









IA use of NSAIDs: where we are

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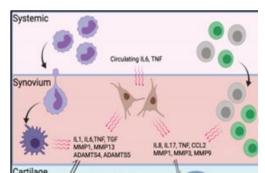
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Author has nothing to disclose



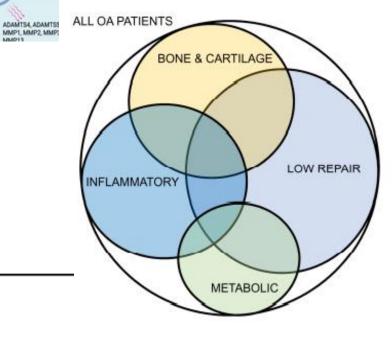


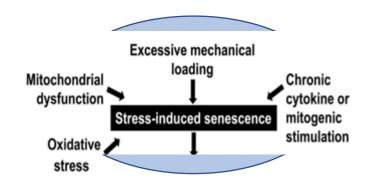












BONE & CARTILAGE

F1000Research 2020, 9(F1000 Faculty Rev):325

Adiponectin Adipocyte

Leptin

macrophage

Adipocyte, Chondrocyte

Chemerin Adipocyte, immune cell

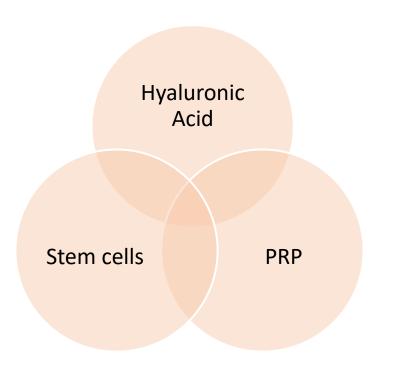


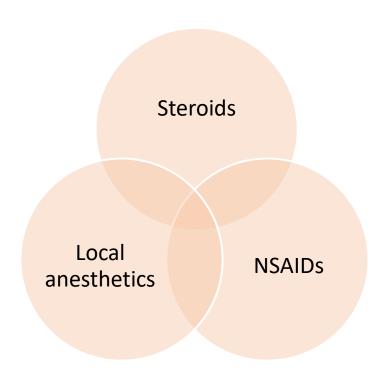




INJECTION THERAPY

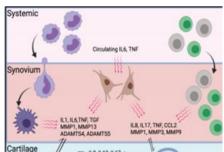
The most commonly used products for intra-articular injections are:







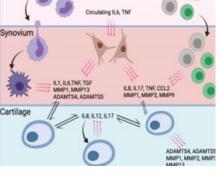


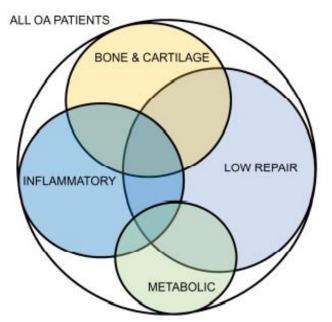












i. a. CS

i. a. NSAIDs?



NSAIDs in injection therapy







NSAIDs are anti-inflammatory drugs widely used in the treatment of musculoskeletal disorders. NSAIDs' mechanism of action is based on the inhibition of factors involved in the inflammatory cascade process, in particular the cyclooxygenase enzymes COX-1 and COX-2.

Anti-inflammatory NSAIDs' actions Analgesic

The most common administration route is oral, followed by intramuscular, **Mesotherapy** and **intravenous** administration.

Intra-articular administration, on the other hand, has been less successful and is currently the least used.







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MATERIALS AND METHODS

Currently, the **number of studies** evaluating the **efficacy of NSAIDs in injection** therapy and directly comparing their effects with other injectable therapies is still limited.

Our work focused on the review of such works in the scientific literature via PubMed.



SEARCH STRING:

(Injections OR intra- articular injection) and (NSAID OR Anti- Inflammatory Agents, Non-Steroidal OR Coxib OR Cyclooxygenase Inhibitors OR Cyclooxygenase 2 Inhibitors)

FILTERS: 5 years, humans











MATERIALS AND METHOD

Intra-articular injection therapy with NSAIDs: review of literature on major applications and clinical efficacy in musculoskeletal disorders.

