

Matthew Willett – IFOMPT report 2024 – MACP Bursary

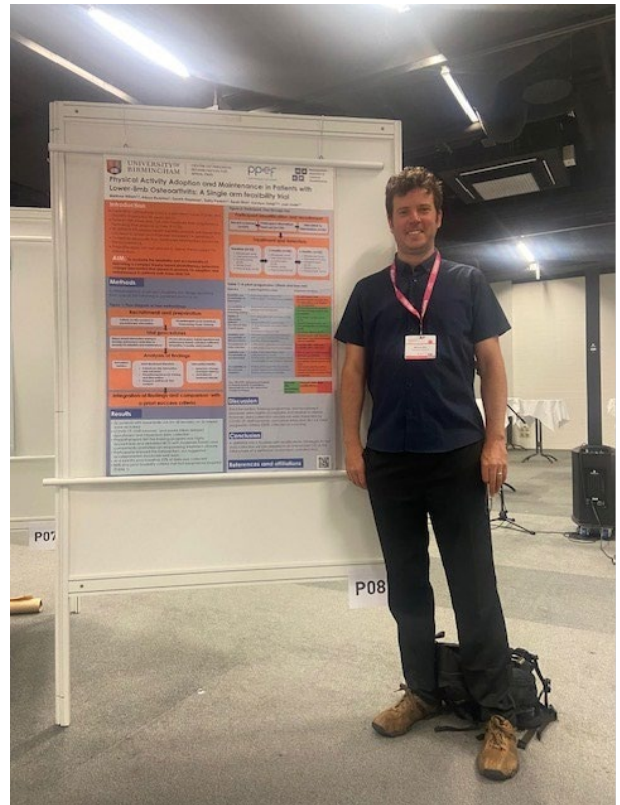
Lower-limb (hip and knee) osteoarthritis (OA) is a prevalent condition that causes substantial pain and disability in adults over 45 years of age. Optimising physical activity (PA) can help patients with lower-limb OA self-manage their symptoms. However, people with lower-limb OA tend to be less active than people without musculoskeletal pain.

This feasibility trial used a mixed methods single-arm design to evaluate the feasibility and acceptability of the first theoretically grounded physiotherapy behaviour change intervention that aimed to promote PA adoption and maintenance in people with lower-limb OA.

36 patients (n=26 females) with lower-limb OA were recruited from one NHS trust. Descriptive statistics and a CONSORT flow diagram provided an overview of the trial population and flow. Patient reported and performance-based outcomes, and direct measures of PA (accelerometers) were completed at baseline, 3 months, and 6 months post baseline. Participants (n=10), physiotherapists (n=5) and research staff (n=5) attended semi-structured interviews to give their perspectives on the trials' feasibility and acceptability and intervention fidelity was assessed. Quantitative and qualitative data were integrated to evaluate whether each a priori success criteria had been achieved.

Overall, 82% of trial objectives met the success criteria. The intervention, theoretical training programme, and recruitment processes were highly acceptable and feasible to deliver with minor modifications. However, the data collection processes did not meet the progression criteria with only 48% and 33% of valid outcome data recorded at 3 and 6-months respectively post baseline.

Using the wrist as the accelerometer wear point, prioritising in person assessments, and securing increased funding for research staff were accepted as feasible adaptations. Further pilot work to clarify wrist specific PA accelerometer cut points in people with lower-limb OA will be conducted prior to undertaking a definitive trial.



My profound thanks goes to the Musculoskeletal Association of Chartered Physiotherapists (MACP) for providing the travel award which enabled me to attend IFOMPT 2024. The award enabled me to disseminate the trials' findings to a global physiotherapy audience and facilitated conversations for potential research collaborations in behaviour change intervention development. I am also grateful to be a member of the MACP, an organisation who continue to lead the development of musculoskeletal physiotherapy knowledge and practice.