

Effects of therapist-monitored high and low dose home exercise program in patients with knee osteoarthritis

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Registration date 02/02/2026	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 02/02/2026	Condition category Musculoskeletal Diseases	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input checked="" type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

The current study aimed to compare the effectiveness of therapist-monitored low versus high dose home exercise program (lo-hi dose protocol) in patients with knee osteoarthritis (OA). This is a randomly allocated study that will compare the effectiveness of low-dose and high-dose home exercise programs against a control group receiving usual care, focusing on pain, function, quadriceps muscle strength, and physical performance in patients with knee osteoarthritis.

Who can participate?

Patients aged 50 years and older with knee osteoarthritis.

What does the study involve?

This study will compare [hi vs low vs control home exercise program] to see which is more effective in terms of pain intensity, physical function, physical performance, and sleep quality after 8 weeks of intervention. After baseline assessment, participants will be randomly allocated to three groups: low intensity exercise (Low dose), high intensity exercise (high dose) or usual care (control) groups. In the low-dose and high-dose exercise group, participants will perform an 8-week therapist-monitored individualized home exercise, two sessions per day, 5 days a week. The untreated control group only receive patient education about energy conservation and joint protection techniques.

What are the possible benefits and risks of participating?

Participants will receive a therapist-monitored home exercise program, which will help them manage their pain and improve physical function. There is no known risk because the program will be individualized and monitored by experienced therapists.

Where is the study run from?

Dr. D.Y. Patil Vidyapeeth, Pune, College of Physiotherapy, India.

When is the study starting and how long is it expected to run for?

February 2022 to June 2024

Who is funding the study?
Dr. D.Y. Patil Vidyapeeth, Pune, India.

Who is the main Contact:
Dr Tushar J Palekar, principal.physio@dpu.edu.in

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Principal investigator

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Additional identifiers

Protocol serial number

DYPCPT/IEC/40/2022

Study information

Scientific Title

Effects of therapist monitored low versus high dose home exercise program in patients with knee osteoarthritis: a randomized controlled trial (Lo-HI dose trial)

Acronym

Lo-Hi dose trial

Study objectives

The goal of this clinical trial is to learn if a high or low dose of home exercise is effective in managing people with knee osteoarthritis.

Ethics approval required

Ethics approval required

Ethics approval(s)

approved 26/04/2022, The Institutional Ethics committee of Dr D Y Patil College of Physiotherapy (Plot no. BGP/190, Near Pavna Industries, Midc Area, Bhosari, Pune, 411026, India; +91 20 6410 8555; rrbhonde@gmail.com), ref: DYPCPT/IEC/40/2022

Study design

Single-blind randomized clinical trial

Primary study design

Interventional

Study type(s)

Efficacy, Treatment

Health condition(s) or problem(s) studied

Knee osteoarthritis

Interventions

Researchers will compare [hi vs low vs control home exercise program] to see which is more effective in terms of pain intensity, physical function, physical performance, and sleep quality after 8 weeks of intervention. After baseline assessment, participants were randomly allocated to three groups: low-intensity exercise (low dose), high-intensity exercise (high dose) or usual care (control) groups.

In the low-dose exercise group, participants performed following exercises for two sessions per day or as pain-tolerated: 1) walking for 10 minutes 2) straight leg raising exercise (SLR) for one set of 10 repetitions; 3) single leg standing (SLS) for one set of 10 repetitions; 4) semi squat for one set of 10 repetitions; 5) seated knee extension exercise for one set of 10 repetitions; 6) bilateral hip abduction and adduction exercise, for one set of 10 repetitions; and 7) self-stretching of quadriceps and hamstrings for one set of 10 repetitions.

In the high-dose exercise group, participants performed the same exercise program with an increased number of sets (e.g., 2-3 sets) and repetitions (15-20 repetitions) for a longer duration.

The untreated usual care control group received only patient education regarding energy conservation and joint protection techniques as outlined in the Mayo Clinic Booklet during the trial.

Intervention Type

Behavioural

Primary outcome(s)

1. Pain intensity was measured using a visual analogue scale (VAS) at baseline and week 8
2. Physical function was measured using the Western Ontario and McMaster Universities Arthritis Index (WOMAC) Likert version 3.1 at baseline and week 8

Key secondary outcome(s)

1. Physical Performance was measured using the 30-second chair stand test (30sCST) at baseline and week 8
2. Sleep quality was measured using the Insomnia Severity Index (ISI) at baseline and week 8

Completion date

30/06/2024

Eligibility

Key inclusion criteria

1. Aged 50 and older
2. Symptomatic knee osteoarthritis diagnosed with grade ≥ 2 OA using the Kellgren-Lawrence severity scale
3. Having knee pain ≥ 2 on a VAS in the past week

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Mixed

Lower age limit

50 years

Upper age limit

110 years

Sex

All

Total final enrolment

100

Key exclusion criteria

1. Neurological disorders
2. Implanted electrical devices
3. Non-ambulatory status
4. Significant cognitive impairment
5. Systemic inflammatory arthritis (e.g., gout)
6. A history of hip or knee replacement surgery, trauma or surgical arthroscopy of either knee within the last 6 months
7. Prior involvement in a similar study
8. Participation in an exercise program within the last 6 months
9. Intra-articular knee injection within the last 3 months
10. Anticoagulant therapy
11. Recent or imminent surgery (within 3 months), or medical co-morbidities that would preclude participation in exercises

Date of first enrolment

02/05/2022

Date of final enrolment

30/04/2024

Locations

Countries of recruitment

India

Study participating centre

Dr. D. Y. College of Physiotherapy

Department of physiotherapy, Plot no. BGP/190, Near Pavna Industries, Midc Area, Bhosari

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Sponsor information

Organisation

Dr. D.Y. Patil Vidyapeeth, Pune

ROR

<https://ror.org/00s2qq515>

Funder(s)

Funder type

University/education

Funder Name

Dr. D.Y. Patil Vidyapeeth, Pune

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request from Dr Tushar J Palekar, principal.physio@dpu.edu.in. Anonymized individual participant data can be accessed.

IPD sharing plan summary

Available on request