Study Flow Chart

Identification

Records identified from PubMed (n = 1011) Records removed before screening:
Not in English (n= 49)







Screening

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Records screened (n = 962)

Records Excluded (n = 909):

Review/letter to the editor/Comment/trial proposal (n = 103)

Not Humans (n = 29)

Injection of other drugs (n = 60)

Orthopedic disorders not treated by injections (n = 112)

Arthritis not treated by injections (n = 44)

Non-musculoskeletal disorders

Nervous system (n = 53)

Genitourinary system (n = 45)

Gastrointestinal system (n = 27)

Visual system (n = 49)

Endocrine system (n = 9)

Respiratory system (n = 11)

Cardiovascular system (n = 43)

Autoimmune disorders (n = 11)

Dental disorders (n = 11)

Neonatal and pediatric diseases (n = 9)

Oncological diseases (n = 84)

Sars-CoV2 (n = 12)

Chinese Traditional Medicine (n = 11)

Dermatologic conditions (n = 32)

Pharmacology and drug trials (n = 145)

Surgery (n = 9)







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Screening

Included

Reports assessed for eligibility (n = 53)

Studies included in review (n = 12)

Reports Excluded after full text check

(n = **41**):

Review, letter to editors (n = 7)

Injection of other drugs (n = 8)

Orthopedic disorders not treated by

injections (n = 20)

Not humans (n = 3)

Other diseases (n = 3)











Kubo et al performed a randomised double-blind study on Diclofenac- hyaluronate compared to placebo in hip, ankle, shoulder and elbow osteoarthritis

❖ Koh et al compared the efficacy of intra-articular injections of hyaluronic acid associated with ketorolac, with that of HA alone, for osteoarthritis of the carpometacarpal joint of the thumb

Kubo T, Kumai T, Ikegami H, Kano K, Nishii M, Seo T. Diclofenac- hyaluronate conjugate (diclofenac etalhyaluronate) intra-articular injection for hip, ankle, shoulder, and elbow osteoarthritis: a randomized controlled trial. BMC Musculoskeletal Disord. 2022 Apr 20;23(1):371. doi:10.1186/s12891-022-05328-3.

Koh SH, Lee SC, Lee WY, Kim J, Park Y. Ultrasound-guided intra- articular injection of hyaluronic acid and ketorolac for osteoarthritis of the carpometacarpal joint of the thumb: A retrospective comparative study. Medicine (Baltimore). 2019 May;98(19):e15506. doi: 10.1097/MD.000000000015506.











❖ Nishida et al conducted randomized, double-blind, placebo-controlled phase II and phase III studies on the efficacy and safety of intra-articular injection of Diclofenac associated with Hyaluronic Acid in the conservative treatment of knee osteoarthritis

The same group subsequently recorded the results obtained with the combined Diclofenac + Hyaluronic Acid injection therapy in a **follow-up study after 1 year** in people who had received a total of 13 injections in the main joints: **knee, hip, ankle, shoulder and elbow**

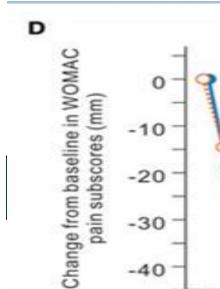
Nishida Y, Kano K, Nobuoka Y, Seo T. Efficacy and Safety of Diclofenac -Hyaluronate Conjugate (Diclofenac Etalhyaluronate) for Knee Osteoarthritis: A Randomized Phase III Trial in Japan. Arthritis Rheumatol . 2021 Sep;73(9):1646-1655. doi: 10.1002/art.41725. Epub 2021 Jul 27.

Nishida Y, Kano K, Nobuoka Y, Seo T. Sustained -release diclofenac conjugated to hyaluronate (diclofenac etalhyaluronate) for knee osteoarthritis: a randomized phase 2 study. Rheumatology (Oxford). 2021 Mar 2;60(3):1435-1444. doi: 10.1093/rheumatology/keaa605. PMID: 33006602;

Nishida Y, Kano K, Osato T, Seo T. Open-label phase 3 study of diclofenac conjugated to hyaluronate (diclofenac etalhyaluronate : ONO-5704/SI-613) for treatment of osteoarthritis : 1-year follow-up. BMC Musculoskeletal Disord . 2021 Mar 1;22(1):233. doi:10.1186/s12891-021-04108-9.







-10

-20

-30

-40

BL1 2







Placebo

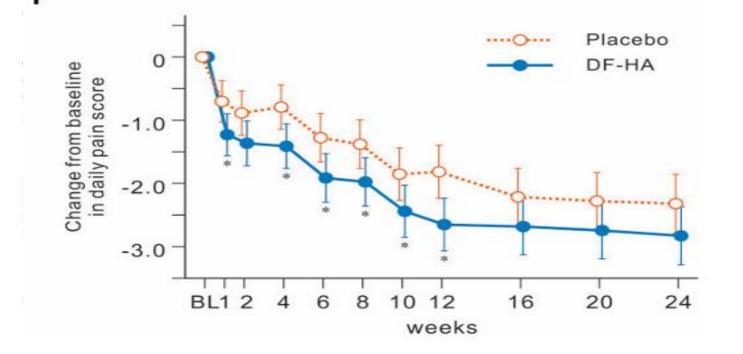
24

DF-HA

20

....

