



Novel findings about radiographic evidence, pain, superficial temperature and adjuvant treatments for patients with knee osteoarthritis

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Knee osteoarthritis (OA) is among the leading causes of chronic disability and may lead to depression, anxiety and pain catastrophizing, enhancing perceived pain. Knee pain is an imprecise marker of radiographic evidence of OA. These patients are more likely to develop central sensitization, a risk factor for chronic pain. Treatment of this condition usually involves therapeutic exercises and lifestyle changes. Our research group has been studying several aspects of OA in the last years: 1) the associations among radiographic evidence of OA, self-reported pain, pressure pain thresholds (PPT) and superficial knee temperature; 2) the influence of pain



Exercise programs, including or not lifestyle education, are effective in reducing pain intensity and increasing PPT, however, patients who participate in an exercise program and also take part in lifestyle interventions may benefit from a slightly higher reduction in pain.

Patients with bilateral knee OA present no differences in symptomatic and asymptomatic knees regarding radiographic evidence, knee temperature and PPT

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