Reference	Country	Subjects* Sex Arthritis Type	Intervention* Number of Subjects, Frequency/Intensity/ Duration, Length Rx Dose Minutes/Week	Control Number of Subjects, Type	Mode, Activity Type, Resistance Type	Reported Significant Outcomes Pain, Intervention vs. Control	Reported Significant Outcomes Function Intervention vs. Control	Reported Significant Outcomes QOL,* Intervention vs. Control	Reported Significant Outcomes Other, Intervention vs. Control
Coleman et al. 1996 (1)	USA	Males/Females Osteoarthritis	N =25 F = 3/week I = Moderate D = 60 minutes L = 20 weeks	N = 30 Usual care	Cycling	-	_	-	No new symptoms or existing symptoms exacerbated during exercise program. Low rate of injuries documented.
Wigers et al. 1996 (2)	Norway	Males/Females Fibromyalgia	N = 20 F = 3/week I = Moderate D = 45 minutes L = 14 weeks	N = 20 Usual care	Aerobic dance and games	Ļ	_	_	↑ Work capacity
Ettinger et al. 1997 (3)	USA	Males/Females Osteoarthritis	N = 144 F = 3 I = 50-70% HHR D = 60 minutes L = 72 weeks	N = 149 Education	Walking	Ļ	↑	-	↓ ADL disability ↑ Muscle strength ↑ Fitness No radiographic progression
Sullivan et al. 1998 (4)	USA	Males/Females Osteoarthritis	N = 47 F = 3/week I = Moderate D = 30 minutes L = 8 weeks	N = 45 Usual care	Walking	Ļ	-	-	↑ Physical activity ↑ Self-efficacy Changes not sustained at 12 months
Hartman et al. 2000 (5)	USA	Males/Females Osteoarthritis	N = 19 F = 2/week I = Moderate D = 60 minutes L = 12 weeks	N = 16 Usual care	Tai Chi	_	_	_	 ↑ Self-efficacy for arthritis symptoms ↑ Satisfaction with general health, ↓ tension
Penninx et al. 2001 (6)**	USA	Males/Females Osteoarthritis	N = 88 F = 3 I = 50-70% HHR D = 60 minutes L = 72 weeks	N = 80 Education	Walking	_	_	_	47% Reduced risk of incident ADL disability

Part 1. Aerobic Exercise Versus Non-Exercise Control (n = 15 Studies; 17 Group Comparisons)

Part 1. Aerobic Exercise Versus Non-Exercise Control (n = 15 Studies; 17 Group Comparisons) (continued)

Reference	Country	Subjects* Sex Arthritis Type	Intervention* Number of Subjects, Frequency/Intensity/ Duration, Length Rx Dose Minutes/Week	Control Number of Subjects, Type	Mode, Activity Type, Resistance Type	Reported Significant Outcomes Pain, Intervention vs. Control	Reported Significant Outcomes Function Intervention vs. Control	Reported Significant Outcomes QOL,* Intervention vs. Control	Reported Significant Outcomes Other, Intervention vs. Control
Schachter et al. 2003 (7)	Canada	Females Fibromyalgia	N = 51 F = 3-5/week I = 40-75% HHR D = 1*30 minutes L = 16 weeks	N = 31 Wait list	Long bout Aerobics	-	-	-	Within group: ↓ Disease severity ↑ Well-being ↑ Self-efficacy
Schachter et al. 2003 (7)	Canada	Females Fibromyalgia	N = 56 F = 3-5/week I = 40-75% HHR D = 2*15min L = 16 weeks	N = 31 Wait list	Short bout Aerobics	-	↑	-	Within group: ↓ Disease severity ↑ Self-efficacy
Song et al. 2003 (8)	South Korea	Females Osteoarthritis	N = 38 F = 3/week I = Moderate† D = 20 minutes L = 12 weeks	N = 34 Wait list	Tai Chi	Ļ	↑	-	↑ Abdominal strength, ↑ Balance ↓ Stiffness
Talbot et al. 2003 (9)	USA	Males/Females Osteoarthritis	N = 17 F = N/A‡ I = Moderate D = N/A‡ L = 12 weeks	N = 17 Education	Walking	-	-	-	23% increase in step count over baseline ↑ Muscle strength ↑ Walk performance
Valim et al. 2003 (10)	Brazil	Females Fibromyalgia	N = 38 F = 3/week I = Moderate D = 45 minutes L = 20 weeks	N = 38 Stretching	Walking	Ļ	-	Ţ	↑ SF36 Role emotional and Mental Summary Score

