

# **Good Life with osteoArthritis in Denmark (GLA:D) – Implementation of evidence-based care for knee and hip osteoarthritis in clinical practice**

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Currently 300 words, 300 words max

## **Purpose**

To implement international treatment guidelines for knee and hip osteoarthritis (OA) and evaluate the results at 3 and 12 months.

## **Methods**

Good Life with osteoArthritis in Denmark (GLA:D) consists of:

- 1) A two-day course for physiotherapists (first course held in January 2013)
- 2) Three 1.5-hour sessions of patient education and 12 sessions of individualized, physiotherapist supervised neuromuscular exercise for patients with hip and knee OA.
- 3) Evaluation in the GLA:D-registry holding data from baseline, 3 and 12 months follow-ups.

## **Results**

GLA:D is offered at 255 GLA:D-units nationwide with data from more than 6,500 patients from January 31, 2013. The average GLA:D patient is an overweight 64 year old married woman with knee pain. Most patients have problems from more than one joint and medical comorbidities are common.

On December 31, 2014 2,290 patients had been evaluated at baseline and 3 months, and 425 patients had undergone baseline and 12-month evaluation. Only 35 (8.2%) were on sick-leave due to their hip/knee during the year following GLA:D compared to 54 patients (12.7%) during the year prior to GLA:D. Only 36% used pain relievers (paracetamol, NSAIDs or opioids) at 3 months compared to 57% at baseline. Fear of movement and objective function were improved, and 1 out of 3 reported increased physical activity level at 3 and 12 months. Pain was decreased at 3 months (hip 10.9 mm and knee 14.4 mm) and at 12 months (14.4 and 17.0, respectively).

## **Conclusions**

The GLA:D concept is feasible and data from the first two years of enrollment demonstrate reduced pain and increased quality of life with improvements persisting 9 months after the intervention ends. Teaching content of clinical guidelines to physiotherapists and providing a free of charge registry for data collection increase the quality of care provided for patients with knee and hip OA.