

TABLE E-1 Summary of Queries, Aims, and Approaches Taken from Illustrative Examples of Qualitative Studies of Total Knee Replacement*

Author, Year	Query	Aim	Approach
Experience of knee osteoarthritis			
Marcinkowski et al., 2005 ¹⁷	Many studies have quantified outcomes, but few have studied the patients' lived experience of joint replacement process, some suggest need for help between expectations and reality	"to explore the process of total knee replacement from the participants' perspectives" (p 203)	17 interviews; grounded theory
Gignac et al., 2006 ¹⁶	Literature often focuses on severe osteoarthritis; less is known about meaning of symptoms to less severe, middle age adults	"to compare the health experiences of middle- and older-age adults with moderate osteoarthritis" (p 906)	16 focus groups: 10 osteoarthritis, 6 control; grounded theory
Self-care, education			
Victor et al., 2004 ³⁵	Previous work identified unmet need regarding education and information. Equivocal findings of research in health promotion interventions	"explores the patient's perspective on the meaning and significance of living with arthritis" (p 63)	Qualitative study embedded in a randomized controlled trial of a health-promotion intervention; 170 interviews, diaries, and tapes from education sessions
Grime and Ong, 2007 ²²	Osteoarthritis care focuses on self-management. Different educational frameworks exist about how to enable self-management. Which is used in our educational materials telling patients?	"to see how osteoarthritis was constructed [in patient education materials] and to consider the potential implications for self-care" (first page)	Review of 6 educational pamphlets related to osteoarthritis for language and discourse about osteoarthritis
Health-services research and decisions with regard to surgery			

Kroll et al., 2007 ⁴	Variance in use of total knee replacement cannot be explained by prevalence of knee osteoarthritis	“to fully analyze their experiences, knowledge, beliefs, and attitudes regarding knee arthritis and total knee replacement” (p 1070)	6 focus groups, 2 for each of three ethnic groups; grounded-theory approach, compare different ethnic groups
Ballantyne et al., 2007 ⁵	Discrepancy between “need” and surgery rates	to assess “the illness perceptions and preferred accommodations and coping strategies of patients with advanced osteoarthritis” (p 28)	29 individual interviews, contrasting the experience of rural as compared with urban patients
Clark et al., 2004 ³	Joint replacement is elective and influenced by patient decision-making process, a complicated process	“to understand the decision-making process of appropriate candidates for total joint replacement who did not want to undergo the surgery” (p 1367)	17 interviews; grounded-theory approach
Hudak et al., 2002 ²	Little is understood about the process of decision-making with regard to joint replacement	“to explore how this process fits with the model of shared decision-making” (p 273)	17 interviews; grounded-theory approach
Figaro et al., 2004 ¹⁵	Patient attitude and beliefs influence decisions for care. “Beliefs and experiences of Blacks regarding arthritis may be important underlying causes of underutilization of total knee replacement.” (p 325)	“To determine their [older urban Blacks] preferences and expectations of total knee replacement...and their influence on decision-making” (p 325)	94 interviews; ethnographic approach, grounded theory
Sanders et al., 2003 ¹⁸	What are the unmet needs for total joint replacement and what are the reasons for it?	“To explore the perceptions of need for treatment and their identification and experience of any barriers to health-care utilization for severe joint problems” (p 353)	27 interviews; grounded theory
Brand and Cox, 2006 ²⁶	Need to inform clinical pathways with regard to knowledge and expectations	“to inform identification of key decision nodes in osteoarthritis management, identify barriers to implementation” (p 171)	Focus groups, key informant interviews of patients
Adherence to care			

Hendry et al., 2006 ⁶	Exercise has been shown to be effective care for osteoarthritis, but adherence is low	“to examine the views of primary care patients with osteoarthritis toward exercise, to explore factors that determine acceptability and motivation to exercise and to identify barriers that limit its use” (p 559)	22 interviews; framework method, grounded-theory approach
Sale et al., 2006 ¹⁰	Adherence to medications in osteoarthritis is ongoing problem	“to explore the experience of adherence to pain medications in older adults with osteoarthritis” (p 272)	19 interviews; eidetic phenomenology
Thorstensson et al., 2006 ¹⁹	Understanding of exercise may influence adherence to exercise as a treatment	“to better understand underlying processes leading to response or non-response to exercise as a treatment” (p 52)	16 interviews, phenomenography
Meta-analyses			
O’Neill et al., 2007 ¹	Several qualitative studies now exist with regard to patients’ experiences and expectations; what are they saying in common?	To explore factors that might “influence the decision-making process of total knee replacement surgery” (second page)	Meta-synthesis of the findings of 10 published qualitative studies; grounded theory

*This list is not meant to be exhaustive.