[2002] [THU0207] JOINT SPACE NARROWING IS POORLY CORRELATED WITH SYMPTOMS WORSENING IN KNEE-OSTEOARTHRITIS: RESULTS FROM THE PROSPECTIVE FOLLOW-UP OF 106, PLACEBO-TREATED PATIENTS FOR THREE YEARS

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Background: Osteoarthritis (OA) is an age and sex-related, chronic, frequent, progressive, disabling and resources consuming disease. OA is characterized by a continuous progression in both the symptoms and structural progression of the disease. A clear, well-defined correlation between symptoms and structural progression has not yet been established.
Objectives: To evaluate the relation between the structural deterioration and the symptoms evolution in a 3-year double-blind, randomized study.
Methods: A cohort of 106 subjects, of both genders, with knee-OA according to the ACR criteria, corresponding to the placebo arm of a double-blind, placebo-controlled study, evaluating the symptomatic and structural effect of glucosamine sulfate in OA was prospectively followed for a 3-year period. Values of the WOMAC index (total score and pain, function and stiffness scales), mean joint space width (digital image analysis) (JSW) and joint space narrowest point (magnification lens) (JN) were available at baseline and after 36 months.
Results: No significant correlation was observed, over the 3 -year period, between the changes in JSW and the changes in the global WOMAC score (p=0.68) or the pain (p=0.55), function (p=0.65) or stiffness (p=0.32) subscales. Similarly, no significant correlation was observed between the changes in JN and the global WOMAC score (p=0.45) or the pain (p=0.20), function (0.73) or stiffness (p=0.29) subscales. The percentage of variance in the symptomatic changes explained by the structural changes remained very poor in all type of correlation, ranging from 1.9% and 6.9%, explained by the changes in JN over three years of the variance in the changes of the function and pain subscales of WOMAC.
Conclusion: Structural changes overtime, assessed by the measurement of joint space width are poor predictors of the clinical evolution of patients with knee-OA.

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