



# The implementation of GLA:D OA in Switzerland

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# How GLA:D® Schweiz Suisse Svizzera started




**Good Life with osteoArthritis in Denmark (GLA:D®). Effective treatment for people with hip and knee OA**



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Wiedergabe (k)



Center for MUSCLE AND JOINT Health



# Organisations GLA:D® Schweiz Suisse Svizzera

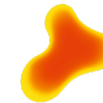
## GLA:D Schweiz wird getragen von der IG GLA:D Schweiz



## GLA:D Schweiz wird unterstützt von

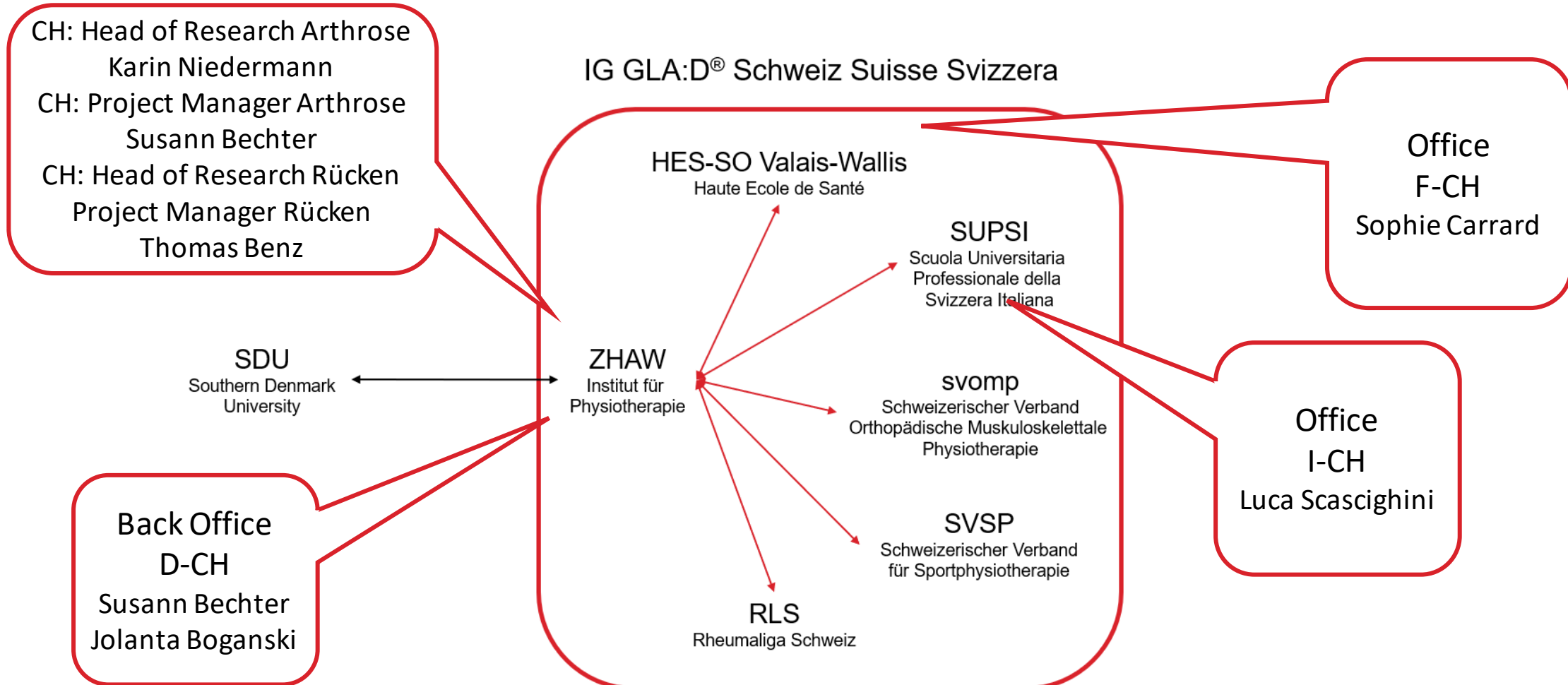


## Projektförderung Prävention in der Gesundheitsversorgung



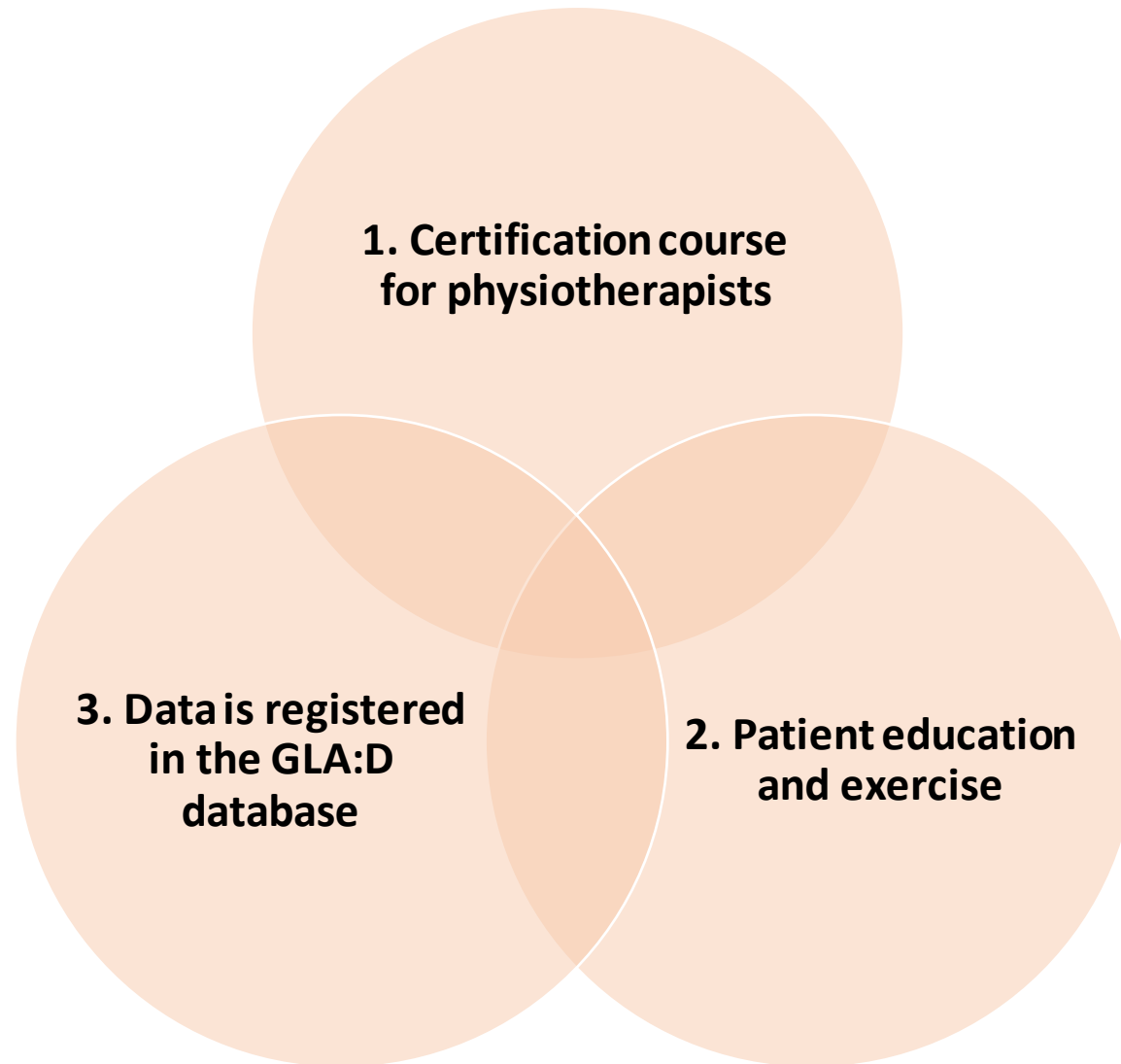
Gesundheitsförderung Schweiz  
 Promotion Santé Suisse  
 Promozione Salute Svizzera