Part 1. Aerobic Exercise Versus Non-Exercise Control (n = 15 Studies; 17 Group Comparisons) (continued)

Reference	Country	Subjects* Sex Arthritis Type	Intervention* Number of Subjects, Frequency/Intensity/ Duration, Length Rx Dose Minutes/Week	Control Number of Subjects, Type	Mode, Activity Type, Resistance Type	Reported Significant Outcomes Pain, Intervention vs. Control	Reported Significant Outcomes Function Intervention vs. Control	Reported Significant Outcomes QOL,* Intervention vs. Control	Reported Significant Outcomes Other, Intervention vs. Control
Bilberg et al. 2005 (11)	Sweden	Males/Females Rheumatoid arthritis	N = 22 F = 2/week I = Moderate D = 45 minutes L = 12 weeks	N = 27 Usual care	Aquatics	Ļ	Ţ	_	↑ Muscle function ↑ Muscle endurance
Mangani et al. 2006 (12)**	USA	Males/Females Osteoarthritis	N = 144 F = 3/week I = 50-70% HHR D = 60 minutes L = 72 weeks	N = 149 Education	Walking	Ļ	Ţ	-	 ↓ ADL disability ↑ Walking speed ↑ Muscle strength ↑ Fitness No radiographic progression Persons with and without comorbid conditions had similar outcomes.
Brismee et al. 2007 (13)	USA	Males/Females Osteoarthritis	N = 22 F = 3/week I = Moderate D = 40 minutes L = 12 weeks	N = 19 Attention Control	Tai Chi	Ļ	<u>↑</u>	-	↓ Stiffness
Fransen et al. 2007 (14)	Australia	Males/Females Osteoarthritis	N = 55 F = 2/week I = Moderate D = 60 minutes L = 12 weeks	N = 41 Wait list	Tai Chi	-	<u>↑</u>	-	_
Fransen et al. 2007 (14)	Australia	Males/Females Osteoarthritis	N = 56 F = 2/week I = Moderate D = 60 minutes L = 12 weeks	N = 41 Wait list	Aquatics	Ļ	<u>↑</u>	_	_

Part 1. Aerobic Exercise Versus Non-Exercise Control (n = 15 Studies; 17 Group Comparisons) (continued)

Reference	Country	Subjects* Sex Arthritis Type	Intervention* Number of Subjects, Frequency/Intensity/ Duration, Length Rx Dose Minutes/Week	Control Number of Subjects, Type	Mode, Activity Type, Resistance Type	Reported Significant Outcomes Pain, Intervention vs. Control	Reported Significant Outcomes Function Intervention vs. Control	Reported Significant Outcomes QOL,* Intervention vs. Control	Reported Significant Outcomes Other, Intervention vs. Control
Song et al. 2008 (15)	South Korea	Females Osteoarthritis	N = 38 F = 3/week I = Moderate D = 60 minutes L = 12 weeks	N = 34 Wait list	Tai Chi	Ļ	-	-	 ↓ Stiffness ↑ Motivation to perform health behaviors ↑ Performance of health behaviors
Song et al. 2008 (15)	South Korea	Females Osteoarthritis	N = 38 F = 3/week I = Moderate D = 60 minutes L = 12 weeks	N = 34 Wait list	Tai Chi	10	8	1	4 ↑ Self-efficacy; 4 ↑ Muscle strength; 2 ↑ Physical activity; 3 Decrease symptoms; 4 ↑ Measures of mental/emotional health; 5 ↑ or no change in symptoms/disease activity

