



# Effective Health Care Lifestyle Changes for Degenerative Joint Disease of the Lower Limbs Nomination Summary Document

## Results of Topic Selection Process & Next Steps

- Lifestyle changes for degenerative joint disease (DJD) of the lower limbs was found to be addressed by existing practice guidelines by the National Institute for Health and Clinical Excellence (NICE), the American College of Occupational and Environmental Medicine (ACOEM), the Orthopaedic Section of the American Physical Therapy Association (APTA), and the American Academy of Orthopaedic Surgeons (AAOS). In addition, this topic has overlap with an in-process Effective Health Care (EHC) Program review titled *Comparative Effectiveness of Physical Therapy for Knee Pain Secondary to Osteoarthritis*. Given that the existing guidelines and in-process report cover this nomination, no further activity will be undertaken on this topic.
  - National Collaborating Centre for Chronic Conditions. Osteoarthritis: national clinical guideline for care and management in adults. London: Royal College of Physicians, 2008. ISBN 978-1-86016-329-6 <http://guidance.nice.org.uk/CG59>
  - American College of Occupational and Environmental Medicine. Chronic pain. In: Occupational medicine practice guidelines: evaluation and management of common health problems and functional recovery in workers. Elk Grove Village (IL): American College of Occupational and Environmental Medicine (ACOEM); 2008. p. 73-502. <http://guidelines.gov/content.aspx?id=14284>
  - Cibulka MT, White DM, Woehrle J, Harris-Hayes M, Enseki K, Fagerson TL, Slover J, Godges JJ. Hip pain and mobility deficits--hip osteoarthritis: clinical practice guidelines linked to the International Classification of Functioning, Disability, and Health from the Orthopaedic Section of the American Physical Therapy Association. *J Orthop Sports Phys Ther* 2009 Apr;39(4):A1-25. <http://guidelines.gov/content.aspx?id=14702>
  - American Academy of Orthopaedic Surgeons (AAOS) treatment of osteoarthritis of the knee (non-arthroplasty); Rosemont, IL. 2008 Dec 6. <http://guidelines.gov/content.aspx?id=14279>
  - In-process Update: *Comparative Effectiveness of Physical Therapy for Knee Pain Secondary to Osteoarthritis*. To view a description and status of the research review, please go to: <http://www.effectivehealthcare.ahrq.gov/index.cfm/search-for-guides-reviews-and-reports/>
  - To sign up for notification when this and other EHC Program topics are posted, please go to <http://effectivehealthcare.ahrq.gov/index.cfm/join-the-email-list1/>
- This topic could potentially be considered for new research projects within the EHC Program.

## Topic Description

**Nominator:** Individual

Topic Number: 0287

Document Completion Date: 1-28-11

**Nomination Summary:**

The nominator questions whether a lifestyle change approach to middle-aged adult patients with degenerative joint disease of the lower limbs (hip and knee) is more effective than the traditional standard of care. The nominator describes a lifestyle change as an intervention facilitated by direct supervision for nutrition, physical education, and conditioning. Outcomes of interest are pain, function, and overall quality of life.

**Staff Generated PICO**

**Population(s):** Middle-aged adults

**Intervention(s):** Nutrition, physical exercise and conditioning, education, and self-management techniques

**Comparator(s):** Traditional standard of care

**Outcome(s):** Pain, function, quality of life

**Key Questions from Nominator:**

1. Is a lifestyle change approach to patients with DJD more effective than the traditional standard of care?

## Considerations

- The topic meets EHC Program appropriateness and importance criteria. (For more information, see <http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/>.)
- The topic was found to be partially addressed by an in-process EHC Program review titled *Comparative Effectiveness of Physical Therapy for Knee Pain Secondary to Osteoarthritis*. The draft key questions from this report include:

**KQ1.** What are the effectiveness and comparative effectiveness of physical therapy modalities available for adult patients with chronic knee pain due to osteoarthritis on improved intermediate and patient-centered outcomes when compared to no active treatment or another active physical therapy modality?

- a. Which patient subpopulations, including age, gender, race, baseline activities of daily living (ADL)/instrumental activities of daily living (IADL) disability, comorbidity, concomitant/prior treatments, activity level, occupation, and others subgroups predict the benefits of examined modalities of physical therapy on intermediate and patient-centered outcomes?
- b. Do changes in intermediate and patient-centered outcomes differ by the dose, duration, intensity, and frequency of examined modalities of physical therapy?
- c. Do changes in intermediate and patient-centered outcomes differ by duration of examined modalities of physical therapy and the time of followup?

**KQ2.** What is the association between changes in intermediate outcomes with changes in patient-centered outcomes?

- a. What are the validity, reliability, and minimal clinically important differences of the tests and measures to determine intermediate outcomes? Which intermediate outcomes meet criteria of surrogates for patient-centered outcomes?

**KQ3.** What are the harms from physical therapy modalities available for adult patients with chronic knee pain due to osteoarthritis when compared to no active treatment or active controls?

- a. Which patient subpopulations, including age, gender, race, baseline ADL/IADL disability, comorbidity, concomitant/prior treatments, activity level, occupation, and other subgroups may predict the harms of examined physical therapy modalities?
  - b. Do harms differ by the duration of the treatment and time of followup?
- In addition, the topic was found to be addressed by existing practice guidelines by the National Institute for Health and Clinical Excellence (NICE), the American College of Occupational and Environmental Medicine (ACOEM), the Orthopaedic Section of the American Physical Therapy Association (APTA), and the American Academy of Orthopaedic Surgeons (AAOS). These guidelines are consistent in their recommendations regarding the use of patient education and self-management to encourage maintaining proper weight, performing low-impact aerobic exercise and strengthening exercises, and protecting joints.
  - While this topic may not represent an area of uncertainty in appropriate care, there may be differences in clinician compliance with guidelines that could benefit from greater dissemination and implementation practices. These issues could potentially be considered for new research projects within the EHC Program.