



AOA

AUSTRALIAN
ORTHOPAEDIC
ASSOCIATION

MEDIA RELEASE

Knee rehabilitation needs clinical guidelines to be better understood

Rehabilitation after total knee replacement is vital for the long-term recovery of the patient and their improved quality of life; however, recent analysis on the benefits of outpatient versus inpatient rehabilitation is flawed due to inadequate clinical guidelines, issues surrounding data, and the competing interests of its authors.

The Australian Orthopaedic Association (AOA) believes that the medical profession needs to better understand patient needs and circumstances before judgements are made about the benefits of a particular program of post-surgery recovery.

Australian Orthopaedic Association President Dr Lawrence Malisano said, "Rehabilitation is an extremely personal and individual experience where the success, speed and length of time can be influenced by several factors, including age, functional limitations, pre-existing injuries and trauma, associated co-morbidities, and whether the patient has adequate support at home.

"The problem with recent research and analysis is that total knee replacement rehabilitation is hampered by a lack of clear, evidence-based clinical guidelines with respect to overall best practice for post-surgical rehabilitation. What we have now is that some hospitals are having more success at inpatient recovery while others are seeing more benefit using outpatient recovery programs."

"It is clear that not everyone needs in-hospital rehabilitation. What is unclear is who benefits from in-home versus in-hospital rehabilitation. At this time, we just don't have the data to be able to categorically say that a particular subgroup of the Australian population benefits over another in regard to rehabilitation programs," Dr Malisano said.

A recent study into inpatient knee rehabilitation programs also called into question the competing interests of professionals examining the issue.

"The recent MJA article entitled *Predictors of inpatient rehabilitation after total knee replacement: an analysis of private hospital claims data* could be perceived as being a closed shop due to the authors' alliances to Medibank.

"While the MJA article discloses the 'competing interests' of the authors, it does call into question MJA's decision to publish the article, based on the real and perceived conflicts of interest and the closed sample size sourced from a single institution.

"In its editorial guidelines, the MJA gives low priority to research from a single institution or research that has a small sample size. The fact that it chooses to publish



AOA

AUSTRALIAN
ORTHOPAEDIC
ASSOCIATION

an article that only quotes research from a single publicly listed institution and that is written by consultants paid by that very same institution is concerning.

“As a profession, there is a lot of merit in developing clinical guidelines around knee rehabilitation; however, greater rigor around research, transparency and data needs to be developed to ensure effectiveness,” Dr Malisano said.

Media Enquiries

Ben McAlary
McAlary Media
+ 61 417 351 724