



Service Priorities and Programmes Electronic Presentations

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Supported Osteoarthritis Self-Management Programme (SOASP) – Pilot Multi-Disciplinary Exercise Training Programme for patient with OA knee in MMRC

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Introduction

Patients with knee osteoarthritis (OA knee) commonly have limited physical and functional capacities, which are associated with increased mortality, poorer quality of life and higher risk of fall. A Supported Osteoarthritis Self-Management Programme (SOASP) has been started in Sweden with success in symptoms control, delay in need of joint replacement and improved quality of life of patients. The programme is led by physiotherapist, in collaboration with nurse, occupational therapist and patient representative. After a team visit to those OA knee centres in Denmark, the SOASP has been launched in the Hong Kong West Cluster (HKWC) for trial.

Objectives

This presentation is to report the effectiveness of the local SOASP on physical capacity, self-efficacy and quality of life of patients with OA knee in the HKWC.

Methodology

Patients with OA knee were referred by the orthopedic doctor to the physiotherapist for patient assessment and setting of individualized rehabilitation goals. The patients attended a programme of an education class, 12 sessions of physiotherapy exercises and 4 sessions of occupational therapy, followed by a three-month evaluation and one-year telephone follow-up. The programme consisted of knowledge transfer on importance of maintaining exercise habit for self management of OA knee, exercise therapy on progressive muscle strengthening and neuromuscular control, and coping skills for life style redesign. The outcome measures included the quality of life measure EQ-5D, arthritis self-efficacy, time of physical activities per week, exercise self-efficacy, knowledge questionnaire about the management of arthritis and static quadriceps strength.

Result

The SOASP commenced in January 2016, with 6 patients started the first session. Preliminary data showed that there were improvements in the quality of life, disease knowledge and exercise self-efficacy of patients. The programme will continue with more patient recruitment and data collection. By May 2016, it is expected that data from about 50 patients with OA knee can be reported.