



Highlight on Knee Arthritis

Physical Therapy and Arthritis

Osteoarthritis of the knee is more associated with disability than osteoarthritis of any other joint.¹ People with arthritis desire interventions that will empower them to manage their symptoms.²

Exercise should be a standard treatment for knee osteoarthritis, according to well-controlled studies within the body of medical literature. Aerobic exercise and strength training have resulted in functional improvement in patients with osteoarthritis of the knee.³ A 2003 task force confirmed the benefits of exercise for knee OA as reported in the *Annals of the Rheumatic Diseases*.⁴ Messier et al.⁵ observed declines in strength and balance in older adults with chronic knee pain over a 30 month period, and concluded that weight training is an important component to manage knee pain.⁶

Physical therapists are uniquely qualified to provide the most appropriate and effective rehabilitative and self-care programs. The literature is beginning to shed light on specific treatment and exercise techniques that provide the most effective approach. For example, Sharma, et al.⁷ report that laxity and malalignment of the knee have an impact on the type of quadriceps strengthening that is employed.⁸ Hinman, et al.⁹ report in a randomized, controlled trial the efficacy of knee taping when included in the management of OA of the knee.¹⁰

At Body One, our own outcome studies have confirmed a positive response both in function (as measured by sit-stand times and walk test times) as well as self-reported symptoms on the Activity of Daily Living Scale, which takes into account pain/stiffness.

References

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