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HIP PRESERVATION AND REPLACEMENT
PEDIATRIC ORTHOPAEDICS
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Tenex Procedure with Stem Cell Injection for Gluteus Medius Tendinopathy

- What is the problem we're treating?
 - Hip abductor tendinopathy: This is usually a partial, degenerative tear of the tendons that attach to the greater trochanter (upper part of the femur bone on the side of the hip).
 - Scar tissue forms in the area, impeding healing of the tendon back to the bone.
 - Typical treatments include "cortisone" injections, physical therapy, stem cell injections and ultimately surgery.
- What is Tenex?
 - This is a minimally invasive, outpatient treatment, which uses a special needle, introduced under ultrasound ("sonogram") guidance precisely into the area of diseased tendon tissue.
 - Using a focused ultrasonic energy pulse at the tip of the needle, the non-healing tissue is removed, allowing healthy tissue to grow in its place.
 - This part of the procedure takes only about 2 minutes to complete.
- What else do we do?
 - In order to enhance the healing response, amniotic stem cells are injected into the area, again with precise ultrasound guidance.
 - Using a "bone pick", small holes are then made in the trochanter (top of the femur bone) at the area of tendon insertion, allowing your own bone marrow, which contains stem cells, to seep into the treated area. This also enhances the healing response.
- What can I expect from the treatment?
 - The entire procedure is done under light ("twilight") anesthesia and local ("numbing") injection at the needle site and is therefore nearly pain free.
 - After surgery you can expect some soreness on the side of your hip. Minimal pain medication or even just Tylenol and an anti-inflammatory (eg. Ibuprofen) might be necessary. Occasionally, something stronger, such as Tramadol may be necessary.
 - Postoperatively, patients may weight bear on the affected leg as tolerated, but are asked to use a walker or crutches for protected weight bearing on the affected side until pain subsides.
 - You may change your dressing and shower after 72 hours and apply a square Band-Aid to the area.
 - Your wound will be inspected in clinic by the doctor or nurse practitioner at around the 7-10 day mark. Two small, absorbable sutures are placed at the time of the procedure. These usually fall out at about 2 weeks.
 - Healing time is around 6-8 weeks, but some patients report nearly immediate pain relief
 - Physical therapy is instituted at the time of your first post op visit (10 days) and continues for 2-3 times per week for 6 weeks. It is considered to be an essential part of the procedure and is necessary for a positive outcome.
- What if the procedure doesn't work?
 - Occasionally the amount of tendon damage may be too extensive, and the procedure may only provide temporary relief. The good news is that it does not burn any bridges and you may still be an excellent candidate for endoscopic or open tendon repair.

NOTE: *If you experience redness, purulent drainage, excessive pain at the incision site or fever (Temperature >99.9 deg F) please call the office and inform our staff. If you experience shortness of breath or chest pain, please call 911 or report immediately to your nearest ER.*

More information on Tenex can be found on their website: <https://tenexhealth.com>

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