

Osteoarthritis of the Knee

What is Osteoarthritis of the Knee?

Osteoarthritis is a condition that causes the joints to become painful and stiff. In osteoarthritis, the cartilage on the end of the joint changes over time and for some people these changes can result in painful flares. This may make your knee look 'knobby'.

Who gets it?

For those who develop osteoarthritis, several factors can contribute:

- Previous injuries to the joint (sport, trauma)
- Being overweight
- Repetitive demands on the joint
- Infection of the joint
- Substance abuse such as smoking

What are the symptoms?

- Pain that may come and go around the knee joint itself
- Stiffness or reduced movement
- Swelling can be present- either all the time or after activity
- Sometimes the knee can "lock" (you are unable to move the joint easily) or feel like it will "give way"

How is it diagnosed?

Osteoarthritis of the knee is diagnosed by your GP or Physiotherapist by taking a history from you about your symptoms and carrying out the necessary examination. X-rays are not always required to make a diagnosis of osteoarthritis but can sometimes be helpful.

Osteoarthritis of the Knee (continued)

What can I do to help?

The condition does not necessarily get worse over time - in 33% of people it does get worse, in 33% of people it stays the same and in 33% of people the symptoms get better with treatment

(NICE guidelines, 2014).

Things that help include:

- Losing weight if you are overweight
- Modifying and pacing your activities to reduce overloading the joint
- Using a walking stick
- Wearing shoes with a cushioned sole to help prevent jarring
- Avoid sitting in low chairs to prevent over-bending the knee

How can therapy help?

Aerobic exercise to increase your pulse rate, such as swimming, a brisk walk or using an exercise bike may help your condition.

Your Physiotherapist will be able to provide further advice.

The exercise below can help:



Images and wording courtesy of Physitrack

Stand with your feet shoulder-width apart. Engage your core muscles and gently squat down, do not allow your knees to travel too far forwards and keep your weight on your heels, not your toes. Tense your bottom muscles at the bottom of the squat and keep them tense as you straighten back up to the start position. As you squat, bend from your hips and keep your back straight.

What other treatments might help?

- Steroid injection into the joint may be used in addition to pain control
- Knee surgery - joint replacement or knee key-hole surgery may help in some cases