

LETTER TO THE EDITOR

Comment on: A Prospective Study Assessing Functional Outcomes of Arthroscopic Subacromial Decompression with Platelet-Rich Plasma Augmentation in Shoulder Impingement Syndrome



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Dear editor,

We read with great interest the article by Kumar *et al*, “A Prospective Study Assessing Functional Outcomes of Arthroscopic Subacromial Decompression with Platelet-Rich Plasma Augmentation in Shoulder Impingement Syndrome” published in the Malaysian Orthopaedic Journal (2025; 19: 114-121). The authors are to be commended for presenting prospective data evaluating biologic augmentation in the management of shoulder impingement syndrome (SIS).

However, the clinical context of arthroscopic subacromial decompression (ASD) itself warrants careful consideration when interpreting these findings. High-level evidence from randomised, placebo-controlled surgical trials has repeatedly demonstrated that ASD provides no clinically meaningful benefit over placebo (diagnostic arthroscopy) or structured non-operative care in patients with subacromial pain.

The CSAW (Can Shoulder Arthroscopy Work) Trial, a multicentre randomised controlled study, found no significant advantage of ASD over arthroscopy alone at 6- and 12-month follow-up¹. Similarly, the Finnish Subacromial Impingement Arthroscopy Controlled Trial (FIMPACT) demonstrated that ASD did not result in superior outcomes in pain or function compared with diagnostic arthroscopy or exercise therapy, including in long-term follow-up analyses². Subsequent systematic reviews and meta-analyses have reinforced these findings, concluding that there is high-certainty evidence that subacromial decompression does not confer clinically important improvements compared with placebo surgery or physiotherapy^{3,4}.

In light of this body of evidence, the improvements observed following ASD combined with platelet-rich plasma (PRP) augmentation must be interpreted with caution. If the index

surgical procedure itself does not demonstrate superiority over placebo or structured rehabilitation, attributing incremental benefit to biologic augmentation becomes methodologically challenging in the absence of a comparator arm. Observed clinical gains may reflect the natural history of the condition, structured postoperative rehabilitation, or placebo-related effects rather than a specific biologic synergy.

We believe that future investigations evaluating PRP augmentation in SIS would benefit from randomised comparative designs capable of isolating the independent contribution of biologic therapy. Such studies would more clearly define whether PRP meaningfully alters outcomes beyond those achievable with non-operative management or placebo-controlled surgical interventions.

We congratulate the authors on their contribution to this important area of shoulder research and appreciate the opportunity for scholarly discussion.

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REFERENCES

1. Beard DJ, Rees JL, Cook JA, Rombach I, Cooper C, et al. Arthroscopic subacromial decompression for subacromial shoulder pain (CSAW): a multicentre, pragmatic, parallel group, placebo-controlled, three-group, randomised surgical trial. *Lancet*. 2018; 391(10118): 329-38. doi: 10.1016/S0140-6736(17)32457-1

2. Paavola M, Malmivaara A, Taimela S, Kanto K, Inkinen J, Kalske J, *et al.* Subacromial decompression versus diagnostic arthroscopy for shoulder impingement: randomised, placebo surgery controlled clinical trial. *BMJ*. 2018; 362: k2860. doi: 10.1136/bmj.k2860
3. Paavola M, Kanto K, Ranstam J, Malmivaara A, Inkinen J, Kalske J, *et al.* Subacromial decompression versus diagnostic arthroscopy for shoulder impingement: a 5-year follow-up of a randomised, placebo surgery controlled clinical trial. *Br J Sports Med*. 2021; 55(2): 99-107. doi: 10.1136/bjsports-2020-102216
4. Lähdeoja T, Karjalainen T, Jokihaara J, Salamh P, Kavaja L, Agarwal A, *et al.* Subacromial decompression surgery for adults with shoulder pain: a systematic review with meta-analysis. *Br J Sports Med*. 2020; 54(11): 665-73. doi: 10.1136/bjsports-2018-100486

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