# Task distribution across partners





# Mandatory parts



# 1) GLA:D<sup>®</sup> CH OA – certification courses 04/19-10/22

- **Trainer course OA 2019**
  - 34 participants (20 trainers; 14 certified PTs)
- **German-speaking Switzerland**
  - 15 courses OA => 646 participants
- **French-speaking Switzerland**
  - 6 courses OA => 94 participants
- **Italian-speaking Switzerland**
  - 3 courses OA => 78 participants

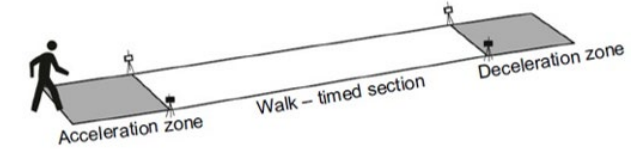
**→ Total 818 certified PTs**

## 2) GLA:D® CH Program



3 Individual sessions

History, examination  
Clinical Tests  
Instruction GLA:D exercises



2 group sessions  
patient education

Information and discussion ... about OA,  
Exercising, coping with pain, worries...  
Strategies / experiences



12 group sessions  
training

Structured, individualised training



Niveau 1



Niveau 2



Niveau 3



Niveau 4

1 individual session

Clinical Tests, what follows after GLA:D

## Abschlussbericht zur Behandlung von Vorname Name, Geburtsdatum

Behandlung vom 06.07.2020 bis 14.09.2020

### Checkliste für die klinische Diagnose einer Kniearthrose\*:

9 von 10 Kriterien sind erfüllt.

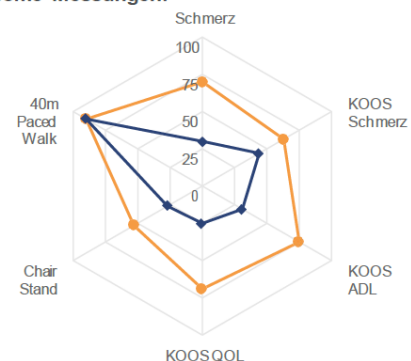
Symptome:	Risikofaktoren:
<input checked="" type="checkbox"/> Belastungsabhängige Schmerzen	<input checked="" type="checkbox"/> Alter (40+)
<input checked="" type="checkbox"/> Morgendliche Steifigkeit (< 30')	<input checked="" type="checkbox"/> Übergewicht (BMI > 25)
Klinische Befunde:	<input checked="" type="checkbox"/> Frühere Gelenkverletzung
<input checked="" type="checkbox"/> Krepitation	<input type="checkbox"/> Schwere körperliche Arbeit
<input checked="" type="checkbox"/> Eingeschränkte Beweglichkeit	<input checked="" type="checkbox"/> Überbeanspruchung in der Freizeit
	<input checked="" type="checkbox"/> Arthrose in der Familiengeschichte

### Adhärenz zum GLAD-Programm:

100% (18 von 18 Terminen besucht).

4	Einzel Sitzungen	2	Schulungen	12	Übungsprogramm
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### Outcome Messungen:



**Patientenfragebogen:**  
KOOS (Knee Injury and Osteoarthritis Outcome Score, 12 Fragen) mit 3 Dimensionen: Schmerz, Aktivitäten des täglichen Lebens (ADL) und Lebensqualität (QOL).

**Klinische Tests:**  
30s chair stand test  
40m paced walk test

Die Werte in der Abbildung wurden auf eine Skala von 0-100 transformiert.  
0 = schlecht und 100 = gut.