16



10

8

6

12

weeks

VAS











- Akhtar et al compared intra-articular injections with Ketorolac and Hyaluronic Acid on pain control in adhesive capsulitis of the shoulder
- injections associated with <u>lidocaine and epinephrine</u>
- Jurgensmeier et al evaluated the non-inferiority of intra-articular injections of Ketorolac compared to Triamcinolone in the treatment of hip and knee osteoarthritis
- in this case both drugs were associated with the administration of ropivacaine

Akhtar M, Nadeem RDA, Shah Gillani SF, Cheema OI, Nadeem MR. Comparison of intra articular NSAID (ketorolac) injection versus hyaluronic acid injection for the mean decrease of pain score (according to UCLA shoulder rating scale) in the management of adhesive capsulitis. Pak J Pharm Sci. 2019 May;32(3):953-956.

Jurgensmeier K, Jurgensmeier D, Kunz DE, Fuerst PG, Warth LC, Daines SB. Intra- articular Injections of the Hip and Knee With Triamcinolone vs Ketorolac: A Randomized Controlled Trial. J Arthroplasty . 2021 Feb;36(2):416-422. doi:10.1016/j.arth.2020.08.036. Epub 2020 Aug 22.













Yilmaz et al performed **comparing three groups** of patients **randomized** and treated, respectively, with intra-articular injection of the **knee**:

- 1. Tenoxicam
- 2. Corticosteroids
- 3. Tenoxicam + Corticosteroids

This study aimed to evaluate the efficacy of the drug combination compared to single therapy over a prolonged period of up to 6 months from the first injection

Yilmaz E. The evaluation of the effectiveness of intra-articular steroid, tenoxicam, and combined steroid-tenoxicam injections in the treatment of patients with knee osteoarthritis. Clin Rheumatol . 2019 Nov;38(11):3243-3252. doi:10.1007/s10067-019-04641-v. Epub 2019 Jun 26.





The evaluation of the effectiveness of intra-articular steroid, tenoxicam, and combined steroid–tenoxicam injections in the treatment of patients with knee osteoarthritis

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Variables	Group 1 $(n = 30)$	Group 2 $(n = 30)$	Group 3 $(n = 30)$	p
Age (year)	68.07 ± 8.08	65.83 ± 10.13	67.07 ± 6.01	N.S.
Sex				
Female	19 (63.3%)	22 (73.3%)	15 (50.0%)	N.S.
Male	11 (36.7%)	8 (26.7%)	15 (50.0%)	
Duration of symptoms (months)	51.03 ± 49.29	57.67 ± 61.69	50.80 ± 40.68	N.S.
Occupation				
Housewife	19 (63.3%)	21 (70.0%)	15 (50.0%)	N.S.
Farmer	7 (23.3%)	4 (13.3%)	5 (16.7%)	
Worker	1 (3.3%)	1 (3.3%)	5 (16.7%)	
Cook	1 (3.3%)	2 (6.7%)	0 (0.0%)	
Officer	1 (3.3%)	2 (6.7%)	4 (13.3%)	
Driver	1 (3.3%)	0 (0.0%)	1 (3.3%)	
Body mass index (BMI)	29.50 ± 5.56	29.06 ± 4.05	32.40 ± 5.79	N.S.
Affected side				
Right	3 (10.0%)	5 (16.7%)	3 (10.0%)	N.S.
Left	4 (13.3%)	1 (3.3%)	2 (6.7%)	
Bilateral	23 (76.7%)	24 (80.0%)	25 (83.3%)	
Kellgren-Lawrence scale				
Stage 1	17 (56.7%)	16 (53.3%)	17 (56.7%)	N.S.
Stage 2	13 (43.3%)	14 (46.7%)	13 (43.3%)	





