemic side effects and increase local efficacy

Aceclofenac showed potential positive effects on glycosaminoglycan synthesis

Ibuprofen showed limited toxicity

RESULTS – Hyaluronic Acid (n = 7)

Bucharest 2-4 October 2025



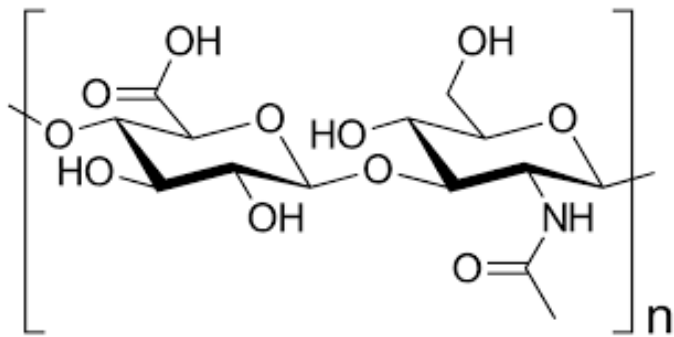
A total of 7 papers regarding Hyaluronic Acid were retrieved

2 on human subjects, 5 on animals

All the studies were conducted with in vitro models

Focused on assessing HA efficacy in reducing chondrotoxicity caused by other drugs (carprofen, corticosteroids and anaesthetics)

All the studies showed potential benefits by HA in reducing other compounds' chondrotoxicity



RESULTS – Hyaluronic Acid (n = 7)

Bucharest 2-4 October 2025



One of the most used compounds for IA injections in OA

HA promotes chondrocyte survival and function

HA appears safe and protective against the toxicity of other drugs

Only in vitro data about chondrotoxicity, limiting translation to real world scenario

RESULTS – PRP (n = 2)

Bucharest 2-4 October 2025



2 papers on PRP were retrieved, both on humans

Beitzel et al. (2013) showed increased cell proliferation and viability in tendon and cartilage after PRP

Limited evidence available, more research needed to clarify PRP effects (beneficial or harmful)

PRP may represent a therapeutic option with low chondrotoxicity risk

CONCLUSION

Bucharest 2-4 October 2025



- ▶ **Heterogeneity** in study protocols and methods **limits definitive conclusions**
- ▶ Chondrotoxicity seems influenced by **dose, frequency, and drug combinations**
- ▶ Corticosteroids (except triamcinolone), local anesthetics (except ropivacaine and liposomal forms), and some NSAIDs (ketorolac, naproxen) show higher risk profiles
- ▶ **HA and PRP show promise as safer options**, but more research needed in real world
- ▶ Standardized, larger studies are urgently needed



Bucharest 2-4 October 2025



Thank you for your attention!



Bucharest 2-4 October 2025



LinkedIn



Thank you for your attention!



Bucharest 2-4 October
2025

8th
International
Symposium
Intra
Articular
Treatment



Chondrotoxicity of intra-articular injection products

Nicola Manocchio¹, Alberto Migliore², Calogero Foti¹

1. Physical and Rehabilitation Medicine, Tor Vergata University, Rome, Italy

2. Unit of Rheumatology, Ospedale S. Pietro FBF, Rome, Italy

E-mail: nicola.manocchio@uniroma2.it