**Legende:**  
Blau = Eintritt / Gelb = Austritt

### Abschlussempfehlungen:

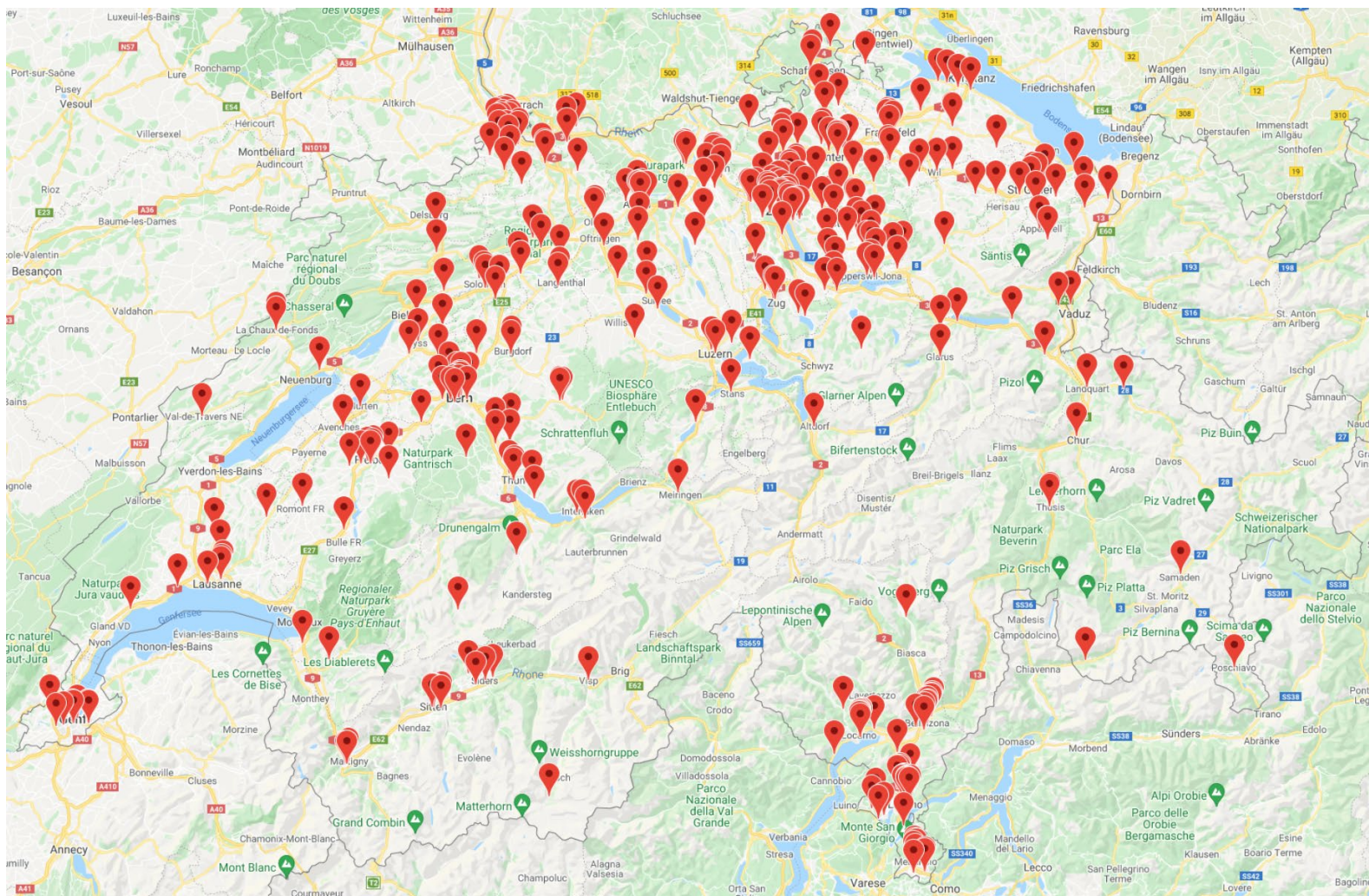
Folgende Abschlussempfehlungen möchte der Patient / die Patientin umsetzen:

Eigenaktivität:	Unterstützende Angebote:
<input checked="" type="checkbox"/> Aktiv bleiben	<input type="checkbox"/> Bewegungsgruppe der Rheumaliga
<input checked="" type="checkbox"/> Körperliche Aktivität auf individueller Basis	<input type="checkbox"/> Fitnesszentrum
<input checked="" type="checkbox"/> Hinweis Schweizer Wanderwege	<input checked="" type="checkbox"/> Heimtraining
	<input checked="" type="checkbox"/> Anschlussangebot in unserer Institution

\* **Referenzen:** (1) Zhang et al.: EULAR evidence-based recommendations for the diagnosis of knee osteoarthritis. Ann Rheum Dis 2010, 69(3): 483-489. (2) Altman et al.: Development of criteria for the classification and reporting of osteoarthritis. Classification of osteoarthritis of the knee. Diagnostic and Therapeutic Criteria Committee of the American Rheumatism Association. 1986(0004-3591).



### 3) Patients enrolled in GLA:D OA







**OA**

End 2021:  
included 2370  
Data from 2054




2022 (per 31.5.22)  
Included 1107

# Results after GLA:D OA / 1 year follow up

After GLA:D

	Knie 1818 Teilnehmende	Hüfte 436 Teilnehmende
Schmerz NRS 	-27%	-25%
Schmerzmittel 	-25%	-21%
Funktions- fähigkeit 	+16%	+13%
Lebensqualität 	+24%	+16%

1 year follow up

	Knie	Hüfte
Schmerz NRS 	-26%	-22%
Funktions- fähigkeit 	+12%	+9%
Lebensqualität 	+26%	+21%



# Some insights into the GLAD OA implementation process and success

## Levels of change

- Micro-level: Individual context (HPs/MDs, patients)
- Meso-level: social context (Team; Institution; intra-interprofessional colleagues / peers (of patients))
- Macro-level: financial – administrative- organisational context



# Barriers und Incentives for innovations

## 4: Barriers to and incentives for change at different levels of healthcare

Level	Barriers/incentives
Innovation	Advantages in practice, feasibility, credibility, accessibility, attractiveness
Individual professional	Awareness, knowledge, attitude, motivation to change, behavioural routines
Patient	Knowledge, skills, attitude, compliance
Social context	Opinion of colleagues, culture of the network, collaboration, leadership
Organisational context	Organisation of care processes, staff, capacities, resources, structures
Economic and political context	Financial arrangements, regulations, policies

\*Grol R, Wensing M. What drives change? Barriers to and incentives for achieving evidence-based practice. Med J Aust 2004;180(6 Suppl): S57–60.

