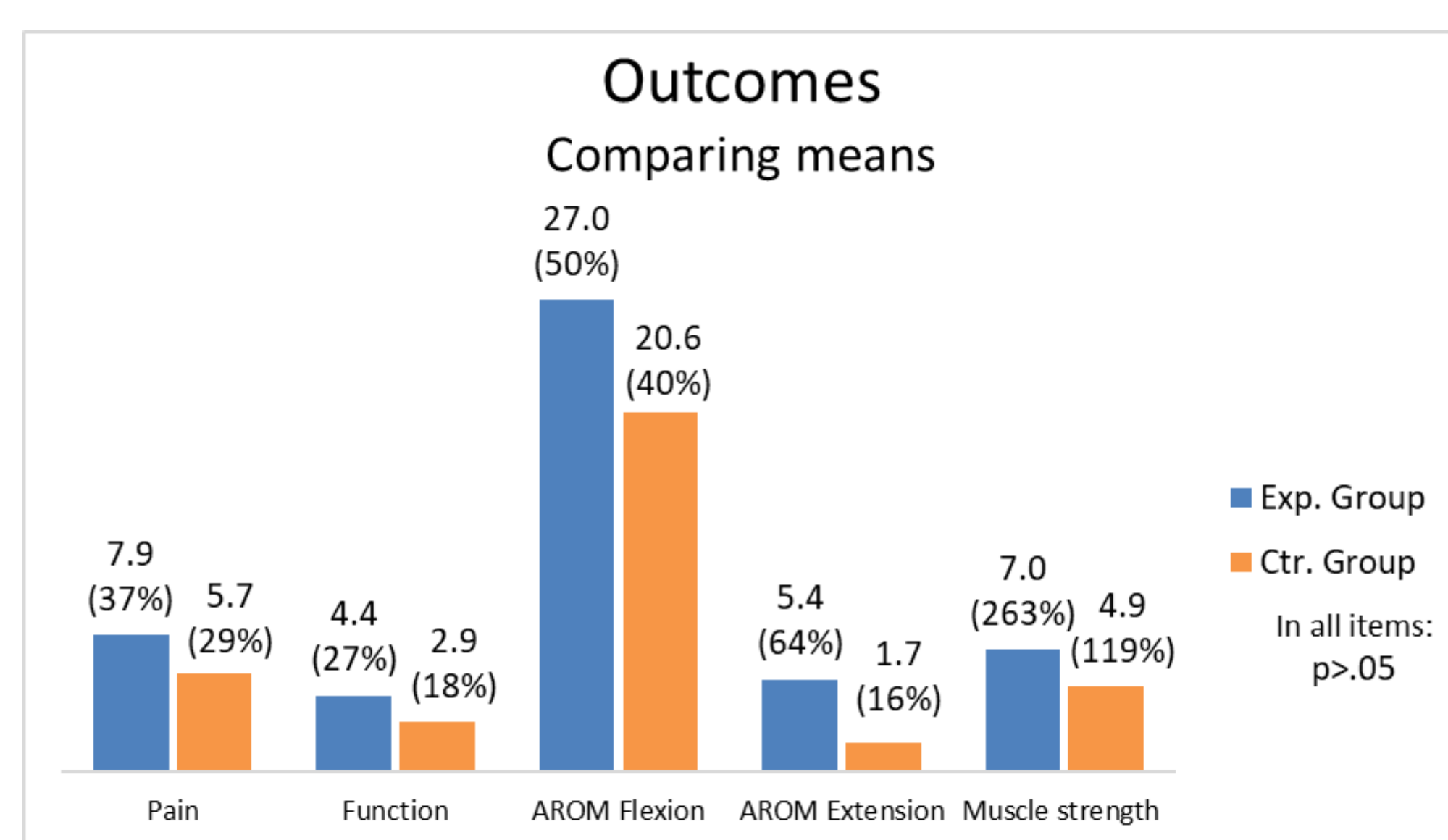


Less face-to-face physiotherapy + patient empowering = better outcomes at lower cost

