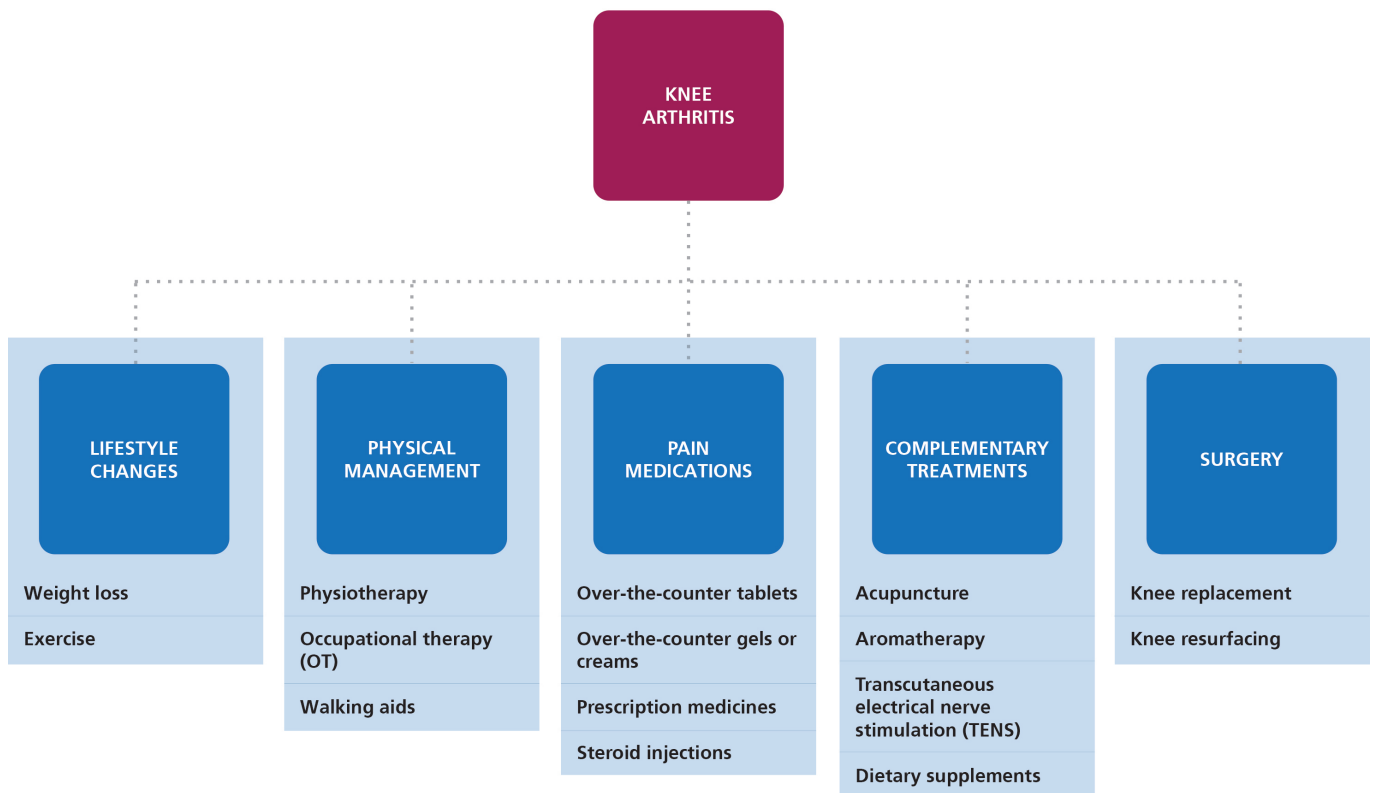


Deciding what to do about osteoarthritis of the knee

This short decision aid is to help you decide what to do about your knee osteoarthritis. You can use it on your own, or with your doctor, to help you make a decision about what's right for you at this time.

