

# Expert Consensus

## KNEE OSTEOARTHRITIS – ACTIVE KNEE OA PATIENT

Management of Knee OA is a multi-disciplinary task where positive self-motivation of the patient is foundation for successful outcomes. Beside pharmaceutical treatment options, physical activity, body weight management, exercise, biomechanical interventions (such as insoles) and Unloader braces are recommended by guidelines for knee OA management and recent meta-analysis<sup>1,2,3,4</sup>.

Patient's expectations and professional medical expertise should match each other to create clear and realistic treatment objectives.



As there are no clear recommendations on how to address treatment objectives addressing patient's expectations available, Össur conducted a global consensus meeting with experienced medical professionals such as physiotherapists, general practitioners, rheumatologists and orthopedic surgeons to develop recommendations on knee OA management for three treatment objectives:

- Preserve cartilage – keep moderate-to-high activity level
- Reduce pain, preserve cartilage and improve activity level
- Reduce pain, keep activity level

In preparation for the 1.5-day "Face-to-Face" Meeting in London, standardized questionnaires were sent out to participants and speakers to capture their current treatment strategies. Evaluation of the questionnaires served as basis for the discussion in the workshops of the expert meeting. The outcome of the meeting was consented in one Delphi round following the meeting.

The outcomes of the individual workshops achieved are clear recommendations for diagnosis, conservative (core treatment, biomechanical, pharmaceutical and alternative treatment options) and surgical treatment options.

**Patient characteristics:** Active lifestyle although moderate impact on activities of daily life due to knee OA

**Treatment objective:** Maintain cartilage and high activity level

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Diagnosis	Acute Phase Week 0–6	Subacute Phase: Week 7–12		Ongoing Phase Week >13	Comments
		Responder	Non-Responder		
X-ray: Long leg standing	X				
Patient's history	X	X	X	X	
Physical exam	X	X	X	X	
Ultrasound			X		
MRI			X		Consider acute phase if mechanical symptoms
Psychosocial factors	X	X	X	X	
Sport-specific performance test		X		X	
Functional biomechanical test		X		X	
Diagnostic arthroscopy			X	X	Mechanical symptoms persist
<b>Core Treatment</b>					
Self-management and education	X	X	X	X	
Water-based exercises	X	X	X	X	
Strength training	X pst	X	X	X	
Land-based exercises	X	X	X	X	
Weight management	X	X	X	X	

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Diagnosis	Acute Phase Week 0–6	Subacute Phase: Week 7–12		Ongoing Phase Week >13	Comments
		Responder	Non-Responder		
<b>Biomechanical Intervention</b>					
Unloader brace	X BT	X	X	X	
Insoles	X	X	X	X	If indicated, biomech deviations
Sport equipment advice e.g. footwear/surfaces	X begin conversation	X		X	
Dynamic taping			X	X	
Gait strategies		X	X	X	
Neuromuscular control		X	X	X	
<b>Pharmaceutical Treatment</b>					
NSAIDs oral/topical	X				
Paracetamol	X				
IA steroids			X		
<b>DMOADs</b>					
HA			X	X	
PRP			X	X	
<b>Other Conservative Treatment</b>					
Physiotherapeutic modalities	X	X	X	X	
RICE/Cryotherapy	X				
Psychological support	X		X	X	
<b>Surgical Treatment</b>					
Arthroscopy					Mechanical symptoms KL 2/3
Osteotomy/realignment					With evidence of mechanical overload and after failure of other non-operative treatments



Unloader One® braces from Össur are the best examined unloading knee braces and clinically proven to reduce pain and improve quality of life<sup>5,6</sup>.

The Dynamic Force Straps with SmartDosing™ dials allow patients to control the amount of unloading and take an active part of their

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