

OSTEOARTHRITIS MANAGEMENT -A TEAM APPROACH

Primary care should provide self-management advice combined with appropriate therapeutic strategies, aiming to improve functioning and mobility, prevent complications and delay progression. Use this Action Plan to support these conversations with your patients.

A team approach is essential

Consider eligibility for GP Management Plans (item 721) and Team Care Arrangements (item 723). A practice nurse or allied health professional can provide valuable assistance across a range of areas when considering individualised treatment, including patient assessment, provision of information and self-management support, preparation of management plans, contacting appropriate services, and review.

Who can help with	Important discussion points
General questions eg, GP, Practice Nurse, Pharmacist, Arthritis Educator	 Topical anti-inflammatories are as effective as oral medicines for some people. If oral analgesia is needed, paracetamol or oral NSAIDs may have a role. Arthroscopy is not effective for pain relief and may cause long term harm. Supportive follow-up, such as from a practice nurse, can help with adherence to plans and meeting goals. Glucosamine, chondroitin and fish oils have inconclusive evidence of clinical efficacy for pain, function or structural progression. The latest evidence does not support the use of acupuncture for hip or knee osteoarthritis but some may derive benefit.
Physical activity <i>eg, Physiotherapist, Exercise</i> <i>physiologist</i> Weight management <i>eg, Dietitian</i>	 Exercise and weight management are core treatments and recommended for all patients. Exercise and weight loss together lead to better functional improvements. Exercise can be as effective as simple pain relievers, without the side effects or contraindications. Exercise can delay the need for surgery and help with rehabilitation afterwards. Graded plans can be used where weight-bearing is difficult or painful.
Mobility and functioning eg, Occupational therapist, Podiatrist	<i>Walking sticks, knee braces,</i> and <i>orthoses</i> can reduce knee loading and pain. Applying a <i>paced approach</i> to everyday activities can help reduce pain flares and maintain function.
Pain beliefs, mood and coping <i>eg, Psychologist</i>	<i>Pain education, coping skills,</i> and/or <i>mindfulness</i> can lessen pain intensity, reactivity and distress.

Use the following questions to develop an individualised management plan based on assessment, evidence for effectiveness and patient preferences: What do you want to be able to do most in six months' time? What would be helpful in reaching your goal? What stands in your way of reaching your goal? What do you think you can do from today? Who can support you? eg, family, friends, allied health practitioners Do you have any other concerns about your condition?

ACTIONPLAN

You are the key person in your osteoarthritis management team

With the right support and effort, you can manage pain, increase mobility and improve your quality of life.

The goals I want to achieve

Being active is good for your joints

Physical activity and strengthening exercises help keep joints healthy and active by making them stronger and more resilient. Strong muscles also support and protect your joints from the stresses of movement. A physiotherapist or exercise physiologist can help work out a program suitable for you.

Not all pain is the same

In osteoarthritis, pain is not usually a sign of doing harm to a joint. Some pain with exercise is ok, provided it is not too intense and eases off relatively quickly. Regular exercise can give you long-term pain relief. With some experience you can learn to pace yourself and find a good balance between doing too much and too little.

Which activities cause me pain and when is it at it's worst?

Help with motivation or starting a program

Making long term lifestyle changes can be difficult. Doing exercise with someone else is usually more fun, and can be encouraging.

Your joints are capable of repair

Losing weight, if you need to, helps relieve the pressure on your knees and hips, allowing your body to repair and rebuild.

What I can do

Download the <u>Make your Move – Sit less – Be active for life!</u> brochure (www.health.gov.au/internet/main/publishing.nsf/ content/health-publith-strateg-phys-act-guidelines) to read more.

What I can do when I have pain

Ask your doctor about other things you can do to help with the management of chronic pain, such as the free <u>MindSpot</u> Pain Course (www.mindspot.org.au/about-pain)

What I can do

Contact your local State/Territory arthritis organisations to find local support groups and arthritis information.

What I can do

Find out ways you can work towards a healthy balanced diet by visiting the <u>Eat for Health</u> website (www.eatforhealth.gov.au/) or speaking to a dietitian.

Date of my next visit:

Further information

Visit <u>NPS MedicineWise</u> website (nps.org.au/oa) Visit <u>My joint pain</u> website (www.myjointpain.org.au/) Arthritis Australia Infoline, call 1800 011 041 (FREECALL) Weekdays only

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