

Adults presenting with suspected hip or knee osteoarthritis

Probable OA based on common presentation

**Exclude:**

Presentation which includes Red Flags.  
Consider investigations to rule out alternative diagnoses

**Consider:**

Trauma, soft tissue conditions, referred pain syndromes, inflammatory arthritis (eg. rheumatoid), septic/crystal arthritis, haemarthrosis

Medical History

Physical Examination (inspection, palpation, range of motion, function)

Consider x-ray

**Comprehensive Assessment**

Patient's knowledge, expectations and goals  
Nutritional assessment  
Weight assessment (BMI)  
Falls risk assessment, function, impairment, activities of daily living  
Impact of co-morbidities  
Psychosocial assessment (emotional disability, depression, anxiety), sleep, mobility

**Assess for NSAIDs risk:**

Age, hypertension, upper GI events, cardiovascular, renal or liver disease

**Medication Risk**

Polypharmacy, allergies, diuretics, ACEIs, anticoagulants

Assess nonpharmacological interventions for all patients according to individual need at all stages of OA

**Pharmacological Management**

**Step - 1**

- Acetaminophen (max.4 g/day)
- Oral NSAID
- topical NSAIDs; – topical capsaicin

**Step - 2**

If core treatment failed  
Assess compliance then consider:

- Continued oral NSAID
- Duloxetine
- Tramadol

**Step - 3**

- Opioid therapy
- IA Injection therapy

**Non-Pharmacological Management**

- **Education** (about the disease and treatment options)
- Weight reduction (at least 5%)
- Physical Activity Home exercise (stretching, strengthening)
- Low impact aerobic exercise (walking, cycling..)
- Walking aids
- Referral to Physiotherapy
  - Land based exercise
  - Aquatic therapy

**Follow-up**

- Re-assess symptoms (Pain) and Function
- Medication and self care adherence
- Adverse events (monitor blood pressure, renal function)
- Complementary therapies
- Activities of daily living
- Psychosocial assessment

Consider referral for injections or surgery in patients with OA that failed to respond to conservative therapy, or patient's preference