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# EVIDENCE-BASED PAIN RELIEF FOR OSTEOARTHRITIS

**Roos E**

University of Southern Denmark, Copenhagen, Denmark

Osteoarthritis ranks as the number 11 contributor to global burden of disease out of the 291 diseases evaluated by the World Health Organization.
0Every third at working age is affected by osteoarthritis.
Reduced function from osteoarthritis in knee or hip is associated with a similar increase in risk of heart disease as diabetes.
Osteoarthritis will increase with the demographic changes ahead, and so will societal costs related to knee and hip osteoarthritis. It is estimated that about 12% of all osteoarthritis is cased by a previous trauma to the joint.
Traditionally, treatment of osteoarthritis has been confined to replacing the joint once worn out.
Research findings from the last 20 years have however provided new insights into the disease as such, risk factors and treatment options. As a result, osteoarthritis can be prevented and, once present, treated successfully some 10-20 years earlier during the disease course.
International evidence-based guidelines recommend patient education, exercise and weight loss, if needed, as first treatment option.
Twelve sessions of supervised exercise are 2-3 times more effective pain relief than full dose of paracetamol or NSAIDs.
Exercise types of interest for the osteoarthritis patient include neuromuscular exercise, strength training and aerobic exercise.
20-40% pain relief can be expected in combination with similar improvements in physical function. This improvement is enough for 1 out of 3 to quit taking painkillers and for some to postpone or no longer wish for surgery.
In Sweden and Denmark, early treatment for osteoarthritis has been implemented at a large scale. In Sweden more than 25,000 patients have had patient education since 2008, some in combination with exercise. In Denmark, close to 3,000 patients have had patient education and exercise since 2013, and numbers are rising quickly.
More than 200 physical therapists nationwide have been trained to deliver the program. While the Swedish model is funded by the health care system, in Denmark the treating physiotherapists and patients pay out of pocket.
Both implementation models are very successful with more than 95% of patients being satisfied.