

# Osteoarthritis of the knee

## What is osteoarthritis?

Osteoarthritis is a disease which affects the joints in the body. The surface of the joint is damaged and the surrounding bone grows thicker. 'Osteo' means bone and 'arthritis' means joint inflammation.

When joints are swollen and damaged they can be painful. They can also be difficult to move.

## What causes osteoarthritis of the knee?

Many factors seem to increase the risk of osteoarthritis developing in the knee joint. The risk does increase as we get older, but osteoarthritis of the knee joint is not a problem in all elderly people. It often runs in families. Genetic factors are very important. Genes may affect how well tissues repair.

Osteoarthritis of the knee is twice as common in women as in men. It mainly occurs in women who are over the age of 50, but there is no strong evidence that it is directly linked to the menopause.

It is also worse in people who are overweight.

## How can I tell if I have osteoarthritis of the knee?

People with osteoarthritis of the knee joint usually complain that the knee is painful or aching. Your knee joint may feel stiff at certain times, often in the mornings or after rest. Walking for a few minutes usually eases the stiffness. You may have pain all around the joint or just in one particular place, and the pain may be worse after a certain activity, such as using stairs. The pain is usually better when you rest. It is unusual to have pain in the knee joint which wakes you up at night, except in severe osteoarthritis.

You will probably find that your pain will vary. There may be good days and bad days, or even good and bad months, for no apparent reason. Changes in the weather may make a difference in some people. All joints have nerve endings which are sensitive to pressure. The nerve endings may respond to the drop in atmospheric pressure which occurs before it rains.

## How can osteoarthritis of the knee be treated?

There are many things that can help improve the symptoms of osteoarthritis. Treatment can help to:

- relieve the discomfort and pain
- reduce the stiffness.

## What can I do to help myself?

You can make a major difference to your osteoarthritis of the knee in the following ways:

### Lose weight (if overweight)

Many people with osteoarthritis of the knee are overweight. Studies have shown that people who lose weight have fewer knee problems in the future than those who do not. Being overweight is also bad for your general health and increases the risk of heart disease, strokes and diabetes. So you should eat a balanced, healthy diet and keep your weight as close as possible to the ideal for your height and age.

If you need help with losing weight you can speak to your GP or access the One You Leeds website at: [www.oneyouleeds.co.uk](http://www.oneyouleeds.co.uk) or tel: **0800 169 4219**.

### Improve your general fitness

Research has shown that improving your aerobic fitness can help knee osteoarthritis. This is the sort of exercise that gets you out of breath, such as cycling, swimming or brisk walking. If you need help with this the Health Trainers can support you - tel: **0113 843 4537**.

### Regular exercise of your quadriceps (thigh muscle)

The quadriceps muscles at the front of the thigh become weaker in everyone with osteoarthritis of the knee, because the normal nerve supply to the muscles is reduced. To overcome this it is essential to exercise the quadriceps muscles as often as possible (see exercises on the next page).

It has been proved that strengthening these muscles not only improves your mobility but also reduces pain.

### Wear sensible supportive footwear that offers some cushioning to decrease the impact on your joints

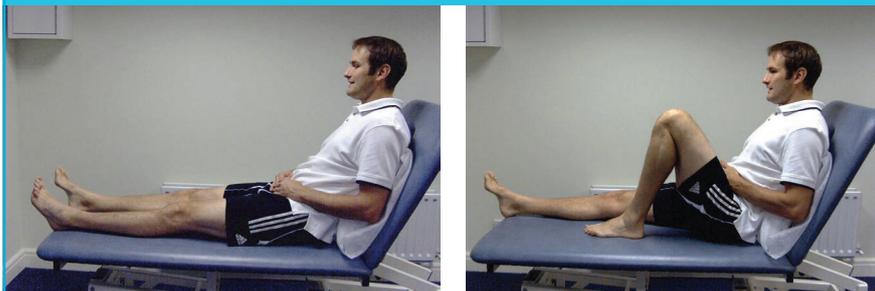
### Ensure you have adequate pain control

If your pain is not under control please see your GP or Pharmacist for a medication review.

Information from Arthritis Research Campaign (ARC). For more information go to the ARC website at [www.arthritisresearchuk.org/](http://www.arthritisresearchuk.org/)

## Exercises (these can also be carried out on the unaffected leg)

### A Heel slides



- Sitting on your bed, slide your right or left heel up towards your bottom (using a towel to help pull it up if necessary).
- Hold for 10 seconds, then straighten leg pushing knee down into the bed. Hold for 10 seconds.
- Repeat 10 times. Perform 2-3 sets of exercise a day.

### B Straight leg raise



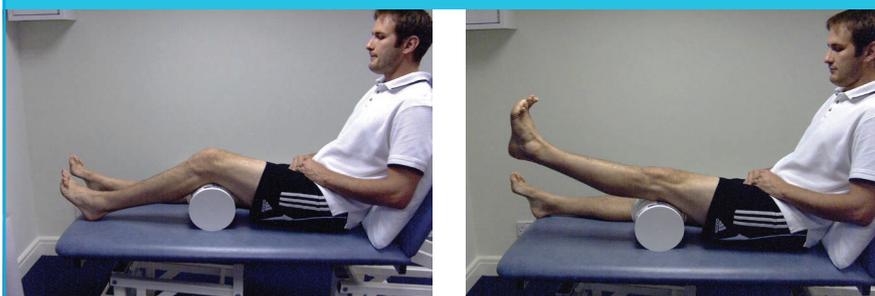
- Sitting on your bed, keep your right or left leg as straight as possible then lift your leg up approximately 15cm.
- Hold for 10 seconds.
- Repeat 10 times.
- Perform 2-3 sets of exercise a day.

### C Through range quads



- Sit on a chair with a weight tied around your right or left ankle then straighten your knee.
- Hold for 10 seconds.
- Repeat 10 times.
- Perform 2-3 sets of exercise a day.

### D Inner range quads



- Sit on your bed with a towel rolled up behind your right or left knee.
- Tighten your quads muscle then straighten your leg.
- Hold for 10 seconds.
- Repeat 10 times.
- Perform 2-3 sets of exercise a day.

## Help us get it right

If you have a complaint, concern, comment or compliment please let us know by speaking to a member of our staff. We learn from your feedback and use the information to improve and develop our services.

If you would like to talk to someone outside the service contact the **Patient Experience Team** on **0113 220 8585**, Monday to Friday 9.30am to 4.30pm or email **lch.pet@nhs.net**

**We can make this information available in Braille, large print, audio or other languages on request.**

If the suggestions on this sheet do not help you may need to be referred to a physiotherapist or to orthopaedics. Please speak to your GP about this.

For more information on the best course treatment for you, please visit the following website: [sdm.rightcare.nhs.uk/](http://sdm.rightcare.nhs.uk/) This has information about the benefits and risks of many of the different treatments you may be considering (including surgery).

Leeds Community Healthcare NHS Trust accept no responsibility for pain or injury resulting from the use of these information sheets. If you experience an increase in your pain that does not settle, or any other adverse symptoms, please contact your GP or physiotherapist before continuing with the exercises.