There are five main choices if you have osteoarthritis of the knee. You can choose:

- **Lifestyle changes.** This means losing weight if needed and taking more exercise.
- **Physical management.** This means having physiotherapy and occupational therapy. It may include using walking aids like canes or special insoles.
- **Treatments to manage pain,** including tablets you take by mouth, injections into the joint and self-help support.
- **Complementary therapies,** including TENS, acupuncture, and the nutritional supplements chondroitin and glucosamine.
- **Surgery,** including total or partial knee replacement, arthroscopy and osteotomy. Surgery is usually for people with severe symptoms who have tried other treatments first.



What are my options?

| Treatment | What is the treatment? |
|----------------------------------|---|
| Lifestyle changes | These are changes that you can make yourself that may help improve your symptoms. The main changes are losing weight (if you are overweight) and taking more regular exercise. |
| Complementary therapies | There are many different types of complementary therapy, including acupuncture, aromatherapy, transcutaneous electrical nerve stimulation (TENS), and the dietary supplements glucosamine and chondroitin. |
| Treatments to manage pain | There are two main types of treatment to manage pain: medication and self-help. Pain medications are drug treatments designed to offer pain relief. Some can be bought from a pharmacy without a prescription, while others need to be prescribed by a doctor. Self-help support programmes use talking therapies such as cognitive behavioural therapy (CBT). These programmes can help people feel more in control of their arthritis. |
| Surgery | <p>During a knee replacement operation, the surgeon removes the rough, damaged surfaces of the knee joint and replaces them with new, smoother surfaces made from metal and plastic. A partial knee replacement or partial knee resurfacing resurfaces only the inner or outer half of your knee.</p> <p>Arthroscopy can be used to examine and treat the inside of the knee joint. A thin tube with a camera is put through a cut in your knee to examine the joint. Fluid can be flushed through the joint to wash it out (arthroscopic lavage). Small surgical instruments can remove damaged tissue at the same time (debridement).</p> |
| Physical management | Physical management covers three main areas of treatment. Physiotherapy includes manual therapy and advice on exercise and self-management strategies. Occupational therapy includes advice on dealing with difficulties in your daily routine caused by your arthritis. Mobility aids may include walking aids, special footwear, or shoe inserts. |

| Treatment | What is the effect on pain? |
|----------------------------------|--|
| Lifestyle changes | Taking regular exercise can reduce pain for some people with knee arthritis although the effect may be small.[1] Losing weight may help reduce pain if you are overweight.[2] |
| Complementary therapies | We don't know whether most forms of complementary treatments help with pain. Acupuncture may help some people.[9] Glucosamine sulphate may also help relieve pain.[10] |
| Treatments to manage pain | There are many types of medicine that can reduce the pain of osteoarthritis. However, medication does not work for everyone. Pain medications, such as paracetamol and NSAIDs, can help reduce pain for most people. The amount of pain relief varies according to the type of medicine and the dose. [6] [7] Steroid injections reduce pain but the effects only last about four weeks. [8] Self-help support programmes, such as cognitive behavioural therapy (CBT) may help you to manage pain better. |
| Surgery | <p>Most people find their pain is much better after knee replacement. But it may not get rid of your symptoms altogether.</p> <p>Arthroscopy to wash out the joint and remove damaged tissue doesn't make much difference to pain.[11] [12]</p> |
| Physical management | Physical management can improve your pain. We know that strengthening exercises for your knee, wearing special shoe inserts, taping up the knee, and wearing a knee brace all help improve knee pain. [3][4][5] |

