

Patient information from BMJ

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Osteoarthritis: what treatments work?

Osteoarthritis can make your joints stiff and painful. This can make it hard to do everyday things, such as getting up out of a chair or tying a shoelace, and sometimes even walking.

There is no cure for osteoarthritis, but there are treatments that can help control the pain and discomfort it causes and help you move more freely.

Non-drug treatments

There are several things you can try for reducing pain and increasing mobility. Different things work for different people. The important thing is to find what works for you.

Exercising moderately and regularly can reduce pain and help you stay active. It can also help lift your mood.

Some people might worry that exercise will damage their joints even more. But there are plenty of exercises that don't harm your joints.

If you're concerned, you can discuss with your doctor what kind of exercise might suit you best.

Weight loss is likely to help if you are overweight and have knee osteoarthritis.

Support aids, such as a walking stick or a brace, can also help some people depending on which of your joints are affected. You can ask your doctor or physiotherapist about whether this might help you.

Acupuncture has been tried by people with osteoarthritis. Research is unclear about how well it works. But some people find that it helps them, especially for knee, hip, and hand osteoarthritis.

Drug treatments

If you find that non-drug treatments don't help your symptoms, your doctor will probably recommend medicines. These can vary from creams and gels to injections.

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Pain-relieving creams and gels

The first medicines your doctor might suggest are creams and gels that you rub onto the affected areas. You might hear your doctor describe these as 'topical' treatments.

Creams and gels that are commonly used for osteoarthritis include capsaicin, methylsalicylate, and diclofenac (an anti-inflammatory gel).

Non-steroidal anti-inflammatory drugs (NSAIDs)

If gels and creams don't help enough, your doctor may recommend anti-inflammatory painkillers in tablet form, usually NSAIDs. You may need to use these along with creams and gels to help your symptoms.

NSAIDs can work well to control pain in many people. However, when taken regularly these medicines can have **side effects**.

For example, some NSAIDs can cause stomach problems, and some have been linked to heart problems and kidney damage when taken over long periods in high doses.

Some NSAIDs are available without prescription, so if you take them regularly you should tell your doctor.

If you are prescribed NSAIDs to take for a long period of time your doctor will probably prescribe another medicine to protect your stomach.

Paracetamol

Research suggests that **paracetamol** on its own doesn't work very well to relieve the pain of osteoarthritis. But doctors sometimes recommend it along with your usual pain relief if you are suddenly in a lot of pain.

Opioids

If you have more severe symptoms your doctor may also prescribe **opioid painkillers** such as tramadol or codeine phosphate.

But opioids can cause dependence (addiction) if taken for long periods. So if you take opioids for your pain your doctor will monitor you carefully.

Joint injections

For pain that flares up and becomes bad very suddenly (called an **exacerbation**) your doctor might recommend injections in the joint with powerful anti-inflammatory drugs called **corticosteroids**.

These injections work well to reduce pain for many people. The effects can last up to several weeks, but the benefits are different for everyone.

The medicine is injected directly into the joint so it is less likely to cause side effects.

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But there is a small risk the medicine can enter the blood and cause serious **side effects**, especially if you have injections regularly or have high doses. Side effects include:

- Weight gain
- Bone weakness, and
- Thinning of the skin.

If you need joint injections, your doctor will want to monitor how often you have them. Speak to your doctor immediately if you notice any side effects.

Supplements

Some people with osteoarthritis take the dietary supplements **glucosamine** and **chondroitin sulfate** to help with pain. They are not recommended for treating osteoarthritis but it is important you tell your doctor if you are taking any.

These supplements are probably harmless, but the ones you buy from a pharmacy vary in quality. Your doctor might be able to prescribe a more effective version of these supplements.

Surgery

If your symptoms are severe, and other treatments haven't worked, your doctor may suggest that you have surgery for your osteoarthritis. Surgery can help reduce pain and improve movement but may not be suitable for everybody, and recovery can take several months. If surgery is an option for you, your doctor will refer you to an orthopaedic surgeon.

There are different surgeries depending on what type of osteoarthritis you have.

Joint replacement may be one option. This is a common procedure for knee and hip osteoarthritis.

Another type of operation for knee osteoarthritis is an **osteotomy**. This involves removing small pieces of bone from the knee and reshaping it.

Your doctor can explain the different types to you in more detail and which you're most likely to benefit from.

For more background information on osteoarthritis see our leaflet Osteoarthritis: what is it?

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