

REFERRAL FOR CONSIDERATION OF PRIMARY HIP OR KNEE REPLACEMENT FOR PATIENTS WITH OSTEOARTHRITIS

CRITERIA BASED ACCESS

Most patients with osteoarthritis of the hip or knee can initially be managed in primary care by following the NICE guidance (CG177) for managing osteoarthritis.

Offer the following to all people with clinical osteoarthritis:

- Access to appropriate information and advice regarding the condition
- Advice on activity and exercise, diet, smoking cessation
- Interventions to achieve weight loss if the person is overweight or obese.

Before referring a person with osteoarthritis for consideration of joint surgery, clinicians should ensure that conservative management has been attempted and the patient has been offered suitable non-surgical treatment options.

Where available, patients should have been assessed by appropriate intermediate care services (e.g., The Orthopaedic Interface Service). Further support can also include:

- Individualised self-management strategies
- Joint injections
- Pain medication
- Local heat or cold therapy
- Advice on suitable footwear

Shared decision making is important when discussing the possibility of joint surgery. Give patients information about:

- The benefits and risks of surgery and the potential consequences of not having surgery
- Recovery and rehabilitation after surgery
- How having a prosthesis might affect an individual?

Consider referral for joint surgery for people with osteoarthritis who:

- Experience joint symptoms (pain, stiffness, and reduced function) that have a substantial impact on their quality of life,
- Symptoms are refractory to non-surgical treatment.

Refer for consideration of joint surgery before there is prolonged and established functional limitation and severe pain.

Smoking cessation is recommended for all patients considering the possibility of surgery. For help to quit smoking please contact your local Stop Smoking Service or contact your GP Surgery.