# Barriers and facilitators of PTs certified in 2019

## Facilitators

- GLA:D<sup>®</sup> CH program (comprehensive, relevant for patients)
- PTs (high outcome expectancies and self-efficacy)
- Patients (good cooperation)
- Organisation (GLA:D material; management/support)

## Barriers

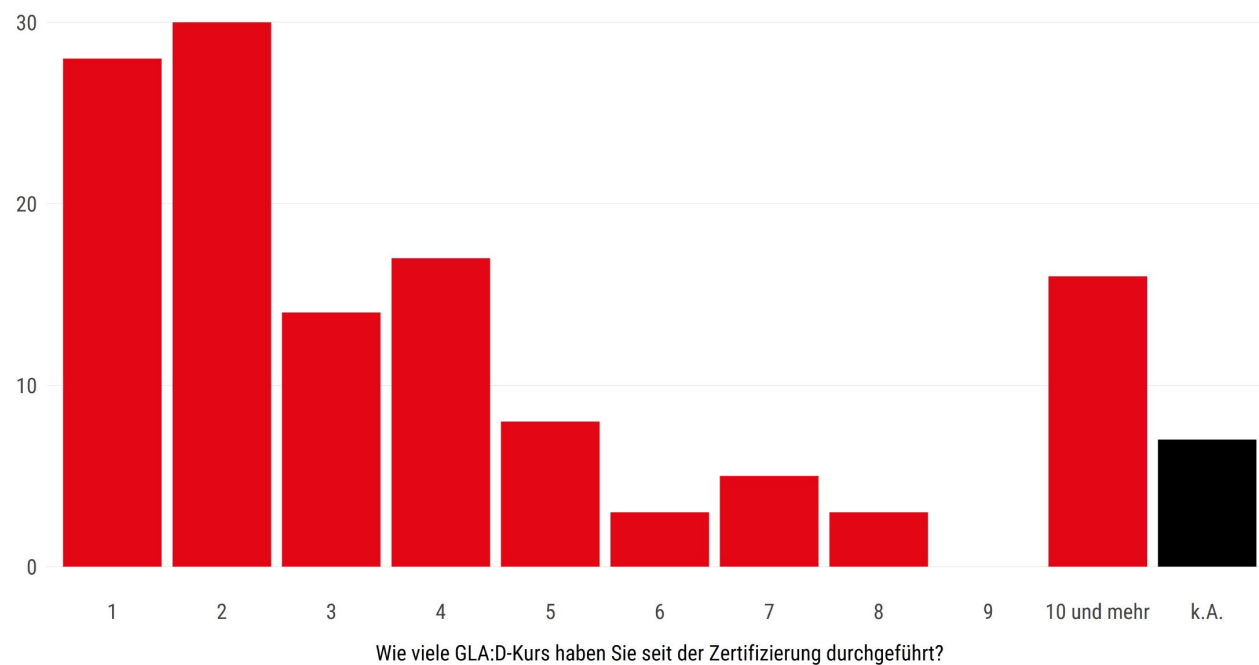
- administration, time costs,
- (no) acceptance from colleagues / 'foreign system' how to perform PT
- Low reimbursement / profitability
- Difficult cooperation with MDs/GPs
- Difficult (re-)organisation in clinic in little time

Anja Hinteregger, Karin Niedermann, Markus Wirz. The feasibility, facilitators, and barriers in the early implementation stage of 'Good Life with Osteoarthritis in Denmark' (GLA:D<sup>®</sup>) in Switzerland: a cross-sectional survey. (accepted).

# External evaluation 2021

## Therapie mit GLA:D: Anzahl Kurse

GLA:D Schweiz, Befragung zertifizierte Physiotherapeut\*innen 2021 n=180 (33%)