Part 2. Strength Training Versus Non-Exercise Control (n = 8)

Reference	Country	Subjects* Sex Arthritis Type	Intervention* Number of Subjects, Frequency/Intensity/ Duration, Length Rx Dose Minutes/Week	Control Number of Subjects, Type	Mode, Activity Type, Resistance Type	Reported Significant Outcomes Pain, Intervention vs. Control	Reported Significant Outcomes Function Intervention vs. Control	Reported Significant Outcomes QOL,* Intervention vs. Control	Reported Significant Outcomes Other, Intervention vs. Control
Coleman et al. 1996 (1)	USA	Males/Females Osteoarthritis	N = 25 F = 3/week I = 50-80% 1 RM D = 2 sets x 10 reps L = 20 weeks	N = 30 Usual care	Isokinetic	Ļ	↑ (-	 ↑ Muscle strength ↓ Disease activity ↑ Walking speed ↓ Stiffness
Schilke et al. 1996 (16)	USA	Males/Females Osteoarthritis	N = 10 F = 3/week I = NR D = 1-6 sets x 5 reps L = 8 weeks	N = 10 Usual care	Isokinetic	Ļ	-	-	 ↑ Muscle strength ↑ Range-of-motion ↑ Mobility ↓ Stiffness
Ettinger et al. 1997 (3)	USA	Males/Females Osteoarthritis	N = 146 F = 3/week I = Moderate D = 2 sets x 12 reps L = 72 weeks	N = 149 Education	Isotonic	Ļ	↑ (-	↑ Muscle Strength ↑ Fitness ↓ ADL disability
Hakkinen et al. 2001 (17)	Finland	Males/Females Rheumatoid arthritis	N = 35 F = 2/week I = 50-70% 1 RM D = 2 sets x 8-12 reps L = 96 weeks	N = 35 Range of motion	Isotonic	Ļ	Ţ	-	↑ Muscle strength ↑ Bone mineral density ↓ Disease activity
Penninx et al. 2001 (6)**	USA	Males/Females Osteoarthritis	N = F = 3/week I = Moderate D = 2 sets x 12 reps L = 72 weeks	N = 80 Education	Isotonic	-	_	-	40% Reduced risk of incident ADL disability

Part 2. Strength Training Versus Non-Exercise Control (n = 8) (continued)

Reference	Country	Subjects* Sex Arthritis Type	Intervention* Number of Subjects, Frequency/Intensity/ Duration, Length Rx Dose Minutes/Week	Control Number of Subjects, Type	Mode, Activity Type, Resistance Type	Reported Significant Outcomes Pain, Intervention vs. Control	Reported Significant Outcomes Function Intervention vs. Control	Reported Significant Outcomes QOL,* Intervention vs. Control	Reported Significant Outcomes Other, Intervention vs. Control
Hakkinen et al. 2004 (18)	Finland	Males/Females Rheumatoid arthritis	N = 35 F = 3/week I = 50-70% 1 RM D = 2 sets x 8-12 reps L = 96 weeks	N = 35 Wait list	Isotonic	Ļ	<u>↑</u>		↑ Walking speed ↑ Muscle strength ↓ Stiffness ↓ Disease activity
Kingsley et al. 2005 (19)	USA	Females Fibromyalgia	N = 15 F = 2/week I = 40-80% 1 RM D = 1 set x 8-12 reps L = 12 weeks	N = 14 Wait list	Isotonic	-	Ţ	-	 ↑ Upper body strength ↑ Rating perceived exertion (↑ Function reported among completers only)
Mangani et al. 2006 (12)**	USA	Males/Females Osteoarthritis	N = 146 F = 3 /week I = Moderate D = 2 sets x 12 reps L = 72 weeks	N = 149 Education	Isotonic	-	-	_	↓ ADL disability among those with no comorbidity at 18 months; ↓ ADL disability among those with comorbidities was only significant at 3 months.
Mangani et al. 2006 (12)**	USA	Males/Females Osteoarthritis	N = 146 F = 3 /week I = Moderate D = 2 sets x 12 reps L = 72 weeks	N = 149 Education	Isotonic	5	5	0	6 ↑ Muscle strength, 3 ↓ Stiffness, 3 ↓ Disease activity, 4 ADL disability/mobility, 1 range of motion

