

Guideline for the management of knee and hip osteoarthritis

Administrative report



Guideline for the management of knee and hip osteoarthritis: Administrative report

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We acknowledge the Traditional Custodians of the lands and seas on which we work and live, and pay our respects to Elders, past, present and future.



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Royal Australian College of General Practitioners

*Guideline for the
management of knee
and hip osteoarthritis*

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1. Responsible organisation

The update, publication and dissemination of the *Guideline for the management of knee and hip osteoarthritis* (OA guideline) was coordinated by The Royal Australian College of General Practitioners (RACGP).

2. Source of funding

The development of the OA guideline is funded in part by Medibank Better Health Foundation. Medibank Better Health Foundation provided \$66,667 in support for development of systematic literature reviews, data extraction and compilation of the Grading of Recommendations Assessment, Development and Evaluation (GRADE) summary report.

3. Guideline development working group

The guideline is intended for use by general practitioners (GPs) in primary care settings. An expert multidisciplinary working group was convened, comprising health professionals representing all disciplines relevant to settings in which patients with osteoarthritis (OA) may seek treatment. This working group ensured the robust and transparent development of the guideline in accordance with National Health and Medical Research Council (NHMRC) guideline processes. The working group is co-chaired by Professor David Hunter and Professor Kim Bennell.

3.1 Process and criteria for selection of members

During the planning stages of the project, the RACGP project team and co-chairs identified key stakeholder groups and individuals who should be involved in the development. This included relevant health professionals involved in all aspects of OA treatment, management, research, guidelines or standards development, and consumer representatives. Some members were nominated by their relevant professional organisations to represent the discipline, or identified by relevant consumer organisations as the organisational representative or as an individual with a musculoskeletal condition. Members were invited to join the working group by the chair.

Working group members provided the views of, and advocated for, the relevant disciplines, and participated in the decision-making process for the recommendations. This ensures all perspectives are considered and incorporated in the development of the guideline.

The multidisciplinary working group comprised representatives from:

- general practice
- rheumatology
- physiotherapy
- orthopaedic surgery
- sport and exercise medicine
- rehabilitation medicine
- consumer representation (individual and consumer organisation)
- academic research
- Medibank Better Health Foundation.

3.2 Members of the working group and declarations of interests

The co-chairs and working group members participated in the development of the guideline as detailed in section 6: Terms of reference.

Table 1. Members and declaration of interests

Name	Relevant discipline	Declarations of interest	Conflict management
Professor David Hunter Florance and Cope Chair, Institute of Bone and Joint Research, Kolling Institute, University of Sydney, NSW Rheumatologist, Royal North Shore Hospital, NSW	Rheumatology	<ul style="list-style-type: none"> • Merck Serono • Flexion • DonJoy Braces • Research with no remuneration in assistive walking devices, valgus unloading/realignment braces, weight management, glucosamine, chondroitin, weight management and exercise • Submitted research grant on stem cell therapy • Conducted systematic review on glucosamine 	Did not participate in discussion and formulating recommendations for fibroblast growth factor, platelet-rich plasma, stem cell therapy, realigning patellofemoral braces
Professor Kim Bennell Director, Centre for Health, Exercise and Sports Medicine, Department of Physiotherapy, University of Melbourne, Vic	Physiotherapy	<ul style="list-style-type: none"> • Secretary General, Osteoarthritis Research Society • International editorial board member, <i>Osteoarthritis and Cartilage</i> • Research with no remuneration in physical activity, muscle strengthening, taping, assistive walking devices, behavioural therapy, lateral wedged insoles, minimalist footwear, unstable shoes, acupuncture, cognitive behavioural therapy and exercise • Commercial interest in unloading shoes 	Did not participate in discussion and formulating recommendations for platelet-rich plasma, unloading shoes
Professor Michael Austin Associate Dean, School of Engineering, RMIT University, Melbourne, Vic	Consumer representative with osteoarthritis	None	
Professor Andrew Briggs Professor, School of Physiotherapy and Exercise Science, Faculty of Health Sciences, Curtin University, Perth, WA	Physiotherapy	<ul style="list-style-type: none"> • Director, HealthSense Aust Pty Ltd • Member, Australian Physiotherapy Association • Project lead, Victorian Osteoarthritis Model of Care project, under the auspices of the Victorian Musculoskeletal Clinical Leadership project supported by the Department of Health and Human Services • Member of the guidelines development group for the <i>Therapeutic Guidelines: Rheumatology, Version 3</i> • Developed the Australian Commission on Safety and Quality in Health Care <i>Osteoarthritis of the knee clinical care standard – The case for improvement</i> • Research with no remuneration in physical activity, muscle strengthening 	

