As described to Bone and Joint Canada
General program information

The program “I Manage my Knee Osteoarthritis Program” provides care for patients experiencing osteoarthritis of the knee. It was developed using international guidelines focusing on education, self-management, exercises and addressing evidenced-based biomechanical markers link to the progression of Knee OA. The Program is based in Laval, Quebec and is now offered in multiple clinics in the greater Montreal area. Referrals are both received from physicians in the area or patients can enroll themselves if the present a diagnostic of knee OA. The program accepts all patients with a confirmed diagnosis of Osteoarthritis (OA), independently of the OA severity. Payment for the program is private pay and patient can claim the associated fees to their insurance.

Program Structure

The program is based in a multidisciplinary clinic that has access to physicians, including orthopaedic surgeon, physiotherapist, nutrition and kinesiologists. The program is structured and patient needs to agree to participate in the following 4-step process:

Step 1: Intake assessment
- Intake assessment which includes subjective questionnaires to assess patient goal, knowledge of OA and previous treatments
- Physiotherapist assessment of function including strength flexibility and neuromuscular control
- Assessment of biomechanical markers link with Knee OA progression – made with the KneeKG System during gait

Step 2: Analysis, recommendations and education
- Based on analysis of the assessment findings patients are provided with individualized program which can include:
- Education is provided using materials from valid sources such as The Arthritis Society and Canadian nutrition guide
- Specific and personalized exercises (4 – 5) which are taught and need to be performed at home to address the identified OA biomechanical markers, with the right priority
- Exercises are low tech using simple inexpensive equipment and are developed so that they can be easily built into daily activity
- Referral back to MD for pain management adjustments
- Referral to adequate health care providers (nutritionist, bracing, PT, etc.)
- A referral to the group exercise programs part of the OA program is made if it will facilitate ongoing exercise progression, maintain communication with patients and help in motivation

Step 3: Exercise
- Two group sessions are provided within the program that focuses on the exercises to ensure progression and quality. These occur at approximately 2 months and at 4 months. These group sessions allow patients to interact and share their experience, which further motivate patients. Patient’s additional questions are also covered.

Step 3: Exercise (continued)
- Patients can continue to attend at 6, 8 and 10 months if they want further education related to exercise progression

Step 4: Reassessment
- A biomechanical assessment (KneeKG) and functional assessment are made at 6 months to assess patient progression and then adapt the care management pathway accordingly (exercises & bracing to address OA biomechanical markers, weight or pain management, adjustments in lifestyle, etc.)

Education sessions

Education sessions are provided about once per month covering different topics such as nutrition, bracing, pain management and ergonomics. These are provided in a group format, they are optional and open to the grand public.

Ongoing patient support

There is a follow up report provided to the primary care physician with the finding and plans from the consultation including recommendations on the need for consultations with other specialists if required.

Community linkages

Throughout the program advice is provided on community based exercise program that are of interest to the individual such as Pilates and Tai Chi. These recommendation include recommendations on modifications to activity. Linkages are made with services in the patient’s home community if required and patients can follow up with the clinic for questions at any time.

Evaluation

Questionnaire such as the KOOS, pain catastrophizing scale, nutritional habits questionnaire are completed at intake. Data, including outcome scores, functional tolerances, medication intake, absenteeism and the need for surgery (or postponed surgery) are tracked at the start of the program and at 6 months follow up for patients that attend the session.

An ongoing clustered RCT is assessing the impact of the My Knee OA program on socio-economic data (reduction in direct and indirect costs of 20%, and an improvement in patient condition) compared to current medical practice. International Standard Randomised Controlled Trial Number: www.isrctn.com/ISRCTN16152290

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