| Treatment | What is the effect on how easily you can get around? |
|----------------------------------|---|
| Lifestyle changes | You may be able to walk further and faster, climb stairs more easily, and move your joint more freely.[13] |
| Complementary therapies | We don't know if the different types of complementary treatments such as acupuncture and nutritional supplements help you get around more easily. |
| Treatments to manage pain | Some pain medicines, including NSAIDs, reduce inflammation and may make it easier for you to move your knee joint.[17] Self-help support programmes may help you keep more active. |
| Surgery | <p>Most people find they can get around much better after a knee replacement, once they have recovered from the operation. The replacement knee has some limitations in range of movement. For example, kneeling may be difficult, and the knee may not bend as far as it did before surgery.[18][19]</p> <p>Arthroscopy to wash out the knee joint and remove damaged tissue doesn't seem to have any effect on ability to get around.[20][21]</p> |
| Physical management | A course of physical management may help you walk further and faster.[14] We know that knee exercises to strengthen the joint and wearing a knee brace can help you walk further.[15][16] |

| Treatment | What is the effect on whether your knee arthritis gets worse? |
|----------------------------------|---|
| Lifestyle changes | If you are overweight, losing some of this excess weight will help relieve some of the strain on your joints. This can help avoid further damage to the knee.[22] Taking regular exercise may also protect your knee arthritis from getting worse.[23] |
| Complementary therapies | Complementary treatments such as acupuncture and nutritional supplements are not likely to slow or stop arthritis from getting worse. |
| Treatments to manage pain | NSAIDs and corticosteroid treatment will not stop your arthritis from worsening.[24] Effective pain management may stop your pain from getting worse. |
| Surgery | <p>Knee replacement replaces the damaged joint surface. This removes the part of the joint affected. The new joint will age and may eventually need to be replaced.</p> <p>Arthroscopy to wash out the knee joint and remove damaged tissue doesn't stop your arthritis from getting worse.[25]</p> |
| Physical management | Physical therapy does not prevent arthritis from getting worse. But exercises that strengthen the muscle around the knee may protect the joint from damage. |

| Treatment | What side effects or complications does this treatment have? |
|----------------------------------|---|
| Lifestyle changes | Generally, taking enough exercise and eating a healthy diet is safe. |
| Complementary therapies | Complementary treatments such as acupuncture and nutritional supplements can have side effects. Herbal medicines may react badly with other medicines. Acupuncture can cause infections if the needles used are not sterile. |
| Treatments to manage pain | Pain medicines can cause side effects. NSAIDs carry a risk of stomach bleeds.[26] Opioid painkillers can cause constipation. Some people who take opioid painkillers for a long time become dependent on them. This means they get withdrawal symptoms when they try to stop taking them.[27] |
| Surgery | <p>Knee replacement and other surgery can cause bleeding and infection. Some people have a bad reaction to anaesthetics. Between 2 in 100 and 10 in 100 people who have a knee replacement get a blood clot in the leg.[28] Most people take medicines to prevent blood clots.</p> <p>The risk is probably smaller after arthroscopy.[29]</p> |
| Physical management | These are safe treatments with few risks. Physiotherapy exercises may hurt at first. Some people find knee braces uncomfortable. |

What are the pros and cons of each option?

People with knee osteoarthritis have different experiences about the health problem and views on treatment. Choosing the treatment option that is best for the patient means considering how the consequences of each treatment option will affect their life.

Here are some questions people may want to consider about treatment for osteoarthritis of the knee:

- Do they find the pain from their knee intolerable?
- Do they want to be able to do more everyday things than they can at present?
- Are they willing to spend time in hospital, or having treatment?
- Are they willing to take the risk of side effects or complications from treatment?
- Are they willing to take treatments that involve a frequent time commitment?

How do I get support to help me make a decision that is right for me?

Go to <http://sdm.rightcare.nhs.uk/pda/osteoarthritis-of-the-knee/> for more detailed information about treatments for **Osteoarthritis of the Knee**. People using this type of information say they understand the health problem and treatment choices more clearly, and why one treatment is better for them than another. They also say they can talk more confidently about their reasons for liking or not liking an option with health professionals, friends and family.

References

References can be viewed online at <http://sdm.rightcare.nhs.uk/pda/osteoarthritis-of-the-knee/references/>