Table 1. Members and declaration of interests

Name	Relevant discipline	Declarations of interest	Conflict management
Professor Rachelle Buchbinder Director, Monash Department of Clinical Epidemiology, Cabrini Hospital, Malvern, Vic Professor, Department of Epidemiology and Preventive Medicine, Monash University, Melbourne, Vic	Rheumatology	<ul style="list-style-type: none"> • President, Australian Rheumatology Association (ARA) • Chair, Knee Osteoarthritis Clinical Care Standard Topic Working Group, for the Australian Commission on Safety and Quality in Health Care (2015–16) • Member, Medical Services Advisory Committee (MSAC) (2016–present) • Member, Medicare Benefits Schedule (MBS) Review: Imaging of the Knee Working Group (2015–16) • Member, Writing Group (2015–16), <i>Therapeutic Guidelines: Rheumatology</i>, Version 3 • Founding member and chair, Executive Committee, Australia & New Zealand Musculoskeletal (ANZMUSC) Clinical Trial Network • Member, Working Group (ARA nominee), Australian Government Department of Health Medicare Benefits Schedule (MBS) Review of Hip Arthroscopy (2014–15) • Member, Expert Committee (ARA nominee), <i>Arthritis Australia Position Statement: Exercise for hip and/or knee osteoarthritis and rheumatoid arthritis</i> • Member, <i>Australian atlas of healthcare variation</i> Expert Advisory Group on Knee Pain for the Australian Commission on Safety and Quality in Health Care; numerous papers published on this topic • Member, Working Group (2006–08) developing RACGP <i>Primary care guidelines for the management of symptomatic osteoarthritis in adults</i> • Research with no remuneration in extracorporeal shockwave therapy 	Did not participate in discussion and formulating recommendation for platelet-rich plasma
Dr Stephen Bunker Clinical research advisor, Medibank Private Ltd, Melbourne, Vic	Medibank representative	None	
Professor Peter Choong Chair of Surgery, and Head of Department of Surgery, University of Melbourne at St Vincent's Hospital, Melbourne, Vic Director of Orthopaedics, St Vincent's Hospital, Melbourne, Vic Chair, Bone and Soft Tissue Sarcoma Service, Peter MacCallum Cancer Centre, Melbourne, Vic	Orthopaedic surgery	None	

Table 1. Members and declaration of interests

Name	Relevant discipline	Declarations of interest	Conflict management
Dr Dan Ewald Lead clinical advisor, North Coast Primary Health Network, Ballina, NSW General practitioner, Lennox Head Medical Centre, NSW, and Bullinah Aboriginal Health Service, Ballina, NSW Adjunct Associate Professor, University of Sydney and Northern River University Centre for Rural Health, NSW	General practice	None	
Professor Kieran Fallon Professor of Sport and Exercise Medicine, and Sport and Exercise Medicine Physician, Department of Rheumatology, Canberra Hospital, Canberra, ACT Past paid lecturer, Australian National University, Canberra, ACT	Sport and exercise medicine	None	
Mr Ben Harris (November 2016 – June 2017) General manager, Policy, Information and Programs, MOVE muscle, bone & joint health, Elsternwick, Vic	Consumer organisational representative	MOVE receives funding from Pfizer, Abbvie	Did not participate in discussion and formulating recommendations for TNF- α , anti-NGF inhibitors, methotrexate
Professor Rana Hinman Australian Research Council Future Fellow, Centre for Health, Exercise and Sports Medicine, Department of Physiotherapy, University of Melbourne, Vic	Physiotherapy	<ul style="list-style-type: none"> • Editorial board member, <i>Physical Therapy</i> (USA) • Member, Australian Physiotherapy Association • Member, Association of Rheumatology Health Professionals (USA) • Research with no remuneration in physical activity, muscle strengthening, taping, assistive walking devices, behavioural therapy, lateral wedged insoles, minimalist footwear, unstable shoes, patellar taping, acupuncture • Commercial interest in unloading shoes 	Did not participate in discussion and formulating recommendation for unloading shoes
Dr Leonie Katekar Clinical director, Medibank Private Ltd, Melbourne, Vic	Medibank representative	Board Member, East Melbourne Primary Health Network	

