

Weight Loss



Mid stages



Works best in stage 1 & 2

What is it?

Losing weight through diet and exercise.

Every 1 pound of weight increases the force through the joint by 3 - 6 times. By losing weight, you will slow down the joint wear, decrease the pain and improve function.

You'll also reduce the risk of developing osteoarthritis as well as surgical and anaesthetic risks later on.



Benefits

21% - 33% decrease in arthritis symptoms (joint wear, disease progression, pain levels).

Improves activities of daily living (ADL), overall mobility plus cardiovascular and respiratory health.



Risks

No major risks identified.

Rare: sudden extreme dieting may cause an electrolyte imbalance and affect organ function.



Very low cost



No more than usual



No more than usual



No more than usual



No more than usual



No more than usual



No more than usual



No more than usual



No more than usual



No more than usual



No more than usual

Limitations due to treatment



Video

What does it involve?

Bringing BMI and waist circumference down.

Aim to bring weight down by 5% in a 20-week period.

Commitment to a balanced, low calorie and low-fat diet.

Self-control and behavioural changes including monitoring portion size and avoiding snacking.

Effort/burden

Consistent adherence to a diet plan.

Avoiding temptation, succumbing to cravings and losing control.

May require co-operation from family members.

Benefits

Losing even a few pounds can improve arthritis symptoms.

Studies say you can experience between a 21% and 33% decrease in arthritis symptoms just with weight loss

Weight loss slows down joint wear, the progress of arthritis, improves pain levels, activities of daily living (ADL) and overall mobility.

Other health benefits include decreased risk of cardiovascular and respiratory diseases and the development of type 2 diabetes.

Limitations and side effects

Difficult to achieve significant weight loss in a short period of time.

Inability to tolerate changes in diet habits.

Immediate side effects include lack of energy, headaches and irritability.

Risks

No major risks identified.

May crave food and find difficult to stick to the plan

Extreme sudden dieting may result in an electrolyte imbalance. It may also affect internal organ function (especially kidneys and liver).

Cost

This is a low-cost option for both the patient and the NHS

These changes are unlikely to increase weekly shopping cost. This is especially true if you use available resources, shop intelligently and change habits.

What if no treatment is done?

Arthritis will continue to deteriorate.

Symptoms will get worse; sometimes rapidly.

Will have a negative influence on other management options, e.g. surgery, in the future.

References

[Obesity: identification, assessment and management](#)

<https://www.nice.org.uk/guidance/ph5>

Felson DT, Anderson JJ, Naimark A, Walker AM, Meenan RF: Obesity and knee osteoarthritis: The Framingham study. *Ann.Int.Med.*1988;109:18

[Role of Body Weight in Osteoarthritis](#)

[Weight loss reduces knee-joint loads in overweight and obese older adults with knee osteoarthritis.](#)