**Generalised Osteoarthritis**

**Refer to Orthopaedic pathways**

If appropriate and surgery is being considered

**Consider referral to occupational therapy**

For bracing/ADL modifications/hand function

**Consider referral to physiotherapy**

For joint supports/walking aids and support with exercise

**Refer to Consultant Rheumatologist**

If flare ups are not settling or failing to respond to analgesia

If patient does not want surgical intervention

**Management**

Patient education/information

[https://www.versusarthritis.org/osteoarthritis/](https://www.versusarthritis.org/about-arthritis/conditions/osteoarthritis/)

Advice on use of heat or cold

Advice on pacing

Advice on appropriate exercise to include local muscle strengthening and general aerobic fitness

Advice on appropriate footwear, including shock absorbing properties, for people with lower limb osteoarthritis

Advice on TENS machine

Analgesia

Consider topical capsaicin for knee or hand osteoarthritis

Offer interventions to help weight loss for people who are obese or overweight

**Investigations:**

FBC, ESR/CRP, U&E, LFT, Bone profile, CK, TFT, eGFR, Vitamin D

Urine dipstick

Chest X-ray

Weight and BMI

Auto-antibodies blood tests are unlikely to be helpful (because there are frequent false positives), unless specific indications of connective tissue disorder such as:

Dry eyes / Dry mouth / Photo-sensitive rash / Significant alopecia / Recurrent miscarriage

Clinically diagnose without investigation if patient:

* Is 45 or over AND
* Has activity-related joint pain AND
* Has either no morning joint-related stiffness or morning stiffness that lasts no longer than 30 minutes.

Symptoms: Duration, sites, severity and frequency

History of fatigue, sleep, low mood

Function: ADL’s

PMH/Co-morbidities/Peri-menopausal

Rule out red flags and systemic symptoms i.e. rashes, fever, risk factors family history, smoking

Organ specific symptoms to exclude: systemic disease, depression, anxiety

Yellow flags (psycho-social): Work, relationships, leisure, QOL

Joint examination

Attitudes to exercise

Consider differential diagnoses such as gout, other inflammatory arthritis, septic arthritis and malignancy

Rule out

Red flags