Elevating the role of physical function in OA pain management and functional assessment in OA care

1 in 7 U.S. adults has osteoarthritis (OA).1* Approximately 44% of adults with arthritis may be limited in their daily activities.2 Pain and stiffness from OA can contribute to disabilities in physical function,3 which can be defined as the ability to ‘move around’ and ‘perform daily activities’.4 Limitations in physical function may lead to reduced quality of life.3

There is no single measure to assess a patient’s physical function in the setting of research or clinical care for OA.4 However, using a combination of performance measures and patient-reported outcome measures (PROMs) may give the healthcare provider insight into disease progression, severity, and optimal treatment approaches.4

**Performance Measures**

Performance measures assess what patients can do as opposed to what they think they can do.4 The Osteoarthritis Research Society International (OARSI) recommends 5 performance-based tests of physical function for knee and hip OA (at right), with 3 of the tests identified as the minimum core set.4 The tests use activities such as sit-to-stand, timed walks, and stair climbing to assess lower body strength, balance, agility, and ability to change directions.5 Not only do these tests represent typical activities that individuals with knee and hip OA might need to do regularly, but they are also practical to administer in a clinic setting.4 The OARSI manual includes instructions, score sheets and normal values for these tests.5

**Patient-Reported Outcome Measures (PROMs)**

PROMs are questionnaires that patients complete to describe how arthritis impacts their lives.6 It has been suggested that PROMs reveal patients’ perceived experiences with the disease and its impact on specific activities rather than their actual ability to perform the activities.7 Patient self-reports may be influenced by pain, stiffness, and feeling of exertion (not just ability or difficulty in performing the task).7

The use of PROMs in clinical care lends itself to shared decision-making. In addition, the process of engaging patients in self-reporting may result in improved self-management, quality of life, satisfaction of care, and communication.3

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*Reported from 2008 to 2014

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**PERFORMANCE MEASURES**

Recommended for Knee and Hip OA4

**Minimum Core Set**

1. 30 second chair stand
2. 40m fast-paced walk
3. Stair climb
4. Timed up-and-go
5. 6-minute walk
Patient-Reported Outcome Measures Commonly Used to Assess Function in Patients with OA

**Health-related Quality of Life**

**Rand Short Form-36 Health Survey (SF-36)**

The SF-36 is a generic health-related quality of life assessment and has been validated in patients with OA. It includes 36 items related to 8 physical and mental health domains such as health perception, physical functioning, physical/emotional limitations, fatigue, pain, social functioning, and mental health. It takes about 10 minutes to complete.

*The SF-36 is a registered trademark of the Medical Outcomes Trust.*

**Joint-specific**

**Knee Injury and Osteoarthritis Outcome Score (KOOS)**

The KOOS is a nonproprietary, self-administered questionnaire that evaluates a patient’s opinion about their knee and knee function. It contains 5 subscales: pain, other symptoms, function in daily living, function in sport and recreation, and knee related quality of life. The full questionnaire takes about 10 minutes to complete; however, a shorter 12-item version (KOOS-12) is available.

**Hip Injury and Osteoarthritis Outcome Score (HOOS)**

The HOOS is a nonproprietary, self-administered questionnaire that evaluates a patient’s opinion about their hip and hip function. It contains 5 subscales: pain, other symptoms, function in daily living, function in sport and recreation, and knee related quality of life. The full questionnaire takes about 10 minutes to complete; however, a shorter 12-item version (HOOS-12) is available.

**Work Productivity**

**Work Productivity and Activity Impairment Questionnaire (WPAI) for Osteoarthritis Knee or Hip**

The WPAI is a nonproprietary, self-administered questionnaire that uses 6 questions to measure an employee’s absenteeism (missed work), presenteeism (reduced job performance), work productivity loss (absenteeism plus presenteeism), and activity impairment in the last 7 days. Scoring for the WPAI is freely available; higher values indicate higher levels of osteoarthritis-related work impairments.

Visit [www.oacaretools.org](http://www.oacaretools.org) for more tools and resources, including a PowerPoint presentation with more details about performance measures and PROMs used in OA care.

**OAAA collaborated with Pfizer in the development of this resource.**

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**References**