

Knee and Hip Osteoarthritis

Osteoarthritis is the most common type of arthritis affecting over 1.8 million people in Australia. People with hip and knee osteoarthritis often aren't given much hope of improving their symptoms but we know that there are effective treatments that can help a lot of people.

Symptoms of hip or knee osteoarthritis can include:

Pain and/or stiffness in and around the joint with the following:

- walking, standing and stair climbing.
- getting moving in the morning.
- trying to move a joint toward its end of range.

What is osteoarthritis:

Osteoarthritis is characterised by changes such as damage to joint cartilage, bony spurs around the edge of a joint and deterioration of ligaments and tendons (connective tissue).

What causes knee or hip osteoarthritis?

Osteoarthritis has long been considered a 'wear and tear' disorder but this isn't as accurate as we may have thought. Elite athletes in impact sports have a greater chance of developing hip or knee osteoarthritis but it doesn't necessarily cause it; many athletes still don't develop osteoarthritis any quicker than the rest of the population. Despite this, people that exercise and aren't elite sportspeople actually have a reduced likelihood of developing arthritis. It's not known whether the body learns to adapt to the load associated with recreational exercise or whether it is the more general beneficial effects of exercise that have a preventative effect. Another factor consistently shown to put people at a higher risk of hip and knee osteoarthritis is obesity. It is believed that the combination of increased weight as well as inflammation in the body can put the person at greater risk of hip or knee osteoarthritis.

What do I do if I have knee or hip osteoarthritis?

People often report they have stopped their exercises and activity due to joint pain, but sometimes that isn't the best thing to do. We know that recreational exercise can reduce the likelihood of arthritis and being overweight or obese consistently shows an increased rate of hip and knee osteoarthritis. Arthritis Australia makes a very good point – "Who should Exercise?" "Everyone with or without arthritis should be doing regular, appropriate exercise. The important thing is to choose the activities that best suit your condition, health and lifestyle." Increasing leg strength and decreasing weight have consistently been shown to improve the symptoms of hip and knee osteoarthritis. A recent program in Denmark has shown that education as well as regular exercise focused on strength and control significantly improved symptoms. The good news is, by reading this, you've already started the education part!

People can find it difficult to know what appropriate exercise is and how much is needed. It's important that you feel empowered to exercise and can be re-assured that you aren't doing any further damage. Physiotherapists and Exercise Physiologists are trained to help you find a way to exercise that works for you. There may be extra benefit from doing exercises that improve the control of your leg and also developing strength in your thigh muscles.

Other treatments such as dry needling or acupuncture, massage, ultrasound and electrotherapy may help pain in the short term, but unfortunately don't often help in the long term. Some people get benefit from injections into the knee (mostly corticosteroid) but it's hard to know who will benefit and there is a risk that it may speed the loss of cartilage in the joint. There have been recent trials with substances like stem cells, but so far there is little evidence to support their use. Cells only make up 2% of the cartilage in joints and researchers haven't found a way to make the other 98% of cartilage structure.

The final stage, if other treatments have not been effective, is to consider a joint replacement. If you are considering a joint replacement, your doctor can refer you to an orthopaedic surgeon. The fitter, stronger and healthier you are before a joint replacement, the better your outcome is likely to be. That's one reason why surgeons are increasingly getting their patients to participate in rehabilitation before getting a joint replacement, and we call that 'pre-hab'.

So, whether it be symptom reduction, improvement in exercise tolerance or pre-hab that you require, come in to get a customised program to get your hips and knees feeling better and moving better.

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