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Bone substitutes and growth factors in the treatment of simple bone cysts: literature analysis and clinical experience

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INTRODUCTION: The solitary bone cyst is a tumor like lesion typical of the immature skeleton whose etiology and

pathogenesis is unclear. Treatment depends on symptoms if they are present, the presence of a fracture, the size, the

location and the presence of cysts in an active phase.

OBJECTIVES: The literature shows many treatment options, often conflicting with each others. The purpose of this study is to perform a literature review focusing on the possible role of platelet gel to heal the lesion.

METHODS: The injection of substances such as methylprednisolone, autologous bone marrow, demineralized bone

matrix and calcium sulfate are the most used, but due to the high failure rate, often we use more aggressive surgical

techniques such as curettage, resection, associated with bone graft and, possibly, the intramedullary nailing.

RESULTS: We report two cases of lesions not responsive to injections of steroids treated with curettage and bone

marrow, platelet gel and bone substitutes.

CONCLUSION: In the bone cysts non responsive to minimally invasive treatment, curettage associated with platelet gel and bone substitutes represent a valid therapeutic option.

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