

EULAR
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2025 UPDATE FOR PHYSICAL ACTIVITY IN IA AND OA

Promoting physical activity throughout the disease course

EULAR – The European Alliance of Associations for Rheumatology – has updated its recommendations on physical activity in people with inflammatory arthritis or osteoarthritis. These align with current World Health Organization (WHO) efforts to reduce sedentary behaviour and promote regular activity and exercise.

Physical activity is good for health. In 2020, the WHO updated its guidelines – with an emphasis on the need to reduce sedentary behaviours such as prolonged sitting or reclining. To achieve this, they now recommend that everyone take at least 150 minutes of moderate-intensity exercise, or 75 minutes of more vigorous aerobic activity per week, or any combination of both. These totals can be made up of short bursts throughout the day – even just a few minutes at a time. This is because even intermittent activity can provide meaningful benefits and counteract the negative effects of long periods of limited movement in our work and leisure time – sedentary behaviours which translate into low energy expenditure.^{1,2} Staying active is also important for people with inflammatory arthritis (IA) or rheumatic and musculoskeletal diseases (RMD), and has been shown to have a positive impact on disease activity, physical function, and quality of life. Yet despite this, many people with an RMD are less physically active than those without.

The EULAR recommendations for physical activity in people with inflammatory arthritis or osteoarthritis (OA) were first published in 2018. “We have seen new evidence since the original publication – particularly around the use of technology, and the combination of educational and behavioural strategies” said Karin Niedermann, Professor of physiotherapy research at Zurich University of Applied Sciences in Switzerland, and convenor of the project. “With that in mind – and taking into account the revised WHO guidelines – it was reasonable to apply for an update”.

Researchers, healthcare professionals, and patients worked together to develop this new set of recommendations. They are focused on people with rheumatoid arthritis, spondyloarthritis, or osteoarthritis in the hip or knee. Some previous recommendations have been reworded, one on contraindications has been deleted, and there are some new inclusions.

The new work, published in the April 2026 issue of the *Annals of the Rheumatic Diseases*, includes 4 overarching principles and 11 recommendations. The overarching principles state that regular physical activity – and reduced sedentary behaviour – are essential for health-related quality of life in people with inflammatory arthritis or osteoarthritis, and that reducing sedentary behaviour has health benefits independent of the level of activity taken. General recommendations for physical activity should include cardiorespiratory and muscular fitness, as well as flexibility and neuromotor performance – and these four domains are deemed feasible and safe for people with these types of underlying RMD. Finally, promoting physical activity requires shared decision-making between patients and their healthcare providers, taking into account people’s individual preferences, capabilities, and resources.

The recommendations emphasise that promoting physical activity should be a core part of standard care throughout the disease course, and should be done by everyone in the healthcare team – making collaboration and referrals as necessary, and using standardised methods to target improvement across key domains. Individual factors should be assessed to identify barriers and facilitators, and the need for any adaptations. Other recommendations focus on who should deliver the chosen interventions, as well as how often, and how they should be evaluated

over time. Wearable activity trackers and other digital technologies should be considered when promoting physical activity for people with inflammatory arthritis or osteoarthritis.

“Healthcare professionals play a crucial role in supporting patients to be physically active. These recommendations provide practical, evidence-based guidance to integrate physical activity into routine care.” said Anne-Kathrin Rausch Osthoff – first author on the paper and researcher at Zurich University of Applied Sciences in Switzerland. “By embedding physical activity into standard care, we have an opportunity to significantly improve long-term outcomes for many people living with rheumatic diseases.”

EULAR hopes the updated recommendations provide a strong foundation and will support healthcare professionals in integrating physical activity in people’s management plans. But, as always, there is a need for consideration of individual needs, environmental conditions, and the broader national healthcare context when implementing these ideas in everyday practice.

Source

Rausch Osthoff A-K, et al. EULAR recommendations for physical activity in people with inflammatory arthritis and osteoarthritis: 2025 update. *Ann Rheum Dis* 2026; doi.org/10.1016/j.ard.2026.03.006

References

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2. Islam H, et al. Exercise Snacks: A Novel Strategy to Improve Cardiometabolic Health. *Exerc Sport Sci Rev* 2022;50:31–37. doi.org/10.1249/jes.0000000000000275

About EULAR

EULAR is the European umbrella organisation representing scientific societies, health professional associations and organisations for people with rheumatic and musculoskeletal diseases (RMDs). EULAR aims to reduce the impact of RMDs on individuals and society, as well as improve RMD treatments, prevention, and rehabilitation. To this end, EULAR fosters excellence in rheumatology education and research, promotes the translation of research advances into daily care, and advocates for the recognition of the needs of those living with RMDs by EU institutions.

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