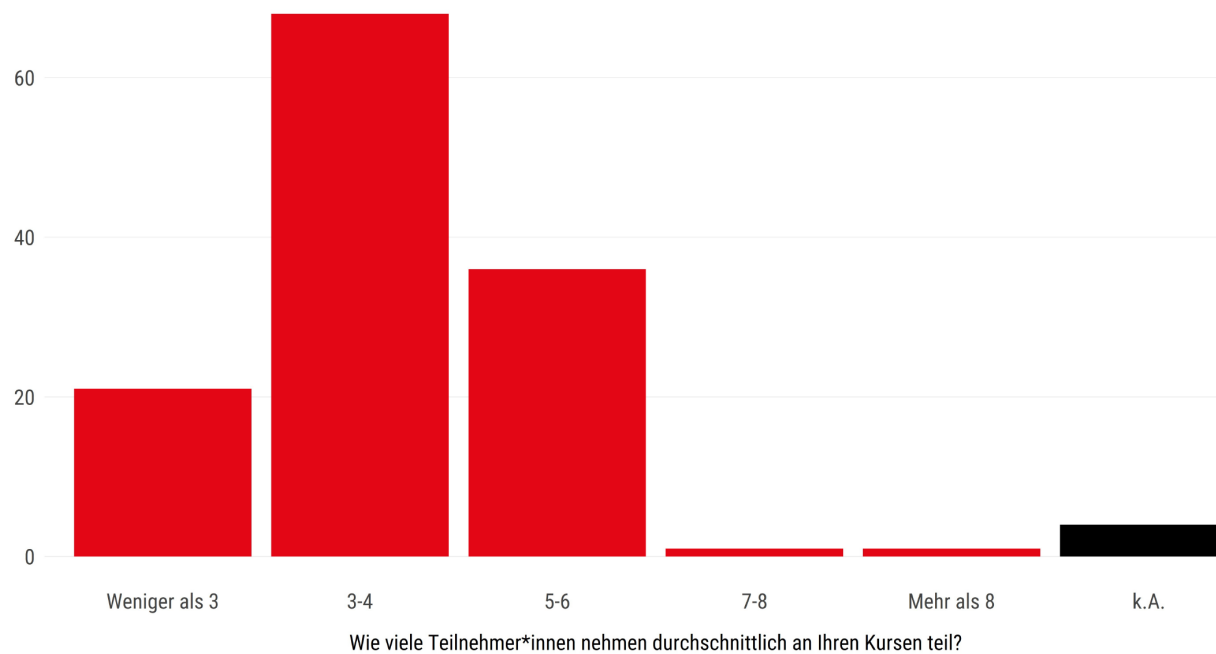


# External evaluation 2021

## Therapie mit GLA:D: Kursgrösse

GLA:D Schweiz, Befragung zertifizierte Physiotherapeut\*innen 2021

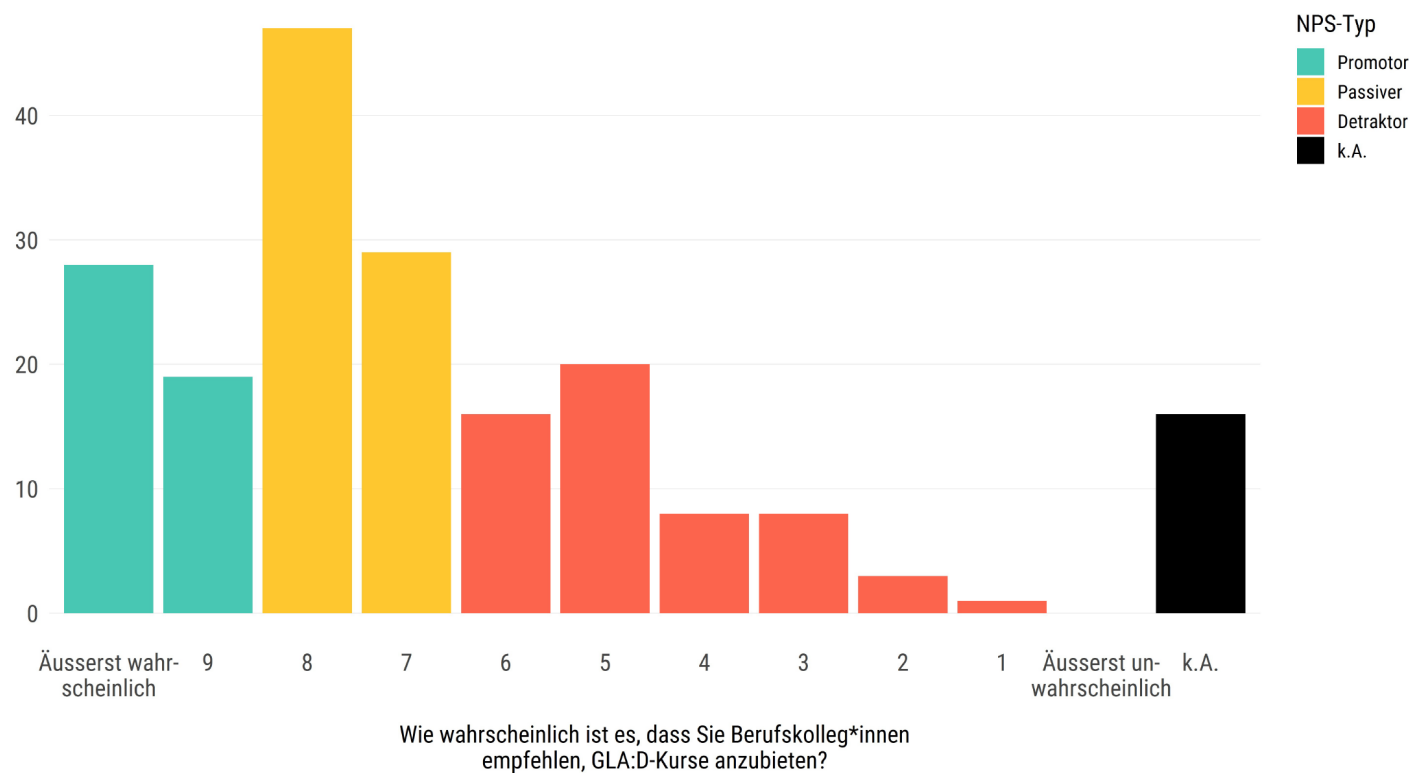
n=180 (33%)



# External evaluation 2021

## Therapie mit GLA:D: Weiterempfehlung

GLA:D Schweiz, Befragung zertifizierte Physiotherapeut\*innen 2021 n=180 (33%)