Table 1. Members and declaration of interests

Name	Relevant discipline	Declarations of interest	Conflict management
Associate Professor Marie Pirotta General practitioner Employee at Health Services Commission, Melbourne, Vic Associate Professor, Department of General Practice, University of Melbourne, Vic	General practice	<ul style="list-style-type: none"> • Member, Australian Medical Association • Member, Australian Association of Academic Primary Care • Board member, Management of Rosary Homes • Education grant, Amgen • Research with no remuneration in acupuncture 	
Dr Michael Ponsford Rehabilitation medicine specialist, Epworth Hospital, Richmond, Vic	Rehabilitation medicine	None	
Associate Professor Morton Rawlin General practitioner, Macedon Medical Centre, Manningham, Vic	General practice	<ul style="list-style-type: none"> • Medical Director, Royal Flying Doctor Service Victoria • Board member, Rural Workforce Agency Victoria • Chair, General Practice Mental Health Standards Collaboration (GPMHSC) • Board member, Mental Health Professionals' Network (MHPN) • Chair, Dermatology network, RACGP 	
Dr Xia Wang Epidemiologist, University of Sydney, NSW	Epidemiology	Submitted research grant on stem cell therapy	Did not participate in discussion and formulating recommendation for stem cell therapy
Dr Samuel Whittle Senior consultant rheumatologist, Queen Elizabeth Hospital, Woodville South, SA	Rheumatology	<ul style="list-style-type: none"> • Honorary Treasurer, Australian Rheumatology Association • Member, Executive Working Group, Australia & New Zealand Musculoskeletal (ANZMUSC) Clinical Trials Network • Travel support, consultancy or speaker fees in last 12 months from Novartis, Pfizer, Janssen 	

4. Development of recommendations

The guideline working group is chaired by two experts in the OA field, Professor David Hunter and Professor Kim Bennell. Medibank Better Health Foundation has clinical representatives on this multidisciplinary working committee. Input is provided by the working group, with discussions and recommendations, and potentially controversial issues discussed. Decisions are agreed upon by the entire committee. A voting system ensures consensus agreement once the recommendations are confirmed. To ensure conflict of interest procedures were upheld, all clinical representatives (including those from Medibank) were excluded from the development of recommendations on topics where it was agreed there may be a real or perceived conflict of interest. Members and declarations of interest are listed in Table 1 of this administrative report. The method used to formulate and arrive at consensus-based recommendations is described in section 2.4 of the OA guideline.

5. Conflicts of interest

This guideline has been produced in accordance with the rules and processes outlined in the [RACGP Conflict of Interest Policy](#).

Conflict of interest (COI) disclosures are available in Table 1.

All working group members are required to complete a COI register of actual, potential and perceived COI as part of the RACGP Conflict of Interest Policy. Declarations in this register include membership of committees, potential COI from different sources of income, office holder, trusteeship, agreements and other interests, and any other relevant issues that may be a reason for potential conflicts of interest.

