Efficacy in joint pain relief and Synovial effusion

1. Objective
To obtain preliminary information about the effectiveness of oral administration of Mobilee® to patients with moderate to severe osteoarthritis of the knee presenting with persistent knee pain and synovial effusion.

2. Methods
This is an observational, retrospective cohort study involving 70 consecutive outpatients with knee OA and synovitis who took the selected treatments during a period of at least 6 months. Studied treatments were Mobilee® (MBL) (80mg/d) and paracetamol (PCT) (500mg/d). The evolution of the synovial effusion was assessed with ultrasonography, and the evolution of joint pain was assessed with the VAS Huskisson’s scale.

3. Results
At baseline the absolute number of patients with synovial effusion (≥4mm) was not different between groups (33 vs. 36 patients for MBL and PCT respectively; P=0.245). The supplementation with Mobilee® resulted in a significant decrease on the number of patients with synovial effusion from the first month of treatment (5 vs. 29 patients for MBL and PCT respectively; P=0.001) until 6 months follow-up (0 vs. 14 patients for MBL and PCT respectively; P=0.001).

Pre-treatment number of patients with severe synovial effusion (>6mm) was not different between groups (16 vs. 15 for MBL and PCT respectively). On the MBL group no cases of severe synovial effusion were detected from 1 until 6 months follow-up, while on the control group a number of severe cases remained at 1 month (14 patients) and 3 months (6 patients), resulting in differences between treatments at both time points.

Joint pain was reduced (P<0.05) along the 6 months studied in both groups, but it was reduced faster in the MBL group and reached a lower value after 6 months of treatment (P<0.001).

4. Conclusions
The results of the present study suggest that Mobilee® intake strongly inhibits synovial effusion and reduces knee pain. It has been demonstrated that synovial effusion is an independent risk factor for OA, and it correlates with faster cartilage degradation. Therefore, the reduction of synovial effusion demonstrated as a result of Mobilee® treatment may delay OA progression.