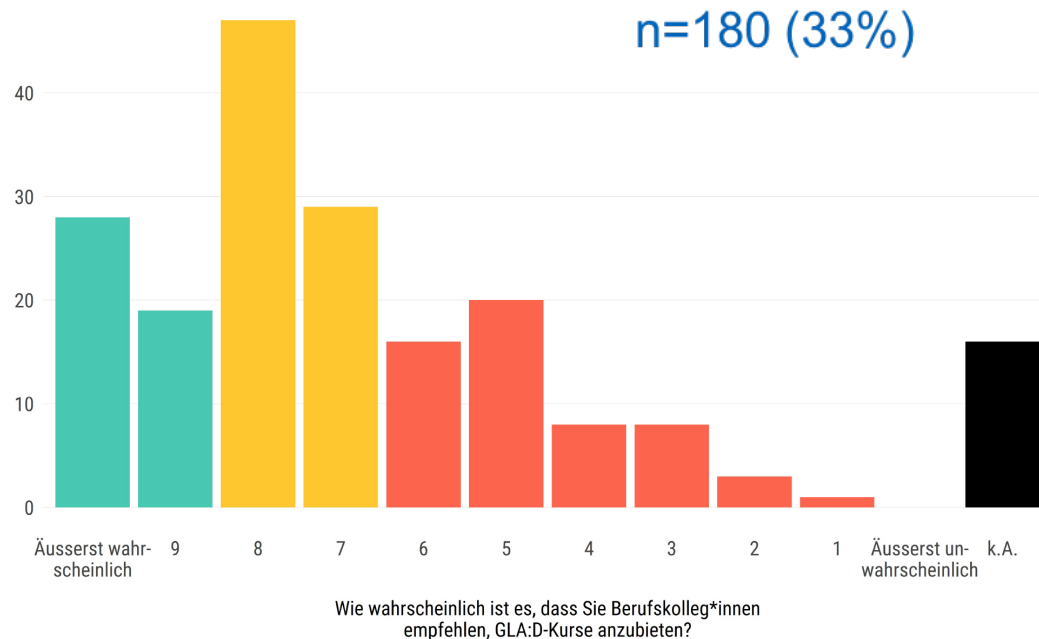




# External evaluation 2021

## Therapie mit GLA:D: Weiterempfehlung

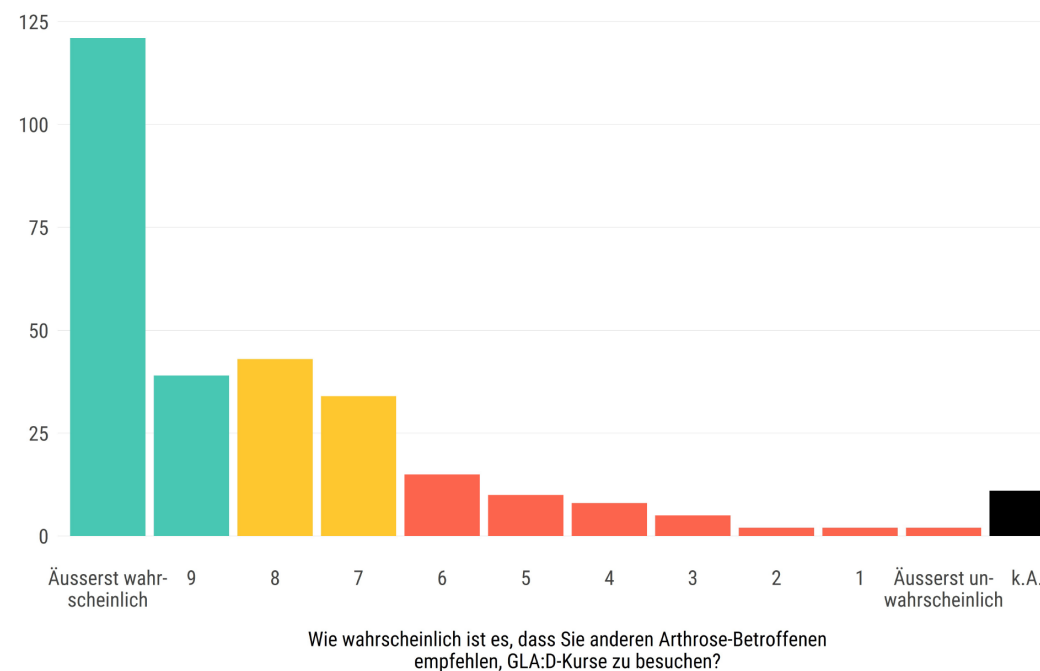
GLA:D Schweiz, Befragung zertifizierte Physiotherapeut\*innen 2021



## Therapie mit GLA:D: Weiterempfehlung

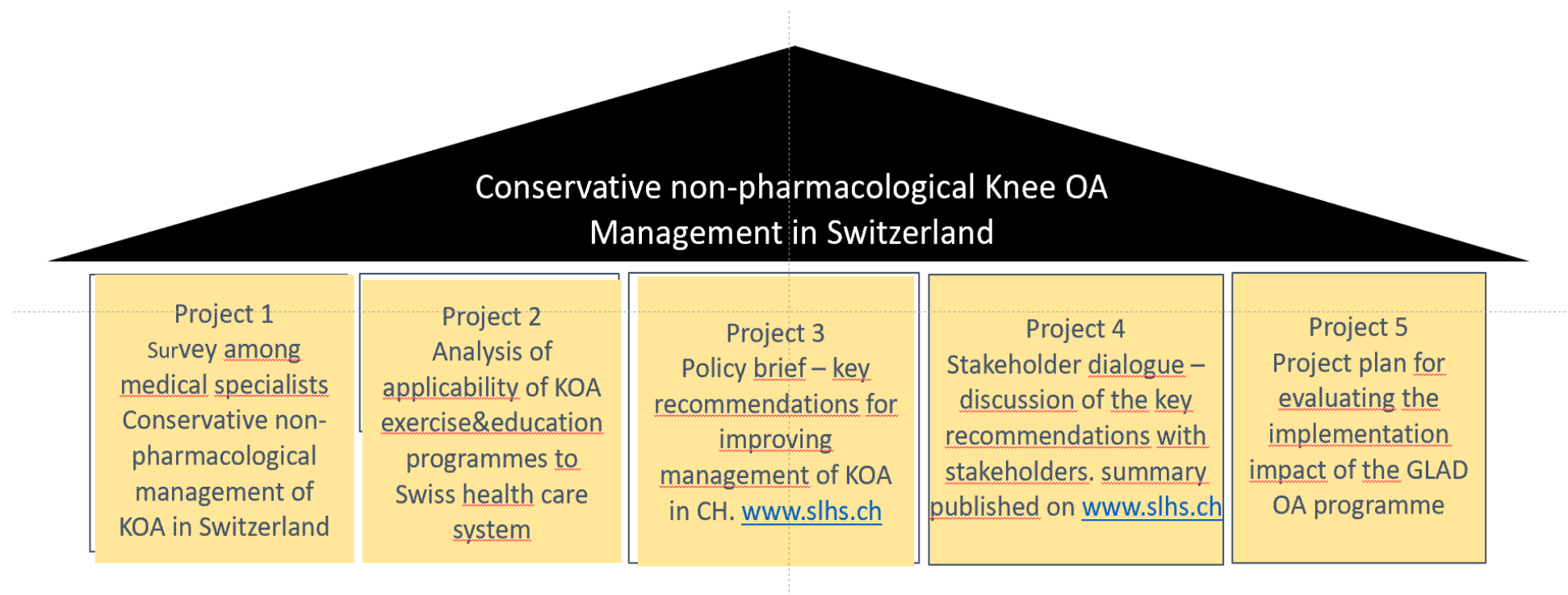
GLA:D Schweiz, Befragung HKA-Betroffene 2021

n=289 (44%)

