

AAOS approves AUC for non-arthroplasty treatment of osteoarthritis of the knee

December 17 2013

The American Academy of Orthopaedic Surgeons (AAOS) Board of Directors recently approved an AUC to help physicians treat patients with osteoarthritis (OA) of the knee. OA is a slowly progressing and degenerative disease that causes the joint cartilage to wear away.

In 2010, it was estimated that nearly 10 million adults had symptomatic OA of the knee, and risk factors of this condition can increase with age, especially in women. Genetics, high body mass, certain occupations or heredity also may increase one's risk of developing this disease. Typically, patients try non-arthroplasty options for many months or years, before considering a total joint replacement surgery.

"The background for this AUC comes from the 2013 AAOS evidence-based [clinical practice guideline](#) on OA of the knee, a comprehensive review of all the available evidence," said Michael Heggenness, MD, an orthopaedic surgeon who served as a non-voting moderator during the voting panel process. "This AUC is a tool that takes that guideline one step further; it marries the available evidence with expert medical opinion and is available at the touch of a web and mobile-based app."

"Physicians outside of orthopaedic surgery also can benefit from this tool," Dr. Heggenness added. "Knee pain is so common today and many patients might see their primary care doctor, rheumatologist or other physician for treatment, so we are hoping that other clinicians across medical disciplines familiarize themselves with this AUC and together we can help optimize patient care."

This web-based [app](#) is optimized to work on a wide range of devices, including Smartphones and tablets. It allows a clinician to select a variety of patient characteristics and, once submitted, receive appropriateness recommendations for each of the treatments covered by this AUC.

Treatment appropriateness is determined by three separate panels of clinicians who represent a variety of medical disciplines:

- The writing panel combined clinical expertise with evidence-based information from the AAOS Evidence Based Clinical Practice Guideline on Treatment of Osteoarthritis of the Knee to create a list of patient indications, assumptions, and treatments.
 - Scenarios ranged from a 25-year old patient with post-traumatic OA of the knee who wants to continue playing baseball, to an 80-year old patient who wants to continue walking with his grandchildren to the park.
- The review panel provided suggestions regarding improvement of the materials constructed by the writing panel.
- The voting panel utilized clinical expertise from multiple medical specialties and evidence-based information to assign the appropriateness of various treatments for each of the patient scenarios, using a 9-point appropriateness scale.

"The panels put tremendous thought into this AUC with careful analysis of appropriate care both through the published literature and extensive clinical experience" said James Sanders, MD, AAOS AUC Section Leader who also served as a non-voting moderator.

The panels came up with 10 different treatment options across 576 patient scenarios. Out of more than 5,700 different patient/treatment combinations:

- 53 percent were rated as "Appropriate"
- 29 percent were rated as "May Be Appropriate"
- 18 percent were rated as "Rarely Appropriate"

"AUC's can provide a useful framework for surgeons and their [patients](#) to consider the appropriateness of various treatment options, based on the medical evidence and the opinion and experience of experts," added Kevin Bozic, MD, MBA, chair of the AAOS Council on Research and Quality. "However, in addition to the medical evidence, any treatment decision should also take into consideration the physician's experience and expertise, and the patient's preferences and values."

Provided by American Academy of Orthopaedic Surgeons

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