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Effects of low-intensity pulsed ultrasound on recovery of physical impairments, functional performance and quality of life after total knee arthroplasty: Protocol for a quasi-experimental study (2019) *Medicine (United States)*, 98 (36), art. no. e17045, .

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#### Abstract

Introduction: The presence of significant pain and swelling during the acute stage following total knee arthroplasty (TKA) may limit the patients' ability to cooperate in intensive physiotherapy interventions. Low-intensity pulsed ultrasound is one of the modalities that can be used for acute pain and swelling management. However, only one study investigated the effect of this modality in patients with TKA. There is limited documentation of the effects of combining low-intensity pulsed ultrasound in TKA rehabilitation in the recovery of physical impairments and how these influence the recovery of function after TKA. Therefore, this study is proposed with the aim to evaluate the effects of low-intensity pulsed ultrasound as an adjunct to conventional physiotherapy on the recovery of physical impairments, functional performance and quality of life after TKA surgery. Methods: This is an assessor-blinded quasi-experimental study comparing two approaches of physiotherapy, namely pulsed ultrasound-added physiotherapy and conventional physiotherapy. Total number of participants with TKA required for this study will be calculated based on the result of a pilot study. Participants will be alternately allocated into either pulsed ultrasound-added physiotherapy group (low-intensity pulsed ultrasound and conventional physiotherapy) or control group (conventional physiotherapy). Pulsed ultrasound-added physiotherapy group will receive low-intensity pulsed ultrasound starting at post-operative day 2 (4-5 times for the first-week after surgery and 2-3 times a week for a further 2 weeks). Both groups will receive conventional physiotherapy 4 to 5 times for the first-week after surgery and 2 to 3 times a week for a further 11 weeks. This procedure and process will be tested and established in a pilot study. Primary outcomes of interest are pain level, swelling, active range of knee motion, and quadriceps strength. The secondary outcomes are functional performance and quality of life. Discussion: This study will fill the gaps in knowledge relating the benefits of including low-intensity pulsed ultrasound into conventional physiotherapy for patients with TKA. Copyright © 2019 the Author(s).

#### Author Keywords

low-intensity pulsed ultrasound; physiotherapy; total knee arthroplasty

#### Index Keywords

aged, clinical protocol, convalescence, human, knee replacement, middle aged, outcome assessment, quality of life, rehabilitation, ultrasound, very elderly; Aged, Aged, 80 and over, Arthroplasty, Replacement, Knee, Clinical Protocols, Humans, Middle Aged, Outcome Assessment (Health Care), Quality of Life, Recovery of Function, Ultrasonic Waves

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### References

- Veerapen, K., Wigley, R.D., Valkenburg, H.
   Musculoskeletal pain in Malaysia: A COPCORD survey (2007) *Medline*, 34, pp. 207-213.
- Guillemin, F., Rat, A.C., Mazieres, B.
   Prevalence of symptomatic hip and knee osteoarthritis: A two-phase populationbased survey

   (2011) Osteoarthr Cartil, 19, pp. 1314-1322.
- Liu, Y., Zhang, H., Liang, N.

Prevalence and associated factors of knee osteoarthritis in a rural Chinese adult population: An epidemiological survey (2016) *BMC Public Health*, 16, pp. 1-8.

- Pal, C., Singh, P., Chaturvedi, S.
   Epidemiology of knee osteoarthritis in India and related factors (2016) Indian J Orthop, 50, pp. 518-522.
- Oo, W.M., Thae Bo, M.
   Efficacy of physical modalities in knee osteoarthritis: Recent recommendations (2016) Int J Phys Med Rehabil, 4, pp. 3-4.
- Zeng, C., Li, H., Yang, T.
   Electrical stimulation for pain relief in knee osteoarthritis: Systematic review and network meta-analysis

   (2015) Osteoarthr Cartil, 23, pp. 189-202.
- Nordin, N.A.M., Lyn, K.S.
   Effects of passive joint mobilization on patients with knee osteoarthritis (2011) Sains Malaysiana, 40, pp. 1461-1465.
- Beulah Jebakani, D., Sethu, G., Pahinian, A.
   Effects of therapeutic exercises on pain and physical disability in adults with knee osteoarthritis

   (2015) Asian J Sci Res, 8, pp. 74-79.
- Johar, M.N., Nordin, N.A.M., Mesbah, N.
   Effects of therapy-based virtual reality on walking endurance and quality of life of persons with knee osteoarthritis

