

Telehealth-delivered diet and exercise program eased knee pain and triggered weight loss

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Combined diet and exercise Telehealth program saw 80 per cent of participants experience reduced knee pain with an average weight loss of approximately 10.2 per cent. Credit: PEAK Consulting

New research investigating the benefits of telehealth-delivered exercise and diet programs has found 80 percent of participants experienced improvement in pain and an average of 10 percent in loss of body weight, with one man shedding 39 kilograms.

More than 400 individuals with [knee osteoarthritis](#) participated in the Better Knee, Better Me trial, developed by the University of Melbourne

in partnership with Medibank and Austin Health.

Published in the *Annals of Internal Medicine* today, the study shows researchers evaluated two six-month telehealth-delivered [exercise programs](#), one with and one without a weight-loss dietary program, compared with an information-only [control group](#).

During the trial, participants in the intervention groups were provided support from physiotherapists and dietitians via Zoom and a suite of resources. Those in the exercise plus diet group also received meal replacements so they could undertake a ketogenic low energy diet.

Compared to the group that only received information, both intervention programs resulted in benefits for [pain](#), function and quality of life. Compared to the exercise-only program, the combined exercise and diet program led to additional benefits—including a greater reduction in pain, greater improvements in physical function, lower use of pain medications, and significant weight loss. After both programs, participants were also less willing to undergo [knee](#) joint replacement surgery.

Lead researcher and Director of the Centre for Health, Exercise and Sports Medicine at the University of Melbourne Professor Kim Bennell, said participants lost on average 10.2 kilograms over a six-month period with four out of five participants achieving significant improvement in pain. She said 30 percent of participants lived in regional and rural Australia.

"We are proud to have developed a program that has a strong regional and rural representation and is based on a trial which made a real difference in the lives of participants. Particularly during these times of pandemic-related travel restrictions, it is crucial Australians are able to access home-based treatments to manage their osteoarthritis symptoms,

no matter where they live or what COVID restrictions are in place."

Participant Matthew Boyd, from Toowoomba in Queensland, said his knee pain had become unbearable and was struggling to do the things he enjoyed, leading to a decline in [physical activity](#) and an increase in his weight.

"Since taking part in Better Knee, Better Me, I feel amazing. I have lost 16kg which has decreased the weight load on my knees, and my pain. I no longer take any pain relief for my knee pain, which has meant I have been able to return to all the physical activities I wasn't able to do over the past five years. The pain in my knees no longer dictates my daily routine and I am back moving in a way I haven't done in years," Mr Boyd said.

Around 2.1 million Australians are currently living with osteoarthritis. The prevalence of osteoarthritis is expected to increase by 58 percent by 2032 due to an [ageing population](#) and rising obesity rates.

Medibank Head of Member Health Service and Design Catherine Keating said Medibank wants to provide its customers with healthcare that gives them more choice and control in how they receive their care.

"It's part of our focus on taking the lead on driving preventative health because we know our customers want personalised support to improve their health and wellbeing."

More information: Comparing video-based telehealth-delivered exercise and weight loss programs with online education on outcomes of knee osteoarthritis: A randomized trial, *Annals of Internal Medicine* (2021).

Provided by University of Melbourne

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