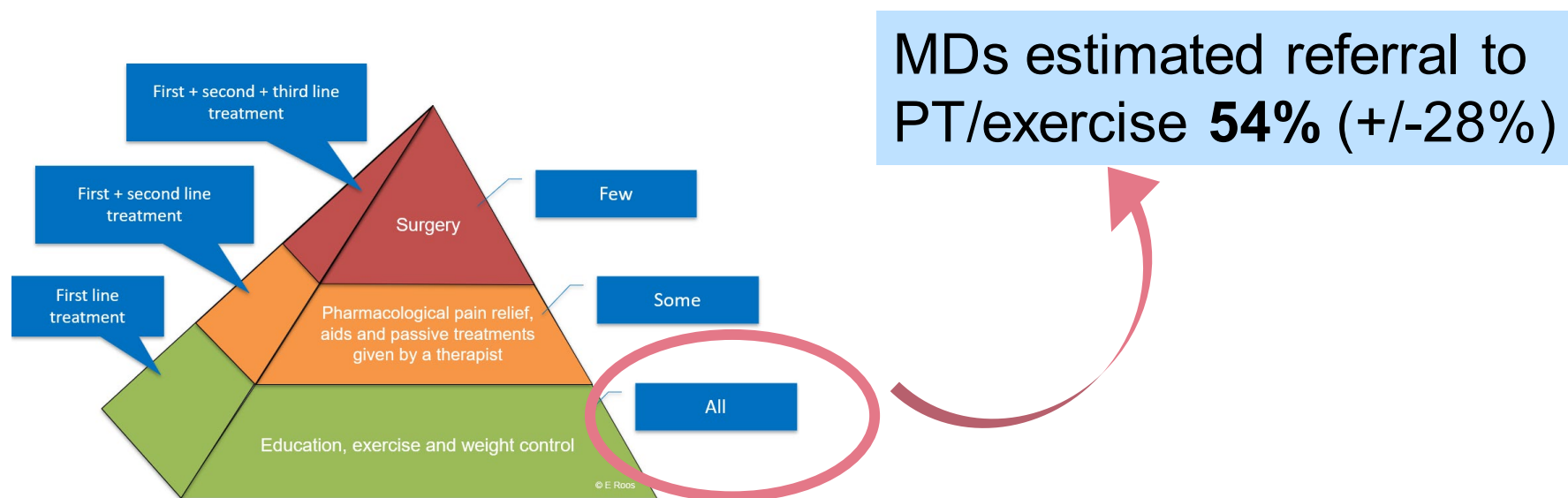


# KOA management in Switzerland

- PhD project : Conservative management of KOA management in Switzerland (Lea Ettlin)



## Survey among GPs, rheumatologists, orth.surgeons (n=220)



Adapted by Roos EM from Roos EM, Juhl CB. Osteoarthritis Cartilage. 2012.

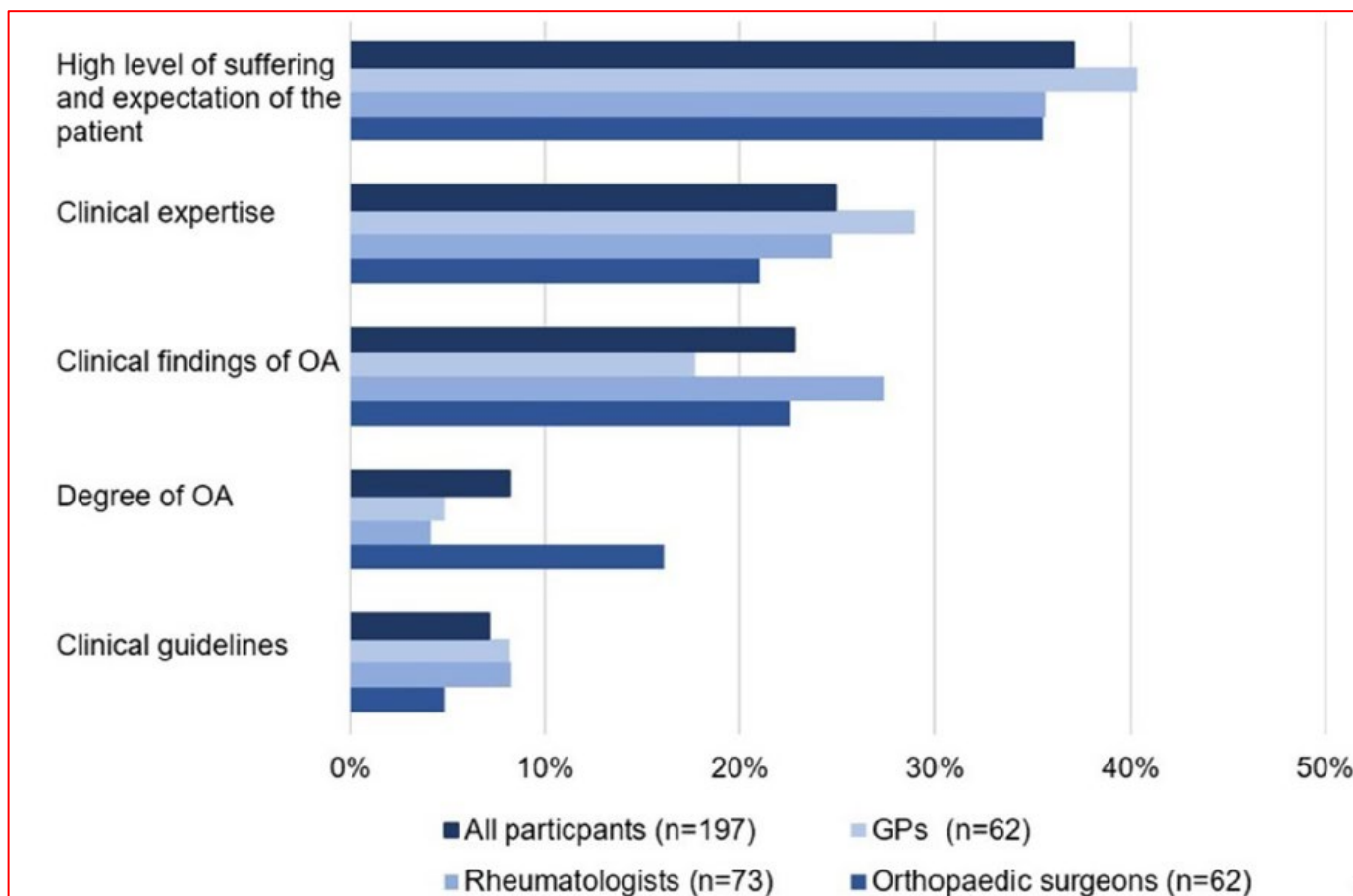
## → Evidence-Performance Gap for knee OA management in CH

