

# The Bottom Line

**The Bottom Line is a translation of study findings for application to clinical practice. It is not intended to substitute for a critical reading of the research article. Summaries are written by invitation of the Editor in Chief.**

[Holden MA, Nicholls EE, Hay EM, Foster NE. Physical therapists' use of therapeutic exercise for patients with clinical knee osteoarthritis in the United Kingdom: in line with current recommendations? *Phys Ther.* 2008;88:1109–1121.]

## **What problems did the researchers set out to study, and why?**

Knee pain resulting from osteoarthritis (OA) is a common reason for patients to seek physical therapist care, but limited knowledge exists concerning the manner in which physical therapists use therapeutic exercise to manage knee OA. The researchers' intent was to describe the use of therapeutic exercise in patients with clinical knee OA and to determine whether that use is in line with current treatment recommendations.

## **Who participated in the study?**

Physical therapists licensed (chartered) by the Chartered Society of Physiotherapy (CSP) in the United Kingdom who had treated at least 1 patient with knee OA within the past 6 months. Respondents were primarily women (87%) working within the National Health System (77%) with 4 or more years of experience (79%).

## **What new information does this study offer?**

Physical therapists in the United Kingdom favor therapeutic exercise in patients with knee OA. Local exercises are favored over more general and aerobic types of exercise, and balance exercises were not always prescribed. Strategies to improve adherence to exercise were not often used, and treatments were administered over relatively few sessions. Overall, discrepancies exist between published guidelines and clinical practice in the United Kingdom.

## **How did the researchers go about this study?**

The researchers administered a postal survey to a random sample of 2,000 CSP members. The survey consisted of a case vignette representing a typical presentation of a patient with knee OA, and a series of closed-ended questions asking respondents to describe how they would manage the patient described in the vignette. Questions were designed to seek information about the types of exercises prescribed. Demographic data also were collected.

## **How might the results of this study apply to physical therapist practice?**

The illumination of the differences between guidelines and clinical practice in this study suggests that physical therapists need further training in managing patients with knee OA to improve guideline adherence. Furthermore, these findings may help researchers examine the efficacy of interventions for knee OA that more closely resemble clinical practice.

## **What are the limitations of the study, and what further research is needed?**

Although this survey has a response rate comparable to other surveys of physical therapists in the United Kingdom, surveys are subject to nonresponder bias, which limits our ability to generalize these results to all clinicians in the United Kingdom. In this study, the overall adjusted response rate was 58% (1,158), and, of those, 47% (538) had managed a patient with knee OA in the past year. In addition, the survey was based on a vignette that might not reflect actual patient management in the clinic.

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