

Treatment of Osteoarthritis of the Knee (Nonarthroplasty)

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Abstract

The clinical practice guideline was explicitly developed to include only treatments less invasive than knee replacement (ie, arthroplasty). Patients with symptomatic osteoarthritis of the knee are to be encouraged to participate in self-management educational programs and to engage in self-care, as well as to lose weight and engage in exercise and quadriceps strengthening. The guideline recommends taping for short-term relief of pain as well as analgesics and intra-articular corticosteroids, but not glucosamine and/or chondroitin. Patients need not undergo needle lavage or arthroscopy with débridement or lavage. Patients may consider partial meniscectomy or loose body removal or realignment osteotomy, as conditions warrant. Use of a free-floating interpositional device should not be considered for symptomatic unicompartmental osteoarthritis of the knee. Lateral heel wedges should not be prescribed for patients with symptomatic medial compartmental osteoarthritis of the knee.

The work group was unable either to recommend or not recommend the use of braces with either valgus- or varus-directing forces for patients with medial unicompartmental osteoarthritis; the use of acupuncture or of hyaluronic acid; or osteotomy of the tibial tubercle for isolated symptomatic patellofemoral osteoarthritis.

Overview and Rationale

The clinical practice guideline was approved by the American Academy of Orthopaedic Surgeons (AAOS) on December 6, 2008. It is based on a systematic review of published studies on the treatment of osteoarthritis (OA) of the knee in adults. The guideline was explicitly developed to include only treatments less invasive than knee replacement (ie, arthroplasty). In addition to providing practice recommendations, the guideline highlights gaps in the literature and areas that require future research.

The purpose of the clinical practice guideline is to help improve treat-

ment based on current best evidence. Current evidence-based practice standards demand that physicians use the best available evidence in their clinical decision making. To assist physicians, the guideline consists of a series of systematic reviews of the available literature on the treatment of OA of the knee in adults. These systematic reviews were conducted between October 24, 2007, and February 22, 2008; they identify areas of good evidence, show where evidence is lacking, and indicate topics that future research must target to improve treatment. AAOS staff and the Osteoarthritis of the Knee work group systematically reviewed the available literature and subse-

This clinical practice guideline was approved by the American Academy of Orthopaedic Surgeons.

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