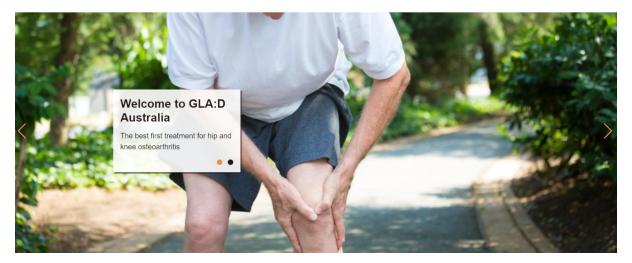


GLA:D Australia: A great first line treatment for knee and hip osteoarthritis



Current clinical guidelines for lower limb osteoarthritis (e.g. hip and knee) unanimously recommend <u>exercise therapy</u>, <u>education</u> and <u>weight loss</u> as a first line non-pharmacological treatment.(1-4)

GLA:D is an <u>evidence-based</u> program aimed at improving the quality of care in clinical practice. GLA:D consists of two sessions of patient education and 12 sessions of supervised, individualized neuromuscular exercise therapy delivered by trained physiotherapists and evaluated in a national clinical registry. The program has been successfully run in Denmark and is currently being implemented in Canada, Australia and China.

Unlike other programs, GLA:D is supported by compelling evidence and clinical guidelines.(5) In Denmark, with more than 30 000 participant data, GLA:D has shown to reduce sick leave and pain (25%); improve function, knee-related quality of life (QoL), and physical-activity levels; and reduce analgesia use by one-third.(5)



The Royal Australian College of General Practitioners recently published their guideline on the management of knee and hip osteoarthritis.(4) This guideline is an update of their previous 2009 guideline. This guideline strongly recommends regular exercise for relieving pain and improving function in people with hip and knee osteoarthritis. Weight management for those who are over weight (BMI >25) is also strongly recommended. There are several interventions that are strongly recommended against such as opioid use, stem cell therapy and arthroscopic surgical interventions such as debridement and meniscectomy. You can refer to the guideline on line at: https://www.racgp.org.au/your-practice/guidelines/musculoskeletal/hipandkneeosteoarthritis/

There are several known barriers for patients that can make exercise therapy difficult to maintain and adhere to. Below is how the GLA:DTM Australia program delivers key program content (6) to ensure favourable outcomes for your patients.



Evidence-based component of OA management	How GLA:D Facilitates
Education on osteoarthritis	There are two 1 hour educational sessions packaged into the
and the benefits of exercise	GLA:D program. These include:
	1. What is osteoarthritis (OA), risk factors, symptoms, introduction to treatment
	2. Exercise, activities in daily living, coping, self-help tools
Use of graded progressive	The GLA:D program incorporates neuromuscular exercises
exercises to ensure that pain	(NEMEX) in a small class environment. Each exercise is graded to
and discomfort are not	the individuals' ability as assessed by the supervisor (a healthcare
excessive during or after	professional). Participants are observed and encourage to report
exercise	discomfort and pain levels during exercises.
Initial exercises should be	Exercise classes are supervised and run by physiotherapists who
under expert instruction and	have been trained in the program.
supervision	
Supplementary material	The GLA:D program incorporates exercises that can be easily
should be available against	performed at home or whilst travelling with minimal equipment.
face to face instruction	Supplementary material in the form of exercise sheets and log
	books are available for participants.
Monitoring over the long	GLA:D participants are asked to fill out a baseline osteoarthritis
term with periodic re-	questionnaires and again at 3 months and 12 months with
assessment by a health	reminders. Participants are encouraged and supported to think
professional is beneficial	and discuss exercise options beyond the 6 week program.

The bottom line is, this program can delay or prevent surgical intervention,(7) and help patients with long term favourable outcomes in both pain and function.

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