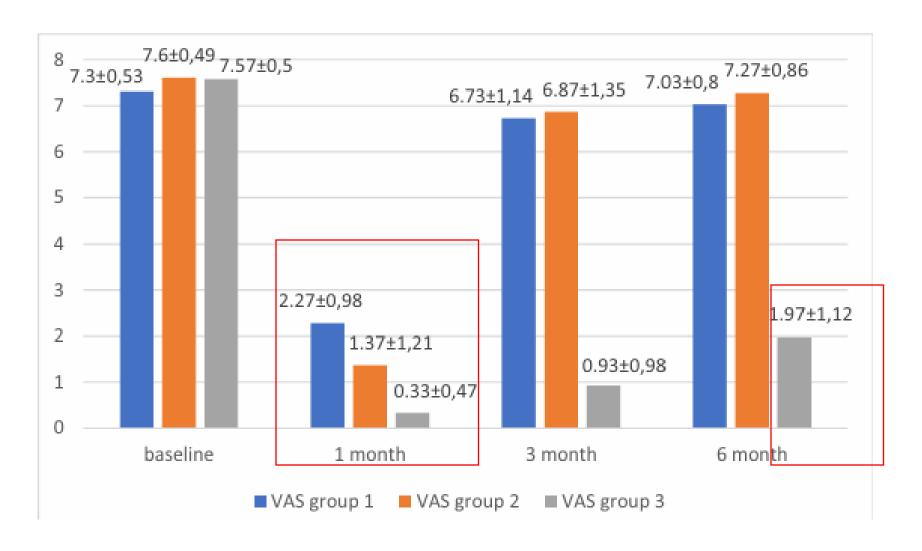
The evaluation of the effectiveness of intra-articular steroid, tenoxicam, and combined steroid–tenoxicam injections in the treatment of patients with knee osteoarthritis

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Ebru Yilmaz¹





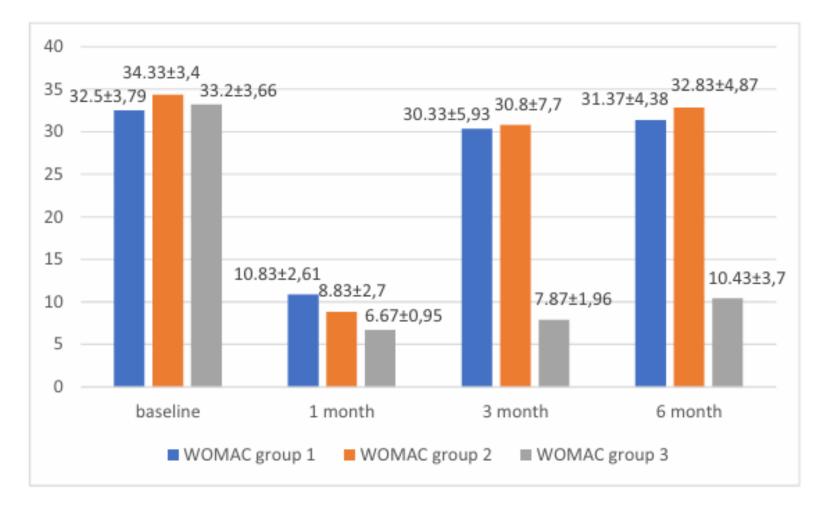


WOMAC



















* Yapici-Yavuz et al. compared intra-articular injection therapy with:

- a. Methylprednisolone acetate
- b. Sodium hyaluronate
- c. Tenoxicam

after arthrocentesis

in the treatment of non-reducible disc displacement in the temporomandibular joint

Yapici-Yavuz G, Şimşek -Kaya G, Oğul H. A comparison of the effects of Methylprednisolone Acetate, Sodium Hyaluronate and Tenoxicam in the treatment of non- reducing disc displacement of the temporomandibular joint. Med Oral Patol Oral Cir Bucal . 2018 May 1;23(3):e351-e358. doi:10.4317/medoral.22237.











- 2 studies evaluated intra-articular injections of NSAIDs after surgery, focused mainly on pain:
- 1) Khan et al compared **Ketorolac** with **placebo**, after outpatient **knee surgery** such as meniscectomy, diagnostic synovial biopsies, and removal of worn cartilage.
- 2) Sicard et al compared local injections of **ketoprofen associated with ropivacaine** with interscalene nerve block in the management of early postoperative pain **after shoulder arthroplasty**

Khan Niazi AS, Bajwa MA, Zahra M, Khan Niazi MU, Zainab I, Anwer A. Efficacy Of Intra- Articular Ketorolac And Lignocaine On Post-Operative Pain Relief After Arthroscopic Knee Surgery. J Ayub Med Coll Abbottabad . 2022 Apr-Jun;34(2):273-278. doi:10.55519/JAMC-02-8647.

Sicard J, Klouche S, Conso C, Billot N, Auregan JC, Poulain S, Lespagnol F, Solignac N, Bauer T, Ferrand M, Hardy P. Local infiltration analgesia versus interscalene nerve block for postoperative pain control after shoulder arthroplasty: a prospective, randomized, comparative noninferiority study involving 99 patients. J Shoulder Elbow Surg. 2019 Feb;28(2):212-219. doi: 10.1016/j.jse.2018.09.026. Epub 2018 Dec 10.







