

ANTERIOR KNEE PAIN (PFPS) – Research update



Exercise therapy has been recommended as the treatment of choice for PFPS, as published by an expert panel in the 2016 Patellofemoral pain consensus statement (from the 4th International Patellofemoral Pain Research Retreat in Manchester, UK).

The International Patellofemoral Research Retreat Consensus meeting resulted in six evidence-based recommendations. These recommendations were constructed to guide medical and health practitioners when they treat patients with patellofemoral pain. The recommendations are not intended to standardize patient care, but to be used in combination with individualized assessments of patient's needs, preferences and presentations, and clinical expertise to inform patient-centered management.

The six recommendations from the expert panel were as follows:

- 1. Exercise-therapy is recommended to reduce pain in the short, medium and long term, and improve function in the medium and long term.
- 2. Combining hip and knee exercises is recommended to reduce pain and improve function in the short, medium and long term, and this combination should be used in preference to knee exercises alone.
- 3. Combined interventions are recommended to reduce pain in adults with patellofemoral pain in the short and medium term.
- 4. Foot orthoses are recommended to reduce pain in the short term.
- 5. Patellofemoral, knee and lumbar mobilizations are not recommended.
- 6. Electrophysical agents are not recommended.

Reference:

2016; Crossley KM, et al; 2016 Patellofemoral pain consensus statement from the 4th International Patellofemoral Pain Research Retreat, Manchester. Part 2: recommended physical interventions (exercise, taping, bracing, foot orthoses and combined interventions); Br J Sports Med 2016; 50: 844–852.

Ask us for further information on our anterior knee pain (PFPS) treatment approach.