



PHYSIOTHERAPY WORKS THE EVIDENCE

ARTHRITIS

Physiotherapy can help relieve the pain and suffering caused by arthritis, one of the leading causes of disability in New Zealand.

About arthritis

The term arthritis covers a range of conditions the two most common being:

1. Rheumatoid arthritis: an inflammatory condition affecting the entire body which can occur at any age.
2. Osteoarthritis: caused by a breakdown of joint cartilage and generally a consequence of aging.

Who is at risk?

Osteoarthritis is the most common form of arthritis affecting nearly half of people aged 60 and nearly everyone over the age of 80, although the degree of disability in regard to pain, activity limitations and decreased quality of life varies enormously. It most commonly affects the knee and hip joints, and the spine.

The main risk factors for osteoarthritis are:

- Age
- Previous joint injury
- Obesity

Physiotherapy is a cost effective intervention that empowers people to take control of their arthritis and consequently their lives.

Leading cause of disability

Arthritis is a considerable cost to society, economically and socially and a leading cause of disability¹. In the 2013 Ministry of Health report on health loss in New Zealand Musculoskeletal diseases were ranked 4th for Disability Adjusted Life Years².

How physiotherapy can help

Physiotherapy has an important role in helping you manage your arthritis. It does not carry the risks often associated with taking medication especially over an extended period of time, or surgery.

A physiotherapist can:

- Maintain strength, mobility and independence with evidence-based exercise programmes
- Run tailored exercise programmes for individuals or in community setting.
- Discuss the most appropriate exercise options for you – these may include walking, cycling or swimming
- Provide any walking aids needed to help improve your mobility
- Liaise with other health professionals

The evidence

The overwhelming recommendation from all the international guidelines on the treatment of arthritis is that therapeutic exercise delivered by physiotherapists should always be the first line management tool and this recommendation is supported by best practice guidelines^{3,4,5}.

Physiotherapy as a cost saving

Two recent studies examined the value and cost effectiveness of physiotherapy for osteoarthritis of the hip and knee (Abbott et al 2013, Pinto et al 2013)^{6,7}. They concluded manual therapy and exercise therapy provided benefits over usual care – although there was no added benefit if the interventions were combined.

The economic evaluation again found both interventions were cost effective compared to usual care in respect of willingness to pay from the perspective of the health system and society.



A case study

In Timaru there is a new service run with pilot DHB funding where patients with a diagnosis of osteoarthritis are automatically referred to a physiotherapy clinic for an exercise and education programme. Results from the first group of people going through the programme show significant improvement using the standard, evidence-based outcome measure for arthritis the WOMAC, plus a decrease in falls risk and an increase in walking speed all indicating marked improvement in function.

Conclusion

Everyone with a diagnosis of arthritis should be given a referral to physiotherapy as recommended in all international guidelines.

Physiotherapy can help relieve the pain and suffering of arthritis,

enable people to maintain (or improve) their level of mobility and increase their participation in society.

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References

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