COI declaration is a standing item in the agenda for all meetings. At the request of the chair, COI is declared and noted at the start of the meeting. In addition, individuals must disclose any relevant interests relating to an intervention prior to commencement of discussion for the intervention, which is captured in the minutes of the meeting. All members must disclose COI in any matter being considered for a decision. Any member with a COI must not participate, directly or indirectly, in a decision on the matter. If a member declared a conflict in relation to a specific intervention (with the exception of conducting research), the member did not participate in the discussion or decision-making for the intervention.

6. Terms of reference

6.1 Co-chair responsibilities

- Agree on the preliminary scope and project approach
- Work with RACGP project staff to identify appropriate members of the working group, help direct the necessary literature searches and other relevant tasks
- Liaise with the RACGP project staff to ensure the project is delivered on time and within specifications, and attend all meetings
- Responsibilities of working group member as per below

6.2 Working group member responsibilities

- Identify the key questions to be answered using the PICO (patient/population/problem, intervention, comparison/control, outcome) format
- Develop content and recommendations

- Through consensus (Delphi survey), agree on inclusion or exclusion of content
- Develop additional resources, such as the summary of recommendations and/or treatment algorithm
- Complete and fulfil all relevant legal agreements, including the COI declaration
- Review input/feedback from all relevant stakeholders
- Providing timely updates to the working group and RACGP project staff when required
- Respond to project communication via email or meeting in a timely manner
- Attend meetings

7. Public consultation

The guideline was released for public consultation from 20 November 2017 to 20 December 2017. The public consultation was published and promoted via the RACGP website and RACGP social media channels, and by the NHMRC via NHMRC Health Tracker.

Invitations were sent to relevant federal and state government agencies, including the Australian Government Department of Health Chief Medical Officer and state chief health officers. The consultation documents were also sent via email to a wide range of experts and potential users identified by the project team and working group.

Key internal stakeholders invited to provide submissions:

- RACGP Aboriginal and Torres Strait Islander Health faculty
- RACGP Specific Interests Integrative Medicine working group
- RACGP Specific Interests Musculoskeletal Medicine network
- RACGP Specific Interests Pain Management network
- RACGP Specific Interests Sports and Exercise Medicine network

Key external stakeholders invited to provide submissions included:

- Arthritis Australia
- Australian Commission on Safety and Quality in Health Care
- Australian Orthopaedic Association
- Australian Physiotherapy Association
- Australian Primary Care Nurses Association
- Australian Psychological Society
- Australian Rheumatology Association (of the Royal Australasian College of Physicians)
- Australasian College of Sports and Exercise Medicine Physicians
- Consumers Health Forum of Australia
- Dietitians Association of Australia
- Exercise and Sports Science Australia
- Faculty of Rehabilitation Medicine, Royal Australasian College of Physicians
- MOVE muscle, bone & joint health
- Occupational Therapy Australia
- Painaustralia

Submissions to the public consultation were received from professional organisations as well as individuals from a diverse range of disciplines. The de-identified public consultation summary accompanies the guideline.

Submissions were received from:

- Arthritis Australia
- Australian Acupuncture & Chinese Medicine Association Ltd
- Australasian College of Sports and Exercise Physicians
- Australian Commission on Safety and Quality in Health Care
- Australian Medicines Handbook
- Australian Physiotherapy Association
- Australian Psychological Society
- Deputy Chief Medical Officer, Australian Government Department of Health
- Dietitians Association of Australia
- Halyard Health
- Musculoskeletal Network, NSW Agency for Clinical Innovation
- NPS MedicineWise
- Occupational Therapy Australia
- Painaustralia
- Representative from Queensland Health
- Representatives from RACGP Expert Committees, RACGP Specific Interests Musculoskeletal Medicine network, RACGP Specific Interests Pain Management network, RACGP Specific Interests Sports and Exercise Medicine network, RACGP Specific Interests Integrative Medicine working group
- Individual GPs, healthcare practitioners including rheumatologists, specialist pain physicians, musculoskeletal medicine practitioners, sports physicians, musculoskeletal and sports physiotherapists, pharmacists and accredited exercise physiologists



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