

Physical therapy for hip osteoarthritis does not provide greater improvement for pain

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Among adults with painful hip osteoarthritis, physical therapy did not result in greater improvement in pain or function compared with a placebo treatment, but was associated with relatively frequent but mild adverse effects, raising questions about its value for these patients, according to a study in the May 21 issue of *JAMA*.

Hip osteoarthritis is a prevalent and costly chronic musculoskeletal condition. Clinical guidelines recommend physical therapy as treatment, however costs are significant, and evidence about its effectiveness is inconclusive, according to background information in the article.

Kim L. Bennell, Ph.D., of the University of Melbourne, Australia, and colleagues randomly assigned patients with [hip osteoarthritis](#) to attend 10 sessions of either [active treatment](#) (n = 49; included education and advice, manual therapy, home exercise, and walking aid if appropriate) or sham treatment (n = 53; included inactive ultrasound and inert gel). For 24 weeks after treatment, the active group continued unsupervised home exercise while the sham group self-applied gel three times weekly.

The researchers found that at weeks 13 and 36 the active treatment did not confer additional benefits over the sham treatment on measures of pain and physical function, which were improved in both groups. The treatment group reported a significantly greater number of adverse events, although these were relatively mild in nature.

"These results question the benefits of such a [physical therapy](#) program

for this patient population," the authors conclude.

More information: [DOI: 10.1001/jama.2014.4591](https://doi.org/10.1001/jama.2014.4591)

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