Part 3. Combined Aerobic and Strength Training versus Non-Exercise Control (n= 6)

Reference	Country	Subjects* Sex Arthritis Type	Intervention* Number of Subjects, Frequency/Intensity/ Duration, Length Rx Dose Minutes/Week	Control Number of Subjects, Type	Mode, Activity Type, Resistance Type	Reported Significant Outcomes Pain, Intervention vs. Control	Reported Significant Outcomes Function Intervention vs. Control	Reported Significant Outcomes QOL,* Intervention vs. Control	Reported Significant Outcomes Other, Intervention vs. Control
Coleman et al. 1996 (1)	USA	Males/Females Osteoarthritis	N = 25 F = 3/week I = 75-80% 1 RM; 60-75% HHR D = 60 minutes L = 20 weeks	N = 30 Usual care	Isokinetic cycling	-	-	-	Joint symptoms were stable over time ↑ Muscle strength 2 Minor injuries occurred in combined group Low overall rate of new injuries
Stenstrom et al. 1996 (20)	Sweden	Males/Females Inflammatory arthritis	N = 27 F = 5/week I = Moderate D = 30 minutes L = 12 weeks	N = 27 Relaxation	NR Walking	-	-	-	↑ Perceived exertion while walking Relaxation (control) training improved muscle function and QOL and joint tenderness
Rejeski et al. 2002 (21)	USA	Males/Females Osteoarthritis	N= 80 F = 3/week I = 50-75% HHR D = 60 minutes L = 72 weeks	N = 78 Education and attention control	Isotonic Walking	_	Ţ	-	 ↑ Satisfaction with function 2.6% of body weight lost (1.3% control)
Dias et al. 2003 (22)	Brazil	Males/Females Osteoarthritis	N = 25 F = 2x week strength ; 3/week aerobic I = Moderate D = 40 minutes walking; strength NR L = 12 weeks	N = 25 Usual care	Isotonic Walking	Ļ	Ţ	-	_

Part 3. Combined Aerobic and Strength Training versus Non-Exercise Control (n= 6) (continued)

Munneke et al 2005 (23); de Jong et al. 2003 (24)§	Netherland s	Males/Females Rheumatoid arthritis	N = 151 F = 2 I = Moderate D =75 minutes L = 104 weeks	N = 158 Usual care	Isotonic Cycling Impact sports	-	↑	-	 ↑ Mental health, fitness, and muscle strength No change in radiographic progression or disease activity summary measure
Munneke et al 2005 (23); de Jong et al. 2003 (24)§	Netherland s	Males/Females Rheumatoid arthritis	N = 151 F = 2 I = Moderate D =75 minutes L = 104 weeks	N = 158 Usual care	Isotonic Cycling Impact sports	1	3	0	2 ↑ Muscle strength, 2 ↑ Fitness/perceived exertion, 2 No change in disease activity, 1 ↑ Mental health, 1 ↓ Body weight

↓, decrease; ↑, increase; ADL, activity of daily living; D, duration (minutes) per session; F, frequency per week; HHR, heart rate reserve; I, Intensity; L, length of interventions (weeks), n, number; N/A, not applicable; NR, not reported; QOL, quality of life; RM = repetition maximum

** These studies were secondary analyses of the Ettinger et al. 1997 (3) study, examining outcomes by comorbidity status and incident activities of daily living disability.

