

Abstract

# Behaviours and Attitudes to Joint Issues and Osteoarthritis <sup>†</sup>

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Osteoarthritis (OA) is a major cause of disability worldwide and in New Zealand, and a huge burden on the individual and society. To date effective early diagnosis, prevention and treatment strategies are lacking. This study examined behaviours and attitudes towards joint issues and OA.

Using a composite score from the KOOS (Knee Injury and Osteoarthritis Outcome Score) questionnaire, 183 participants with increased joint issues (scoring in the bottom 2 quartiles) were identified from the REACH study cohort ( $n = 367$ ). These participants were sent a questionnaire on behaviours and attitudes regarding joint issues and OA. Associations between patterns of behavior and attitudes were analysed in the 95 participants (58 females; 37 males) who completed the questionnaire.

Most (87%) participants experienced joint pain and all experienced one or more joint symptoms even though half ( $n = 48$ ) had no OA diagnosis. Those without a medical diagnosis were significantly more likely to experience little/no pain and little/no impact on lifestyle than those diagnosed ( $\chi^2 = 8.98$ ,  $p = 0.003$ ;  $\chi^2 = 16.3$ ,  $p = 0.001$  respectively). Increased pain and impact on lifestyle were associated with increased pain relief intake ( $\chi^2 = 14.3$ ,  $p = 0.001$ ;  $\chi^2 = 15.4$ ,  $p = 0.001$  respectively). Taking supplements and homeopathic remedies were not significantly associated with OA diagnosis, pain or impact on lifestyle. Exercise was the most common therapy (81% participants) and most had a positive attitude towards all treatments experienced. The majority however hadn't tried a variety of treatments with the attitude that joint issues are "just part of getting old" being the most common barrier (47%).

Joint symptoms are prevalent even without OA diagnosis and there is reliance on pharmaceutical management of OA and a lack of knowledge and positive attitudes toward alternative treatment strategies. This highlights the need for the development of early diagnosis techniques, improved management methods and treatments for OA.



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