



GP RESOURCE



Arthritis Awareness in General Practice: The Role of Physiotherapy

Arthritis in Australia: A Quick Overview

- **3.7 million Australians** (14.5% of the population) live with arthritis.
- **Osteoarthritis (OA)** is the most common form of arthritis - affecting all joints in the body but particularly the knees, hips and spine.
- OA is a chronic, degenerative joint disease characterised by **cartilage breakdown**, bone remodelling with **osteophyte formation**, and low-grade synovial inflammation.
- **Arthritis is the second leading cause of disability** in Australia.



1 in 7

Australians
affected
(~3.7 million people)



57%

of arthritis
cases are
osteoarthritis



Arthritis

is the **2nd**
leading cause
of disability
in Australia

Winter and Arthritis: Why Symptoms Worsen

- Cold temperatures restrict circulation, increasing joint stiffness.
- Reduced activity levels weaken supportive muscles, worsening pain.
- Barometric pressure changes are linked to greater joint discomfort.
- Psychological impacts (like stress and low mood) can amplify symptoms.



Core Recommendation:

Early Physiotherapy and exercise are first-line treatments for arthritis, endorsed by all major clinical guidelines.



Why Physiotherapy is Critical for Arthritis Management

Physiotherapy helps by:

- Improving joint flexibility and strengthening muscles.
- Reducing inflammation and mechanical stress on joints.
- Delaying progression and the need for surgery.
- Empowering patients through education and self-management strategies.

Diagnostic Cues and Red Flags for GPs

Typical OA subjective features:

- Age over 45 years.
- Gradual onset of pain
- Activity-related joint pain that eases with rest
- Morning stiffness and pain
- Stiffness after rest (gelling phenomenon)
- Functional limitations (e.g., difficulty climbing stairs or gripping)
- Commonly affects knees, hips, spine and hands

Red flags to act on immediately:

- Reduced range of motion
- Joint tenderness
- Crepitus with movement
- Bony swelling and sometimes hard joint enlargement (osteophytes)
- Joint instability or deformity (e.g., varus knees)
- Absence of warmth/redness (unlike inflammatory arthritis)

Early Referral to Physiotherapy: Why Timing Matters

Benefits of early physiotherapy:

- Patients learn pain-relieving techniques, joint-protecting strategies and strengthening exercises
- Enables improved joint mechanics which limits joint deterioration and reduces the need for surgical intervention like joint replacement.
- Reduces reliance on pain medications (e.g., NSAIDs, opioids).
- Improves functional outcomes and quality, limiting deconditioning and disability
- Addresses fear avoidance and poor beliefs about exercise
- Supports team-based care with feedback to the GP



Tip:

Clinical diagnosis is usually sufficient. Imaging can be useful but is not necessary to commence physiotherapy. If atypical features present, imaging can be of benefit

Refer to Benchmark Physiotherapy

At our clinic we work closely with GPs to keep athletes performing at their best. Our sport-specific rehabilitation programs focus on treating the root cause - not just the symptoms - so our patients recover faster and play sport for longer.

Visit the Benchmark Physiotherapy General Practitioners Hub for more resources to empower your patient for better outcomes with physiotherapy.

Contact us to find out more about how we can help your patients reach their potential.

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