

Outpatient physiotherapy versus home-based rehabilitation for patients at risk of poor outcomes after knee arthroplasty: CORKA RCT

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Disclaimer: This report contains transcripts of interviews conducted in the course of the research and contains language that may offend some readers.

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Plain English summary

CORKA RCT

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Plain English summary

Knee replacement is a common treatment for knee osteoarthritis. Most people do well after surgery; however, a small group of people do not report a good outcome. One way we could try to improve this is by considering the way that rehabilitation is offered after surgery. We identified people thought to be at risk of a poor outcome after knee replacement. We compared a newly designed rehabilitation programme that was undertaken in people's own homes with physiotherapy as it is currently offered. This new programme was delivered by rehabilitation assistants under the guidance of qualified therapists. We assessed these treatments by measuring three functional tests: walking in a figure of eight, sitting and standing from a chair in 30 seconds and standing on one leg. In addition, we asked people to complete questionnaires about their knee, what activities they could perform, how physically active they were and their quality of life. We also recorded the use of health-care services, time off work and any informal care that people received. The results showed that both groups had improved by a similar amount at 6 months and 12 months after surgery. The new rehabilitation programme that was designed for the study was cheaper to deliver than standard physiotherapy, when all costs were considered. We think that future research should look at developing better tools to predict who might be at risk of not doing well after surgery, and to determine the ideal make-up of the rehabilitation team that delivers treatment after knee replacement.

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This report

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