

THE EFFICIENCY OF THE COMPLEX RECOVERY TREATMENT UPON THE FUNCTIONAL STATUS OF THE PATIENTS DIAGNOSED WITH OSTEOARTHRITIS OF THE HIP.

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Abstract

Introduction: Osteoarthritis of the hip is a degenerative condition with a slow progressive evolution, joint deterioration, permanent pain and walking issues.

Objectives: The evaluation of the efficiency of the physical recovery treatment for the patients diagnosed with arthrosis at the level of the coxofemoral joint by using the functional mobility coefficient.

Materials and methods: The trial was conducted for 6 months under ambulatory conditions on 126 patients who were diagnosed with osteoarthritis of the hip from a clinical and functional point of view. The inclusion criteria were: male and female patients of over 55, a diagnosis of osteoarthritis of the hip for the past 6 months, the consent to take part to the trial. The exclusion criteria were: age under 55, refusal to take part to the trial and the existence of comorbidities (diabetes mellitus, uncontrolled high blood pressure, severe liver/ kidney diseases, obesity or cancer). The evaluation of the patients were made at the beginning of the treatment, 10 days after the treatment and 45 days after its end. The aimed parameters were: pain, mobility, functionality and the quality of life. The Richer functional coefficient was used. The Western Ontario & McMaster Universities Arthritis Index (WOMAC), The Visual Analogue Scale (VAS) and The Quality of Life questionnaire (QOL) were also used. The patients benefitted from pharmacological and physical kinetic treatment against pains and contractions, to tonify the muscles, for their dynamic stability and control. They were divided into two groups: the witness group who received treatment by medication and by physical exercises, as well as the trial group who also had an individualized program of kinetic therapy. Another step was to use low frequency currents (Trabert), average frequency currents (interferential) and high frequency currents (short waves). The kinetic therapy program included mobility techniques that were passive-active, active and active-passive in order to resume stability and to prolong the functionality at the level of the sick joints.

Results: The evaluation of the patients in the two groups pointed out the following aspects:

- The pain to the passive and active mobilization improved for both groups whereas the results were confirmed by the VAS scale and by the pain section of the VAS scale.

- The joint mobility improved for the trial group in comparison to the control group whereas the results were positive by the mobility section of the VAS but also by calculating the richer coefficient.

- The score for the global index of the hip arthrosis by using the WOMAC scale was higher for the trial group.

Conclusions: The use of the complex physical treatment allowed improvement of the symptoms, functionality and mobility especially for the patients of the trial group whereas statistically significant differences in the favor of the trial group. The quality of life for the patients of both groups improved significantly. The results attained by this clinical trial confirm the efficacy of the two treatment types and emphasized the importance to make an individualized kinetic therapeutic program.

Key words: functional status, mobility, recovery, degenerative condition