† If intensity is listed as "moderate", the study did not specifically state the exercise intensity in terms of %Maximum heart rate, heart rate reserve, etc. If the mode of exercise was of at least 3 metabolic equivalent (METs) per the Compendium of Physical Activity (25) then the intensity was listed as "moderate."

‡ In this study, there was no prescribed dose given in terms of frequency and duration. Exercise goal was to increase pedometer steps by 10% over 4 weeks.

§ The Munneke (23) study is a follow-up study of the original report by de Jong (24). Details of the exercise intervention reported in this table are from both studies.

Reference List

- 1. Coleman EA, Buchner DM, Cress ME, Chan BK, de Lateur BJ. The relationship of joint symptoms with exercise performance in older adults. J.Am.Geriatr.Soc. 1996 Jan;44(1):14-21.
- 2. Wigers SH, Stiles TC, Vogel PA. Effects of aerobic exercise versus stress management treatment in fibromyalgia. A 4.5 year prospective study. Scand.J.Rheumatol. 1996;25(2):77-86.
- 3. Ettinger WH, Jr., Burns R, Messier SP, Applegate W, Rejeski WJ, Morgan T, Shumaker S, Berry MJ, O'Toole M, Monu J, et al. A randomized trial comparing aerobic exercise and resistance exercise with a health education program in older adults with knee osteoarthritis. The Fitness Arthritis and Seniors Trial (FAST). JAMA 1997 Jan 1;277(1):25-31.
- 4. Sullivan T, Allegrante JP, Peterson MG, Kovar PA, MacKenzie CR. One-year followup of patients with osteoarthritis of the knee who participated in a program of supervised fitness walking and supportive patient education. Arthritis Care Res. 1998 Aug;11(4):228-33.

- 5. Hartman CA, Manos TM, Winter C, Hartman DM, Li B, Smith JC. Effects of T'ai Chi training on function and quality of life indicators in older adults with osteoarthritis. J.Am.Geriatr.Soc. 2000 Dec;48(12):1553-9.
- 6. Penninx BW, Messier SP, Rejeski WJ, Williamson JD, DiBari M, Cavazzini C, Applegate WB, Pahor M. Physical exercise and the prevention of disability in activities of daily living in older persons with osteoarthritis. Arch.Intern.Med. 2001 Oct 22;161(19):2309-16.
- 7. Schachter CL, Busch AJ, Peloso PM, Sheppard MS. Effects of short versus long bouts of aerobic exercise in sedentary women with fibromyalgia: a randomized controlled trial. Phys. Ther. 2003 Apr;83(4):340-58.
- 8. Song R, Lee EO, Lam P, Bae SC. Effects of tai chi exercise on pain, balance, muscle strength, and perceived difficulties in physical functioning in older women with osteoarthritis: a randomized clinical trial. J.Rheumatol. 2003 Sep;30(9):2039-44.
- 9. Talbot LA, Gaines JM, Huynh TN, Metter EJ. A home-based pedometer-driven walking program to increase physical activity in older adults with osteoarthritis of the knee: a preliminary study. J.Am.Geriatr.Soc. 2003 Mar;51(3):387-92.
- Valim V, Oliveira L, Suda A, Silva L, de AM, Barros NT, Feldman D, Natour J. Aerobic fitness effects in fibromyalgia. J.Rheumatol. 2003 May;30(5):1060-9.
- 11. Bilberg A, Ahlmen M, Mannerkorpi K. Moderately intensive exercise in a temperate pool for patients with rheumatoid arthritis: a randomized controlled study. Rheumatology.(Oxford) 2005 Apr;44(4):502-8.
- 12. Mangani I, Cesari M, Kritchevsky SB, Maraldi C, Carter CS, Atkinson HH, Penninx BW, Marchionni N, Pahor M. Physical exercise and comorbidity. Results from the Fitness and Arthritis in Seniors Trial (FAST). Aging Clin.Exp.Res. 2006 Oct;18(5):374-80.
- 13. Brismee JM, Paige RL, Chyu MC, Boatright JD, Hagar JM, McCaleb JA, Quintela MM, Feng D, Xu KT, Shen CL. Group and home-based tai chi in elderly subjects with knee osteoarthritis: a randomized controlled trial. Clin.Rehabil. 2007 Feb;21(2):99-111.
- 14. Fransen M, Nairn L, Winstanley J, Lam P, Edmonds J. Physical activity for osteoarthritis management: a randomized controlled clinical trial evaluating hydrotherapy or Tai Chi classes. Arthritis Rheum. 2007 Apr 15;57(3):407-14.
- 15. Song R, Lee EO, Lam P, Bae SC. Effects of sun-style Tai Chi exercise on arthritis symptoms, motivation and the performance of health behaviors in women with osteoarthritis. J.Korean.Acad.Nurs. 2008;37(2):249-56.
- 16. Schilke JM, Johnson GO, Housh TJ, O'Dell JR. Effects of muscle-strength training on the functional status of patients with osteoarthritis of the knee joint. Nurs.Res. 1996 Mar;45(2):68-72.