✓ The results obtained show that injection therapy with NSAIDs determines a **functional improvement** and an **analgesic effect non-inferior to corticosteroid** treatment in **hip and knee osteoarthritis** (Jurgensmeier et al).

✓ The association of an NSAID with a corticosteroid seems to give a more effective result, compared to the single therapies, both in terms of functional improvement and pain reduction in cases of grade 1 or 2 knee osteoarthritis (Yilmaz et al)











✓ The combination between NSAIDs and hyaluronic acid appeared effective, fast-acting and long-lasting in the conservative therapy of knee osteoarthritis (Nishida et al)



✓ Interestingly, in an **initial evaluation phase**, the injection of the **two combined products** appears to determine **more significant improvements** in the **hip and knee** joints than in the shoulder and elbow.



✓ NSAID + hyaluronic acid injection had a more rapid analgesic effect than single therapy with the administration of HA alone on carpometacarpal **joint** osteoarthritis (*Koh et al*)

✓ The direct comparison of the use of **NSAID** and **HA** injections on adhesive capsulitis of the shoulder showed equivalent efficacy of the two treatments on pain improvement, but NSAIDs appeared to have a more rapid effect (Akhtar et al)











Injection therapy with NSAIDs has also appeared effective in controlling postoperative pain after arthroscopic knee surgery, with a better outcome than the use of the anesthetic drug alone (Khan Niazi et al)

Promising results emerged also **NSADIs** injections compared on to **Methylprednisolone acetate** in the temporomandibular joint (*Yapici-Yavuz et al*)





Periarticular region





CONCLUSIONS

Randomized Controlled Trial > Clin Rheumatol. 2006 Feb;25(1):54-61.

doi: 10.1007/s10067-005-1136-3. Epub 2005 Oct 15.

Comparison of intra-articular tenoxicam and oral tenoxicam for pain and physical functioning in osteoarthritis of the knee

Zeliha Unlu 1, Kamuran Ay, Cigdem Tuzun

	Group 1, IATX $(n=23)$	Group 2, Oral TX $(n=26)$	Group 3, exercise $(n=20)$
fean age (years) odv mass index (ka/m²)	57.1 ± 10.2 (38–77) 30.7 ± 5.5 (21_47)	54.8 ± 9.1 (40–76)	
☐ Group 1(1 ☐ Group 2 (1) ☐ Group 3 (1)	oralTX)	Group 2 (ora Group 3 (Exe	
Knees without tenderness (%) 30-25-20-15-10-5-20-10-10-10-10-10-10-10-10-10-10-10-10-10		Knees without tenderness (%) 20 - 40 - 40 - 40 - 40 - 40 - 40 - 40 -	
		Baseline 1 month	
Baseline 1 mor		0 11 888 - 1888	3 month 6 m

"...There was **no significant** difference between the oral and intra-articular tenoxicam treatment regimens. The results of this study showed that **treatment of OA of the** knee with intra-articular tenoxicam is as effective as that with oral **tenoxicam**. It can be thought that intra-articular administration can be preferred to oral therapy due to minimal possibility of systemic side effects..."



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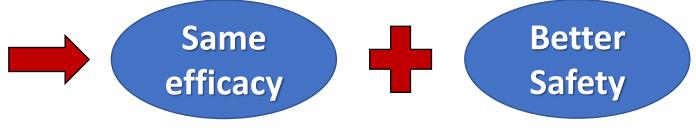


CONCLUSIONS

- ✓ Intra-articular injection therapy with NSAIDs appears as a potential alternative for achieving rapid-onset analgesic relief in both primary osteoarthritis and pain management after major joint surgery.
- ✓ NSAIDs could be associated with HA to potentially reduce chondrotoxicity and improve joint rheology and function
- ✓ NSAIDs injection therapy may reduce systemic side effects of oral treatment
- ✓ NSAIDs injection therapy emerged as **non-inferior to corticosteroid** treatment in **hip and knee osteoarthritis** (*Jurgensmeier et al*)

Could IA NSAIDs therapy?

- Inflammatory phenotype
- Not eligible to IA steroids













CONCLUSIONS



Future studies appear necessary to verify the efficacy and safety of intra-articular injection therapy with NSAIDs, also on larger population samples.

Greater standardization in research methods would allow for a higher level of evidence in the results.

The ultimate goal should remain the evaluation of the potential use of this treatment within the Individual Rehabilitation Project, aimed at functional recovery and improving the **QUALITY OF LIFE**









Thank you for your attention!









Linked in



Thank you for your attention!











IA use of NSAIDs: where we are

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