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Editorial

The Use of Blood-Derived Growth Factors: Sales x Research

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We have observed a growing study of second-generation platelet concentrates, being a race not only for science, but partly for mercantilism.

Many companies investing in the production of centrifuges and tubes for blood collection of different constitutions.

This question leads to different uses of these blood by-products and leaves the research aside, because instead of investing in knowing more about these blood-derived growth factors (GFs), they want to dispute that they can raise more.

Different questions have yet to be answered, as there is so much to research. These second-generation platelet concentrates may be the key to the success of a surgical procedure, when indicated. However, it may not have a positive impact on the site operated.

Questions regarding the production of these growth factors and the quantity offered in each platelet concentrate are important, so how will the amount of GFs offered by each, even if different, influence the final result of the procedure?

Will the external polymerization time (time in the blood collection tube before implantation) influence the quality of the fibrin mesh (before the degradation of the mesh) and in the GFs that will be released later?

We know that the potential exists and to date, there are no limits to its use in Implant Dentistry and Oral and Maxillofacial Surgery.

However, further *in vitro* and mainly clinical trials (randomized, double-blind, split-mouth) are needed to provide an accurate response on the indications for the use of blood-derived growth factors through the Fibrin that carries it.

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