   (2019) Malaysian J Heal Sci, 17, pp. 113-120.
- Narayanan, S., Suhail, A., Harjeet, S.
   Efficacy of intra-articular injection of hyaluronic acid in the treatment of knee osteoarthritis

   (2009) Malaysian Orthop J, 3, pp. 19-23.
- Verra, W.C., Witteveen, K.Q., Maier, A.B.
   The reason why orthopaedic surgeons perform total knee replacement: Results of a randomised study using case vignettes

   (2016) Knee Surg Sports Traumatol Arthrosc, 24, pp. 2697-2703.
- Van Manen, M.D., Nace, J., Mont, M.A.
   Management of primary knee osteoarthritis and indications for total knee arthroplasty for general practitioners (2012) *J Am Osteopath Assoc*, 112, pp. 709-715.
- Skou, S.T., Roos, E.M., Laursen, M.B.
   A randomized, controlled trial of total knee replacement (2015) N Engl J Med, 373, pp. 1597-1606.
- Suhail, A., Idham, H., Norhamdan, M.Y. (2009) *Early Functional Outcome of Total Knee Arthroplasty*, 3, pp. 33-35.
- Heiberg, K.E., Bruun-Olsen, V., Mengshoel, A.M. Pain and recovery of physical functioning nine months after total knee arthroplasty (2010) *J Rehabil Med*, 42, pp. 614-619.
- Bade, M.J., Kohrt, W.M., Stevens-Lapsley, J.E. Outcomes before and after total knee arthroplasty compared to healthy adults (2010) *J Orthop Sport Phys Ther*, 40, pp. 559-567.
- Vuorenmaa, M., Ylinen, J., Kiviranta, I.

Changes in pain and physical function during waiting time and 3 months after knee joint arthroplasty (2008) *J Rehabil Med*, 40, pp. 570-575.

- Pua, Y.H.
   The time course of knee swelling post total knee arthroplasty and its associations with quadriceps strength and gait speed (2015) *J Arthroplasty*, 30, pp. 1215-1219.
- Mizner, R.L., Petterson, S.C., Clements, K.E.
   Measuring functional improvement after total knee arthroplasty requires both performancebased and patient-report assessments: A longitudinal analysis of outcomes (2011) J Arthroplasty, 26, pp. 728-737.
- Pua, Y.H., Ong, P.H., Chong, H.C.
   Knee extension range of motion and self-report physical function in total knee arthroplasty: Mediating effects of knee extensor strength (2013) BMC Musculoskelet Disord, 14, pp. 1-7.
- Holm, B., Kristensen, M.T., Bencke, J.
   Loss of knee-extension strength is related to knee swelling after total knee arthroplasty

   (2010) Arch Phys Med Rehabil, 91, pp. 1770-1776.
- Thomas, A.C., Judd, D.L., Davidson, B.S.
   The knee quadriceps/hamstrings co-activation increases early after total knee arthroplasty

   (2014) *Knee*, 21, pp. 1115-1119.
- Robbins, S.M., Rastogi, R., McLaughlin, T.-L.
   Predicting acute recovery of physical function following total knee joint arthroplasty (2014) *J Arthroplasty*, 29, pp. 299-303.
- Markert, S.E.
   The use of cryotherapy after a total knee replacement (2011) Orthop Nurs, 30, pp. 29-36.
- Chughtai, M., Sodhi, N., Jawad, M.
   Cryotherapy treatment after unicompartmental and total knee arthroplasty: A review (2017) *J Arthroplasty*, 32, pp. 3822-3832.
- Chughtai, M., Elmallah, R., Mistry, J.
   Nonpharmacologic pain management andmuscle strengthening following total knee arthroplasty

   (2015) J Knee Surg, 29, pp. 194-200.
- Santhna, L.P., Norhamdan, M.Y., Damrudi, M.
   The effectiveness of music therapy for postoperative pain control among total knee replacement patients (2015) *Med Health*, 10, pp. 66-79.
- Aris, A., Sulaiman, S., Che Hasan, M.K.
   The influence of music therapy on mental well-being among postoperative patients of total knee arthroplasty (TKA) (2019) Enferm Clin,
   In press; accepted April 17, 2019
- Thacoor, A., Back, D., Sandiford, N. **Cryotherapy following total knee arthroplasty: What is the evidence?** (2018) *J Rheumatol Arthritic Dis*, 3, pp. 1-4.

