



Implementing evidence based education and exercise for knee osteoarthritis

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What did we do?

- In 2017, 78 physiotherapists trained via face to face lectures + workshops to deliver GLA:D[®] Program
- Aim: ↑ physiotherapists knowledge & confidence to deliver OA management according to clinical practice guidelines
- Physiotherapists completed a survey pre and post-course
- Patient outcomes (objective tests + questionnaires) collected at baseline and 3-months
- Implementation evaluation guided by RE-AIM framework

The GLA:D[®] Program: an evidence-based, physiotherapy led education and supervised exercise-therapy program for people with knee osteoarthritis (OA).

Why did we do it?

- >2.1 million Australians have OA → increase to 3 million by 2030¹
- Our pilot work indicates 58% of physiotherapists are not aware of Clinical Practice Guidelines (CPG) for the management of OA
- 74% of physiotherapists do not use CPGs to guide treatment
- Implementation of CPGs which recommend education, exercise-therapy and weight loss is essential to impact the predicted rise in knee replacement surgeries in Australia - 276% by 2030²

What were the results?

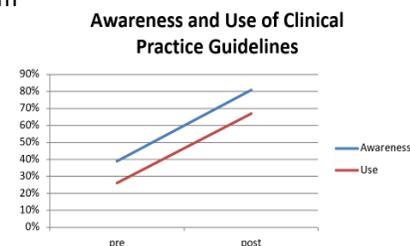
Reach: Physiotherapists from a variety of settings attended workshops

- 10% working in both public and private settings
- 19% working in public settings
- 71% working in private settings

- GLA:D[™] Australia was implemented in at least 18 public and private physiotherapy services in Melbourne, Hobart & Adelaide
- Paper based patient outcome data was provided by 6 of the sites that implemented the program

Effectiveness: At 12 months, workshops improved:

- CPG Awareness from 39% to 81%
- CPG use from 26% to 67%

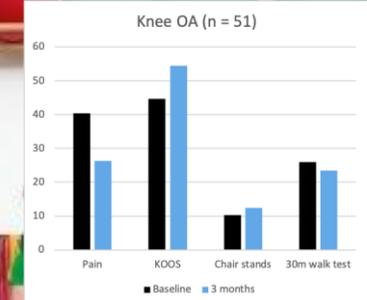


Physiotherapists reported an increase in confidence in their ability to deliver interventions 12 months following workshops, including:

- Prescription of aerobic exercise from 67% to 84%
- Prescription of neuromotor exercise from 62% to 92%
- Discussing the importance of weight management from 67% to 82%
- Providing physical activity advice from 88% to 95%

Key patient-reported outcomes

- ↓ average pain by 35% on VAS
- ↑ QOL by 10 points on KOOS - QOL subscale
- ↑ number of chair stands in 30 seconds by 21%
- ↑ walking speed – 10% less time on 40m walk test



Adoption:

- > 90% of Physiotherapists planned on implementing within 6 months
- One year after, nearly 80% had implemented the program in clinic

Implementation: A number of barriers to implementation were identified in survey responses. Key barriers included:

- Poor awareness of best practice management of OA in the community and amongst fellow health care professionals
- Access/funding to allow patients to participate
- Inadequate organisational support to deliver programs like GLA:D

Maintenance: 100% (18/18) of GLA:D[™] Australia services which were implemented in 2017 were continuing to run at the end of 2018.

KEY FINDINGS

Welcome to GLA:D Australia

The best first treatment for hip and knee osteoarthritis

- Implementation of GLA:D[™] Australia is feasible in private & public settings
- Workshops improve knowledge and confidence of physiotherapists management of knee OA

Patient benefits of completing GLA:D[™] Australia:

- ↓ pain
- ↑ quality of life
- ↑ functional outcomes

References

- Arthritis Australia, (2018). *Counting the Cost*, http://arthritis.org.au/wp-content/uploads/2016/05/Final-Counting-the-Costs_Part1-Healthcare-Costs_MAY2016.pdf
- Ackerman et al, (2019). The projected burden of primary total knee and hip replacement. *BMC musculoskeletal disorders*, 20(1), 90.