When It Comes to Weight Loss in Overweight and Obese Adults with Knee Osteoarthritis, More is Better

**Release Date:**
Monday, June 18, 2018 12:01 am EDT

**Terms:**
Arthritis Care & Research, All Journals and Research, Health Sciences

**Dateline City:**
Hoboken, NJ

**Contacts:**
Dawn Peters (US) +1 781-388-8408 sciencenewsroom@wiley.com

Researchers previously showed that overweight and obese individuals with knee osteoarthritis can reduce pain by 50% and significantly improve function and mobility with a 10% or more weight loss over an 18-month period. The investigators’ latest findings, which are published in *Arthritis Care & Research*, reveal that a 20% or more weight loss has the added benefit of continued improvement in physical health-related quality of life along with an additional 25% reduction in pain and improvement in function.

The results come from a secondary analysis of diet-only and diet plus exercise groups in the Intensive Diet and Exercise for Arthritis (IDEA) randomized controlled trial. A total of 240 overweight and obese older community-dwelling adults with pain and knee osteoarthritis were divided into four groups according to weight loss achieved over an 18-month period: less than 5% (<5% group), between 5 and 9.9% (±5% group), between 10 and 19.9% (± 10% group), and 20% and greater (≥20% group).

The researchers found that the greater the weight loss, the better participants fared in terms of pain, function, 6-minute walk distance, physical and mental health-related quality of life, knee joint compression force, and IL-6 (a marker of inflammation). Also, when comparing the two highest groups, the ≥20% group had 25% less pain and better function than the ≥ 10% group, and significantly better health-related quality of life.

Obesity is a health issue worldwide and a major and modifiable risk factor for many of the more than 250 million adults with knee osteoarthritis. “Currently, there is no treatment that slows the progression or prevents this debilitating disease; hence, research has focused on improving clinical outcomes important to the patient,” said lead author Stephen Messier, PhD, of Wake Forest University, in Winston-Salem, NC. “A 10% weight loss is the established target recommended by the National Institutes of Health as an initial weight loss for overweight and obese adults. The importance of our study is that a weight loss of 20% or greater—double the previous standard—results in better clinical outcomes, and is achievable without surgical or pharmacologic intervention.”


**Support for this study was provided by grants from the National Institutes of Health:** R01 AR052528-01 from NIAMS, P30 AG21332 from NIA, M01-RR00211 from NCRR, and General Nutrition Centers, Inc.

**Author Contact:** Wake Forest News Team, at media@wfu.edu, or +1 336-758-5237.

**About the Journal**

*Arthritis Care & Research* is an official journal of the American College of Rheumatology (ACR), and the Association of Rheumatology Health Professionals (ARHP), a division of the College. *Arthritis Care & Research* is a peer-reviewed journal that publishes both original research and review articles that promote excellence in the clinical practice of rheumatology. Relevant to the care of individuals with arthritis and related disorders, major topics are evidence-based practice studies, clinical problems, practice guidelines, health care economics, health care policy, educational, social, and public health issues, and future trends in rheumatology practice. The journal is published by Wiley on behalf of the ACR. For more information, please visit the journal home page at [http://wileonlinelibrary.com/journal/acr](http://wileonlinelibrary.com/journal/acr).

**About Wiley**