- Watson, T. (2017) *Therapeutic Ultrasound*, Electrotherapy on the web. Accessed February 4, 2018
- Kang, J.I., Kim, Y.-N., Choi, H.
   Effects of low-intensity pulsed ultrasound and cryotherapy on recovery of joint function and C-reactive protein levels in patients after total knee replacement surgery

   (2014) J Phys Ther Sci, 26, pp. 1033-1036.
- McCartney, C.J.L., Nelligan, K.
   Postoperative pain management after total knee arthroplasty in elderly patients: Treatment options (2014) *Drugs Aging*, 31, pp. 83-91.
- Henderson, K.G., Wallis, J.A., Snowdon, D.A.
   Active physiotherapy interventions following total knee arthroplasty in the hospital and inpatient rehabilitation settings: A systematic review and meta-analysis (2018) *Physiotherapy*, 104, pp. 25-35.
- Noh, E., An, C.
   Changes in pain, swelling, and range of motion according to physical therapy intervention after total knee arthroplasty in elderly patients (2015) *Phys Ther Rehabil Sci*, 4, pp. 79-86.
- Artz, N., Elvers, K.T., Lowe, C.M.
   Effectiveness of physiotherapy exercise following total knee replacement: Systematic review and metaanalysis

   (2015) BMC Musculoskelet Disord, 16, pp. 1-21.
- Lowe, C.J.M., Barker, K.L., Dewey, M.
   Effectiveness of physiotherapy exercise after knee arthroplasty for osteoarthritis: Systematic review and meta-analysis of randomised controlled trials (2007) *BMJ*, 335, pp. 1-9.
- Pozzi, F., Snyder-Mackler, L., Zeni, J.
   Physical exercise after knee arthroplasty: A systematic review of controlled trials (2013) Eur J Phys Rehabil Med, 49, pp. 877-892.
- Boeckstyns, M.E., Backer, M.
   Reliability and validity of the evaluation of pain in patients with total knee replacement (1989) Pain, 38, pp. 29-33.
- Jakobsen, T.L., Christensen, M., Christensen, S.S.
   Reliability of knee joint range of motion and circumference measurements after total knee arthroplasty: Does tester experience matter? (2010) *Physiother Res Int*, 15, pp. 126-134.
- Yuksel, E., Kalkan, S., Cekmece, S.
   Assessing minimal detectable changes and test-retest reliability of the timed up and go test and the 2- minute walk test in ratients with total knee arthroplasty (2017) *J Arthroplasty*, 32, pp. 426-430.
- Almeida, G.J., Schroeder, C.A., Gil, A.B.
   Interrater reliability and validity of the stair ascend/descend test in subjects with total knee arthroplasty

   (2010) Arch Phys Med Rehabil, 91, pp. 932-938.
- Jakobsen, T.L., Kehlet, H., Bandholm, T.

**Reliability of the 6-min walk test after total knee arthroplasty** (2013) *Knee Surg Sports Traumatol Arthrosc*, 21, pp. 2625-2628.

- Dakin, H., Gray, A., Fitzpatrick, R.
   Rationing of total knee replacement: A cost-effectiveness analysis on a large trial data set

   (2012) BMJ Open, 2, pp. 1-9.
- Van Egmond, J.C., Verburg, H., Mathijssen, N.M.
   The first 6 weeks of recovery after total knee arthroplasty with fast track (2015) Acta Orthop, 86, pp. 708-713.
- Chen, W.-S., Appannah, G., Varatharajan, S.
   Psychometric properties of the Malay version of the EQ-5D in Malaysia (2010) SEGi Rev, 3, pp. 45-51.
- Whitehead, A.L., Julious, S.A., Cooper, C.L. Estimating the sample size for a pilot randomised trial to minimise the overall trial sample size for the external pilot and main trial for a continuous outcome variable (2016) *Stat Methods Med Res*, 25, pp. 1057-1073.
- McCoy, E. Understanding the intention-to-treat principle in randomized controlled trials (2017) West J Emerg Med, 18, pp. 1075-1078.
- Da Silva, R.R., Santos, A.A.M., De Sampaio-Carvalho-Júnior, J. Quality of life after total knee arthroplasty: Systematic review (2014) *Rev Bras Ortop*, 49, pp. 520-527.

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