

**Minimal benefits from paracetamol for the treatment of osteoarthritis of the knee or hip**

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<b>Clinical Question</b>	Compared to placebo, how effective is paracetamol for the treatment of osteoarthritis of the knee or hip?
<b>Bottom Line</b>	Paracetamol provided only minimal improvements in pain and function for people with hip or knee osteoarthritis, with no increased risk of adverse events overall (high quality evidence). Subgroup analysis indicated that the effects on pain and function did not differ according to the dose of paracetamol. Due to the small number of events, it was less certain if paracetamol use increased the risk of serious adverse events, withdrawals due to adverse events, and rate of abnormal liver function tests. On average, participants in the study were aged between 55 and 70 years, and most presented with knee osteoarthritis. The treatment dose ranged from 1.95 g/day to 4 g/day of paracetamol and participants were followed up between one and 12 weeks in all but one study, which followed people up for 24 weeks.
<b>Caveat</b>	None of the studies measured quality of life. Most trials did not clearly report randomisation and concealment methods and were at unclear risk of selection bias. Six trials were funded by companies that produced paracetamol.
<b>Context</b>	Paracetamol is vastly recommended as the first-line analgesic for osteoarthritis of the hip or knee. However, there has been controversy about this recommendation given recent studies have revealed small effects of paracetamol when compared with placebo.
<b>Cochrane Systematic Review</b>	Leopoldino AO et al. Paracetamol versus placebo for knee and hip osteoarthritis. Cochrane Reviews, 2019, Issue 2. Art. No.: CD013273. DOI: 10.1002/14651858.CD013273. This review contains 10 studies involving 3,541 participants.

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Systematic review link:

<https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD013273/full>