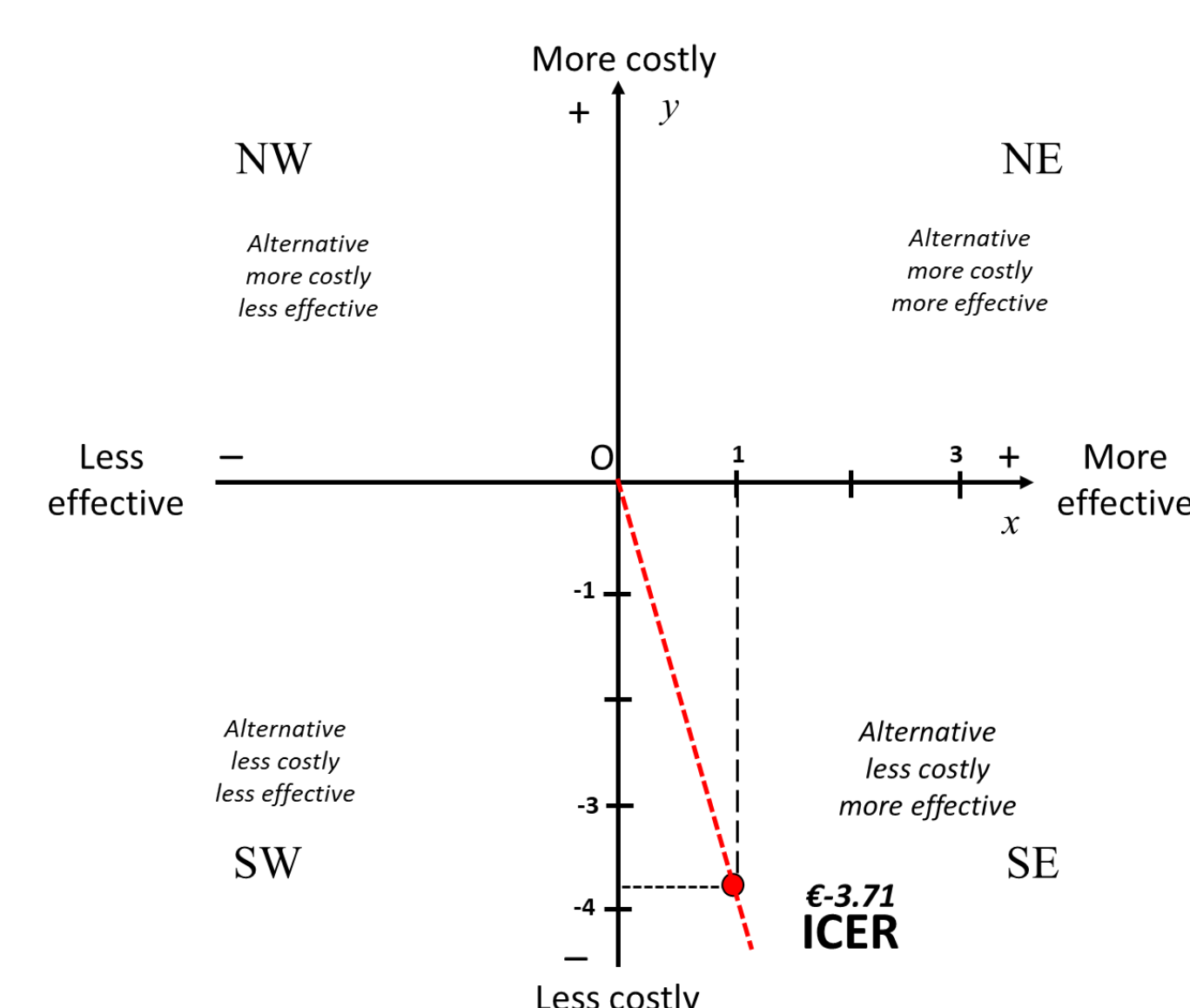
The outcomes of empowering individuals after total knee arthroplasty: A randomized controlled trial.

Background: The rehabilitation of individuals after total knee arthroplasty is essential to optimize outcomes. The number of surgeries has been increasing significantly worldwide, overburdening healthcare systems with rising associated cost.

Result 1: The graph shows the comparison of changes observed from baseline to endline in both two groups.



Result 2: The incremental cost-effectiveness ratio achieved shows experimental group emerged as the cost-effective alternative.



Methods

- 1 Single-centre experimental study; 5 weeks; pre-post assessments .
- 2 Individuals aged ≥ 65 following primary Total Knee Arthroplasty referred outpatient PT.
- 3 Two randomized groups:
 - *Experimental group* (n=15): face-to-face physiotherapy 2 per week + home exercises;
 - *Control group* (n=9): face-to-face physiotherapy 3 per week.
- 4 Rehabilitation plans compared by cost-effectiveness analysis.
- 5 Effectiveness measure through:
 - *Pain* and *function* with Oxford Knee Score (version 12-60 points); *active range of movement* in degrees, with goniometer; *muscle strength* by the number of stands, with 30-second chair stand test.
- 6 Economic evaluation by calculating the incremental cost-effectiveness ratio (ICER).

Considerations: The empowerment of individuals through the teaching of home exercises is a useful tool for individuals following total knee arthroplasty, providing same health benefits at a lower cost to the hospital. It also reduces the need for hospital visits, resulting in economic savings for individuals and families, as well as a reduction in environmental footprint.

PRESENTED AT:

