Objective.– To determine the effectiveness of a home-based exercise program performed at home and supervised by a physiotherapist and identify factors of adherence to the program.

Methods.– Fifty patients participated in this study. Patients received a home exercise program supervised during two months to improve the strength of the lower limbs, endurance and balance. Evaluation parameters were: VAS pain, WOMAC and Lequesne index, 6-minute walk test and quality of life (SF36).

Results.– At the end of the program, we noted a significant improvement in the measured parameters. At 6 months following program, only 33% of patients were compliant to the home-based exercise program. Exercise adherence factors were: high school level, initial functional disability, and high satisfaction with the program.

Conclusion.– Exercises performed at a home rehabilitation program are effective in people with knee osteoarthritis. They should include exercises adapted to functional capacity and pain level of the patient and require education and motivation of the patient.

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Correlations between clinical-functional parameters in hip osteoarthritis

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Objective.– We aimed to establish the correlations between pain, functional impact and disability in hip osteoarthritis patients.

Methods.– We evaluated 144 patients with hip osteoarthritis who met the inclusion criteria. All followed a rehabilitation program for 12 days, repeated after 6 months and took medication for osteoarthritis and associated disorders. Intensive rehabilitation program consisted of: electrotherapy, massage, paraffin application, kinetic therapy. We performed evaluations at admission, before patients started the rehabilitation program, at discharge, after 6 months and after 1 year, using VAS pain scale, Lequesne functional index and HAQ index. We used the Pearson coefficients and significance tests of these coefficients.

Results.– Correlations between pain and functional indicators were weak, but statistically significant. Pain poorly correlated with functional impact, not statistically significant at admission, but statistically significant at discharge and at 6 months. Correlation of pain with disability was low at admission, but highly statistically significant and at 6 months decreased, remaining statistically significant. Correlation between functional impact and disability was weak, statistically not significant at first admission, statistically significant at discharge and at 6 months.

Conclusion.– The highest degree was seen for the correlation of pain with quality of life, which shows that the disease undoubtedly affects quality of daily life.

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