

Spironolactone no benefit for knee OA in older adults

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terms of cortisol, matrix metalloproteinase 3, and urinary C-telopeptide of type II collagen. The spironolactone group had more minor adverse events (47 versus 32), but there was no increase in death or hospitalization.

"Spironolactone did not improve symptoms, physical function, or health-related quality of life in older people with knee OA," the authors write.

More information: Abstract Full Text

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(HealthDay)—For older adults with knee osteoarthritis (OA), spironolactone is not associated with improvements in symptoms, physical function, or health-related quality-of-life, according to a study published in the May issue of *Arthritis Care & Research*.

Marion E.T. McMurdo, M.B.Ch.B., M.D., from Ninewells Hospital and Medical School in Dundee, U.K., and colleagues conducted a randomized trial involving individuals aged ?70 years with symptomatic knee OA. Eighty-six participants were randomized to 12 weeks of 25 mg daily oral spironolactone or placebo.

The researchers observed no significant improvement in the Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) pain score between the groups (P = 0.19). Furthermore, no improvements were seen in WOMAC stiffness score (P = 0.58), WOMAC physical function score (P = 0.98), or EuroQol 5-domain 3L score (P = 0.34). The groups did not differ significantly in



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