

Osteoarthritis of the Knee



Treatments for osteoarthritis of the knee can help reduce pain. They can also help you stay active. Most people can find a treatment plan that works for them. A combination of treatments often works best.

This guide can help you learn about options. It can help you come up with a treatment plan that works for you. This guide covers ways to help you feel better. It also covers research about treatments that usually don't help.

Treatments That Can Help

Getting active and staying at a healthy weight are important for everyone with osteoarthritis of the knee. Some people also may need to take pain medicine to help lower pain and keep them moving.

Fast Facts

- There is no cure for osteoarthritis.
- Staying active and losing weight are ways to help you feel better.
- Some people need to take pain medicine to stay active and control the pain.



Getting Active

Exercise is a great way to improve your health. Some people think that exercise is not good for osteoarthritis but it is. Being more active and staying active can help you have less pain and move more easily. Walking, swimming, and water aerobics are good choices for people with osteoarthritis. Talk with your doctor or nurse about making an exercise plan that works for you. Your doctor may also recommend physical therapy. Physical therapy is a special exercise program done with a trained physiotherapist. The exercises help you move and be flexible. They can also help reduce knee pain.

Getting to a Healthy Weight

Losing weight can help take the stress off your knees. Each kilo lost will help. Staying at a healthy weight can help keep you more active and moving.

Pain Medicine

Medicines can help relieve the pain of knee osteoarthritis. Some people need to take pain medicine to stay active. There are pain medicines that work for osteoarthritis. Your doctor or nurse may recommend over-the counter or prescription drugs.

Treatments That Usually Do Not Help

This information comes from a government-funded review of research about three treatments for osteoarthritis of the knee. Research shows that these treatments often do not help people who have knee osteoarthritis.



Fast Facts

- Glucosamine and chondroitin usually do not reduce pain or improve knee movement.
- Joint lubricant injections (not the same as cortisone shots) usually do not reduce pain or improve knee movement.
- Arthroscopic knee surgery usually does not reduce pain or improve knee movement.





Glucosamine and Chondroitin

Glucosamine and chondroitin are nutritional supplements. People take them to help build new cartilage. Glucosamine and chondroitin are not regulated as drugs in Australia, so their quality may vary. Minor side effects include upset stomach, diarrhea, and headache. Research studies tell us that more than half the people with osteoarthritis taking glucosamine and chondroitin improve. They have less pain and better movement. But in these studies, the same number of people who do *not* take the supplements also improve. This means that glucosamine and chondroitin are not the reason that some people improve.

Joint Lubricant Injections

Joint lubricant injections are not the same as cortisone injections. In this treatment, a gel-like material is given by injection into the knee joint. Usually three to five shots are given over a few weeks. It is also called viscosupplementation. Possible side effects from joint lubricant shots include minor infection, pain, and swelling. These side effects last a short time and go away without treatment. It is rare, but these shots also can cause swelling and pain that do not go away on their own. This happens in approximately 2 out of 100 people who get the shots. If it happens, medicines or another procedure may be needed. Many research studies have compared people getting the shots with those who do not. These studies have found that most people getting the shots do not have much improvement. The shots usually do not reduce pain or improve knee movement.

Arthroscopic Surgery for Osteoarthritis

Arthroscopic knee surgery is a minor surgery. Doctors insert a flexible tool into the knee joint. They then rinse the joint. Sometimes they smooth out the cartilage and remove loose pieces. Possible problems can happen after surgery, like pain, swelling, and infection. Blood clots in the legs also can happen. Research shows that arthroscopic knee surgery usually does not reduce the pain of knee osteoarthritis. Doctors may use arthroscopic surgery for other types of knee problems, like sports injuries. It is sometimes helpful for those problems but not for knee osteoarthritis.

Things to Think About

Am I getting the right amount of exercise?

- A small increase in activity several times a week can increase your strength and help with osteoarthritis symptoms.
 - The goal is to help with joint movement.
- Exercise does not need to be difficult. What's important is to get moving.
- Find a kind of exercise that fits your lifestyle.

How can I get the most out of my doctor visits?

- Plan for the visit by writing down what you want to talk about.
- Make sure your doctor or nurse knows all the medicines, vitamins, and supplements you take.
- Take a list of questions you want to ask.

What should I ask my doctor or nurse?

- How bad is my knee osteoarthritis?
- What options are available to decrease my knee pain?
- How will this treatment help me?
- How will I know the treatment is working?
- What are all the possible side effects?



What is the Source of This Guide?

The information in this guide comes from a detailed review of 86 research reports. The review is called *Treatment of Primary and Secondary Osteoarthritis of the Knee* (2008)