

Is exercise effective for knee osteoarthritis? A Cochrane systematic review

WHAT WE DID



Study design: Systematic review

Aim: Assess the effects of land-based exercise for people with knee osteoarthritis by comparing:

- (1) exercise versus attention control or placebo;
- (2) exercise versus no treatment, usual care, or limited education;
- (3) exercise added to another co-intervention versus the co-intervention alone.

WHAT WE FOUND

Points better with exercise (on 0 to 100 point scale [95% confidence interval]):

30 trials (3,065 participants) compared exercise to attention control or placebo	PAIN	8.7 [5.7 to 11.7]
	FUNCTION	11.3 [7.6 to 15.1]
	QUALITY OF LIFE	6.1 [-0.1 to 12.3]
60 trials (4,834 participants) compared exercise with usual care, no intervention, or limited education	PAIN	13.1 [10.4 to 15.9]
	FUNCTION	12.5 [9.7 to 15.3]
	QUALITY OF LIFE	5.4 [3.2 to 7.5]
49 trials (4,569 participants) compared exercise added to another co-intervention versus the co-intervention alone	PAIN	10.4 [8.1 to 12.8]
	FUNCTION	9.7 [7.5 to 12.0]
	QUALITY OF LIFE	4.2 [1.4 to 7.1]

We also conducted subgroup analyses:

- We did not find any differences in effects between **different types of exercise**.
- We found no relationship between changes in pain or function and **total number of exercise sessions prescribed** or ratio (between exercise group and comparator) of real-time **consultations with a healthcare provider**.

SUMMARY

We found **low to moderate certainty evidence** that exercise probably results in an improvement in pain, function, and quality of life in the short-term. However, based on the thresholds for minimal important differences that we used, these benefits were of **uncertain clinical importance**.



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<https://doi.org/10.1002/14651858.CD004376.pub4>



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