Rheumatology March 2020

Articles

'New Medicine Service': supporting adherence in people starting a new medication for a long-term condition: 26-week follow-up of a pragmatic randomised controlled trial.
[Conclusions: At 26-week follow-up, New Medicine Service (NMS) was unable to demonstrate a statistically significant increase in adherence or reduction in NHS costs, which may be attributable to patient attrition from the study. Long-term economic evaluation suggested NMS may deliver better patient outcomes and reduced overall healthcare costs than normal practice, but uncertainty around this finding is high.] Contact the library for a copy of this article

Effects of presurgical interventions on chronic pain after total knee replacement: a systematic review and meta-analysis of randomised controlled trials.
[We found low to moderate-quality evidence to suggest that neither preoperative exercise, education nor a combination of both is effective in preventing chronic pain after TKR. This review also identified a lack of evaluations of other preoperative interventions, such as multimodal pain management, which may improve long-term pain outcomes after TKR.] Freely available online

Is chronic ankle instability associated with impaired muscle strength? Ankle, knee and hip muscle strength in individuals with chronic ankle instability: a systematic review with meta-analysis.
[Individuals with CAI have ankle inversion and eversion strength deficits. Our data also point to differences between individuals with CAI and controls in hip and knee strength. These elements of the kinetic chain should be evaluated by clinicians who rehabilitate individuals with CAI.] Available with an NHS OpenAthens password for eligible users

Treating hand and foot osteoarthritis using a patient’s own blood: A systematic review and meta-analysis of platelet-rich plasma.
[PRP improves pain and function of osteoarthritis. Heterogeneity and risk-of-bias limit current data, requiring more RCTs to determine any regenerative potential of PRP.] Contact the library for a copy of this article

Should we prescribe longer repeat prescriptions for patients with long-term conditions during a pandemic?
[The evidence is very limited and there is currently no definitive answer to this question. This issue will be reviewed as new relevant evidence is identified, and the report amended accordingly.]
However, in the UK, NHS England has advised that longer duration prescriptions should not be issued by GPs at this time, in order to protect the supply chain.

**Supporting people with long-term conditions (LTCs) during national emergencies.**

[Conclusions: Evidence relating to LTC management during medical emergencies, such as the current COVID-19 pandemic, is mainly focussed on the direct impact of infection on people living with LTCs; There is limited evidence on the indirect effects of pandemics on LTCs, mainly relating to changes in healthcare provision; Evidence from natural disasters is more prevalent, but may be limited in its generalisability...]

**Guideline**

**Clinical guide for the management of rheumatology patients during the coronavirus pandemic**

[Published 16th March 2020]
*Freely available online*

**Toolkit**

**Specialty guides for patient management during the coronavirus pandemic.**

[These cover management of surgical, trauma and orthopaedic, critical care, acute diabetes, neuro trauma, non-CV, acute burns, cancer, emergency department, paediatric, & rheumatology patients, as well as anaesthesia service reorganisation and use of acute non-invasive ventilation.]
*Freely available online*

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