

## Tips for osteoarthritis of the hip or knee

This sheet has been written for people with osteoarthritis (OA) of the hip and/or knee. There are many treatments that may be helpful if you have hip and/or knee OA. Here are some things you could try.

### Self management course

These courses help you develop skills to manage your symptoms, communicate with your healthcare team and lessen the impact of arthritis on your life. Contact your local Arthritis Office for more information.

### Exercise

Exercise is one of the most important treatments for OA of the hip and knee. It helps to reduce pain and maintain your general health. To protect your sore joints, try low-impact activities, where there is less weight going through your hips and knees. Examples of low-impact activities include cycling, walking and tai chi. You could also try:

- **Water exercise:** The buoyancy of the water takes pressure off your hips and knees and you may find you can move more freely than you can on land. You could swim, do a hydrotherapy session with a physiotherapist or join a local warm water exercise class. There may be suitable classes at local pools or at hydrotherapy pools (heated to around 34 degrees), found at hospitals, community health centres or physiotherapy clinics.
- **Strengthening exercises:** Physiotherapy exercises to strengthen the muscles around your hip and knee can also help reduce pain from OA.

See the *Physical activity* sheet for more information about exercise. If possible, consult a physiotherapist or exercise physiologist for advice about a program to suit you.

### Weight loss

Being overweight can lead to more pain and damage to hips and knees affected by OA. Even modest weight loss (less than five kilograms) can reduce symptoms of knee OA. You may find it useful to see a dietitian for advice about healthy eating and weight loss.

### Medicines

- Paracetamol is a simple pain reliever that can relieve mild to moderate pain from OA.
- Anti-inflammatory medicines may relieve symptoms of OA. Always talk to your doctor or pharmacist before take these medicines as they are not suitable for all people.
- Stronger pain medicine, such as codeine or tramadol, may be useful if simple pain relievers are not effective and anti-inflammatory medicines cannot be used.
- A corticosteroid injection into the knee or hip joint may relieve pain.
- Hyaluronan injections may reduce pain in knee OA but can be expensive and do not work for all people. Injecting hyaluronan into the joint can help lubricate and protect the cartilage.
- Creams containing anti-inflammatory medicines have been shown to reduce pain in knee OA. It is not known whether these creams have the same effect for hip OA. Creams containing capsaicin (an ingredient in cayenne and chilli peppers) may also help relieve pain in knee or hip OA.

Talk to your doctor or pharmacist about medicines and the best way to use them for your condition. See the *Medicines and arthritis* information sheet.

### Aids or supports

Some people may find using a walking stick helps reduce pain, although there are few studies that prove this. Always use the walking stick on the opposite side to your sore joint (if your right hip is affected, use the walking stick in your left hand). Your physiotherapist may also suggest the following treatments to reduce pain from knee OA:

- **taping** the kneecap (patella)
- **knee braces**
- **orthotics** (small wedges placed in your shoe to improve the alignment (position) of your knee when standing and walking).

See a physiotherapist for advice about any of these aids or supports.

## Heat and cold

Cold therapy such as ice packs or ice massage may help reduce pain in knee OA. Heat packs have been found to be less useful than cold packs for OA. See the *Dealing with pain* sheet for more information.

## Glucosamine and chondroitin.

The results from studies of glucosamine sulfate and chondroitin sulfate are controversial. See the *Glucosamine and chondroitin* sheet for more information.

## Herbal therapies

There is limited proof that certain herbal therapies are useful for OA of the hip and knee. See the *Complementary therapies* sheet for more information.

## TENS, electrical stimulation, ultrasound, laser

TENS and electrical stimulation (used by a physiotherapist) apply very mild electric pulses to block pain messages going to your brain. This may help reduce pain in your hip or knee. See a physiotherapist to trial a TENS machine, and to learn how to use it correctly, before you buy one. Ultrasound has been shown to have no benefit for hip or knee OA. It is unclear whether laser therapy is an effective treatment for knee or hip OA.

## Acupuncture

Acupuncture may help to improve pain and function for some people with knee OA. The effects on hip OA have not been clearly proven. The Australian Acupuncture and Chinese Medicine Association can help you find an accredited practitioner at [www.acupuncture.org.au](http://www.acupuncture.org.au) or 1300 725 334.

## Magnets

It is unclear whether magnetic belts or bracelets have any effect on pain for people with OA of the hip and knee.

CONTACT YOUR LOCAL ARTHRITIS OFFICE FOR MORE INFORMATION SHEETS ON ARTHRITIS.

There are many things that can help you manage OA of the hip or knee. The first steps are regular exercise, weight loss and using medicines wisely.

## For more information:

To find a physiotherapist, talk to your doctor, see the Australian Physiotherapy Association website at [www.physiotherapy.asn.au](http://www.physiotherapy.asn.au) or look under 'Physiotherapist' in the Yellow Pages.

To find an exercise physiologist, talk to your doctor, contact the Australian Association for Exercise and Sports Science on (07) 3856 5622 or use the 'find an exercise physiologist' feature at [www.aaess.com.au](http://www.aaess.com.au)

To find a dietitian, talk to your doctor, contact the Dietitians

Association of Australia on (02) 6282 9555 or use the 'find a dietitian' service at [www.daa.asn.au](http://www.daa.asn.au)

**Books** *Living with osteoarthritis: A guide for people with osteoarthritis of the hip or knee 2005*, Clinical Epidemiology and Health Service Evaluation Unit Royal Melbourne Hospital, Melbourne. Available also for download from [www.arthritisvic.org.au](http://www.arthritisvic.org.au)

Allen, Ronald J 1998, *Arthritis of the hip and knee: The active person's guide to taking charge*, Peachtree Publishers, Atlanta, Georgia.

**Source:** A full list of the references used to compile this sheet is available from your local Arthritis Office

The Australian General Practice Network, Australian Physiotherapy Association, Australian Practice Nurses Association, Pharmaceutical Society of Australia and Royal Australian College of General Practitioners contributed to the development of this information sheet. The Australian Government has provided funding to support this project.

Your local Arthritis Office has information, education and support for people with arthritis  
**Freecall 1800 011 041 [www.arthritisaustralia.com.au](http://www.arthritisaustralia.com.au)**