- 17. Hakkinen A, Sokka T, Kotaniemi A, Hannonen P. A randomized two-year study of the effects of dynamic strength training on muscle strength, disease activity, functional capacity, and bone mineral density in early rheumatoid arthritis. Arthritis Rheum. 2001 Mar;44(3):515-22.
- 18. Hakkinen A, Sokka T, Hannonen P. A home-based two-year strength training period in early rheumatoid arthritis led to good long-term compliance: a five-year followup. Arthritis Rheum. 2004 Feb 15;51(1):56-62.
- 19. Kingsley JD, Panton LB, Toole T, Sirithienthad P, Mathis R, McMillan V. The effects of a 12-week strength-training program on strength and functionality in women with fibromyalgia. Arch.Phys.Med.Rehabil. 2005 Sep;86(9):1713-21.
- 20. Stenstrom CH, Arge B, Sundbom A. Dynamic training versus relaxation training as home exercise for patients with inflammatory rheumatic diseases. A randomized controlled study. Scand.J.Rheumatol. 1996;25(1):28-33.
- 21. Rejeski WJ, Focht BC, Messier SP, Morgan T, Pahor M, Penninx B. Obese, older adults with knee osteoarthritis: weight loss, exercise, and quality of life. Health Psychol. 2002 Sep;21(5):419-26.
- 22. Dias RC, Dias JM, Ramos LR. Impact of an exercise and walking protocol on quality of life for elderly people with OA of the knee. Physiother.Res.Int. 2003;8(3):121-30.
- 23. Munneke M, de JZ, Zwinderman AH, Ronday HK, van SD, Dijkmans BA, Kroon HM, Vliet Vlieland TP, Hazes JM. Effect of a high-intensity weight-bearing exercise program on radiologic damage progression of the large joints in subgroups of patients with rheumatoid arthritis. Arthritis Rheum. 2005 Jun 15;53(3):410-7.
- 24. de Jong Z, Munneke M, Zwinderman AH, Kroon HM, Jansen A, Ronday KH, van SD, Dijkmans BA, Van den Ende CH, Breedveld FC, et al. Is a long-term high-intensity exercise program effective and safe in patients with rheumatoid arthritis? Results of a randomized controlled trial. Arthritis Rheum. 2003 Sep;48(9):2415-24.
- 25. Ainsworth BE, Haskell WL, Whitt MC, Irwin ML, Swartz AM, Strath SJ, O'Brien WL, Bassett DR, Jr., Schmitz KH, Emplaincourt PO, et al. Compendium of physical activities: an update of activity codes and MET intensities. Med.Sci.Sports Exerc. 2000 Sep;32(9 Suppl):S498-S504.