21

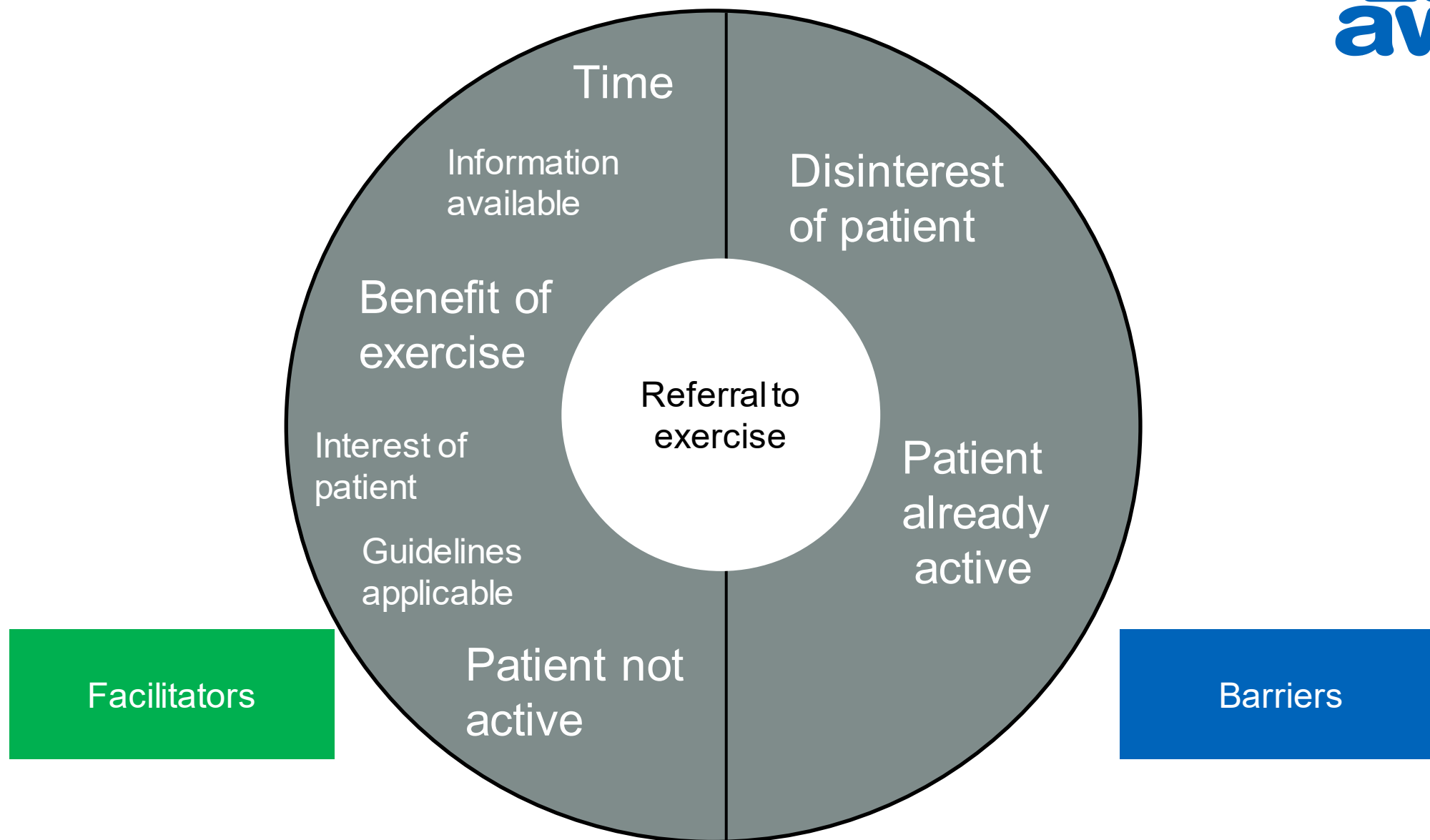
Ettlin L, Nast I, Huber EO, Niedermann K. (2021). Does the Conservative Non-pharmacological Management of Knee Osteoarthritis in Switzerland Reflect the Clinical Guidelines? *Front. Rehabil.*

## Decision-making of the specialists

...if, what are your reasons for referring to exercise?



## Reasons to (not) suggest exercise?





# Barriers of and facilitators for performing GLA:D exercises after programme participation

	All participants (n = 339)	GE adherent n = 178 (53%)	GE non-adherent n = 161 (47%)
Age, years, mean (SD)	67 ( $\pm 9.3$ )	68 ( $\pm 8.1$ )	65 ( $\pm 10.2$ )
Women, n (%)	227 (67)	120 (67)	107 (66)
PA, (IPAQ-SF)			
Active, n (%)	285 (84)	153 (86)	132 (82)
Inactive, n (%)	54 (16)	25 (14)	29 (18)
GLA:D exercise			
minutes/day, mean (SD)	28 ( $\pm 21.7$ )	35 ( $\pm 18.1$ )	21 ( $\pm 23.0$ )
Adherent, n (%)	178 (52)	178 (100)	
2 days/week, n (%)	96 (28)	96 (54)	
> 2 days/week, n (%)	82 (24)	82 (46)	
Non-adherent, n (%)	161 (48)		161 (100)
0 day/week, n (%)	71 (21)		71 (44)
1 day/week, n (%)	90 (27)		90 (56)

# Barriers and facilitators re GLA:D exercises

## **Facilitators** (for $\leq 60\%$ )

- Easy to perform
- Perceived progress and improvement
- Trust in / support of GLA:D PT
- Knowledge how exercising can influence OA

## **Barriers** ( $\leq 10\%$ )

- No/little discipline
- No/little motivation
- No/little time
- No/little integration in daily routine
- Lack of habit to exercise
- No possibility to exercise in group

# On-going / planned research

- How do the certified PTs provide the GLA:D® OA programme (Fidelity study)
  - assess changes in organisation and delivery of GLA:D programme (MSc Thesis Alisha Lehni)
- Use of behaviour change techniques (BCTs) of GLA:D PTs during GLA:D programme to support self-management
  - Identify applied BCTs using the CALORE taxonomy (MSc Thesis Daniel Rathgeb)



## On-going / planned research

- Use of DK registry data: predictors for non-adherence  
characteristics of those GLAD participants who are not performing the GLAD  
exercises after programme (in preparation: Niedermann K, Gronne D, Skou S)
- Use of CH registry data: predictors for effectiveness of GLAD OA  
programme (in preparation: Hilfiker & Niedermann on behalf of GLAD OA CH)

Thank you for your attention!



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