

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

10 Jun 2026

### Comparative effects of calisthenic exercises and isometric exercises on pain, balance and functional disability in diabetic patients with Knee Osteoarthritis

#### Protocol summary

##### Study aim

The aim of this study is to compare the effects of calisthenic exercises and isometric exercises on pain, balance and functional ability in diabetic patients with Knee Osteoarthritis

##### Design

Randomised, parallel group trial with blinded outcome assessment. Randomisation was centralised and computerised with concealed randomisation sequence carried out at an external site. That external site will be Research Randomizer software (<https://www.randomizer.org/>).

##### Settings and conduct

Study will be conducted at Allied Hospital Faisalabad and Outcome assessor, who was a serving physiotherapist in hospital, will be blinded

##### Participants/Inclusion and exclusion criteria

Inclusion Criteria: Both male and female Age between 35 to 60 Inter-articular knee joint pathology Diagnosed osteoarthritis Grade 1 to 4 osteoarthritis Exclusion Criteria: History of lower extremity traumatic injury Any neurological deficits of the lower extremity History of any fracture or surgery on the lower extremity.

##### Intervention groups

Intervention group 1: will receive callisthenic exercises. Callisthenic exercises, also known as bodyweight exercises, are a form of physical activity that uses the own body's weight to provide resistance and build strength, flexibility, and endurance. These exercises can be performed without the need for equipment or weights, making them accessible and convenient for individuals of all fitness levels. Intervention group 2: will receive the hold relax technique. The "hold relax" technique, also known as proprioceptive neuromuscular facilitation (PNF) stretching, is a method used to increase flexibility and improve the range of motion in specific muscle groups. It involves a combination of stretching

and muscle contraction to achieve greater gains in flexibility compared to traditional static stretching.

##### Main outcome variables

Knee joint pain; Knee joint range of motion

#### General information

##### Reason for update

##### Acronym

##### IRCT registration information

IRCT registration number: **IRCT20230306057633N2**

Registration date: **2023-05-15, 1402/02/25**

Registration timing: **retrospective**

Last update: **2023-05-15, 1402/02/25**

Update count: **0**

##### Registration date

2023-05-15, 1402/02/25

##### Registrant information

##### Name

Muhammad Talha Hassan Javed

##### Name of organization / entity

Riphah International University Faisalabad

##### Country

Pakistan

##### Phone

+92 334 8196967

##### Email address

drtalhahassan97@gmail.com

##### Recruitment status

**Recruitment complete**

##### Funding source

##### Expected recruitment start date

2023-03-05, 1401/12/14

##### Expected recruitment end date

2023-05-05, 1402/02/15

**Actual recruitment start date**

empty

**Actual recruitment end date**

empty

**Trial completion date**

empty

**Scientific title**

Comparative effects of calisthenic exercises and isometric exercises on pain, balance and functional disability in diabetic patients with Knee Osteoarthritis

**Public title**

Effects of calisthenic exercises and isometric exercises on diabetic patients with knee osteoarthritis

**Purpose**

Treatment

**Inclusion/Exclusion criteria****Inclusion criteria:**

Subject with inter-articular knee joint pathology Osteoarthritis diagnosed by an orthopedic surgeon Grade 1 and 2 knee osteoarthritis HbA1c should be 6.5 or more

**Exclusion criteria:**

Subject history of lower extremity traumatic injury Any Neurological deficit of lower extremity History of any lower limb surgery

**Age**

From **45 years** old to **65 years** old

**Gender**

Both

**Phase**

N/A

**Groups that have been masked**

- Outcome assessor

**Sample size**

Target sample size: **50**

**Randomization (investigator's opinion)**

Randomized

**Randomization description**

In this study, we employed a method of randomization known as simple randomization. The unit of randomization was the individual participant. To facilitate the randomization process, we utilized computer software specifically designed for this purpose. The software generated a random sequence of treatment assignments based on the predetermined block sizes and strata. The random sequence was built using established algorithms that ensure the generation of pseudorandom numbers. Pseudorandom numbers appear to be random but are generated using deterministic algorithms. To maintain allocation concealment, a crucial aspect of the randomization process, the treatment assignments were concealed from the researchers involved in participant enrollment and assignment. This was achieved by utilizing a centralized system or a secure database that stored the randomization sequence and assigned treatment codes or labels to participants in a manner that was not accessible to the researchers. This ensured that neither the researchers nor the participants knew the treatment assignment until after enrollment, reducing the potential for selection bias.

**Blinding (investigator's opinion)**

Single blinded

**Blinding description**

Developing a blinding protocol: The researchers will develop a detailed blinding protocol that outlines the procedures for blinding assessors, such as ensuring that they do not have access to information that could reveal the treatment allocation. Selecting assessors: The researchers will carefully select the assessors who will be responsible for evaluating the study's outcomes. These assessors will be trained to perform their evaluations without knowledge about the treatment allocation. Concealing treatment allocation: The researchers should conceal the treatment allocation from the assessors to prevent any biases arising from knowledge of the treatment. This can be achieved by using coded or unlabeled treatments, using a separate team to manage treatment allocation, or using blinding procedures such as sham treatments or placebo. Monitoring for unblinding: The researchers will monitor the study carefully to ensure that assessors are not inadvertently unblinded, such as through conversations with other study personnel or participants. Analyzing data: Once the study is complete, the researchers should analyze the data in a blinded manner to prevent any biases arising from knowledge of the treatment allocation.

**Placebo**

Not used

**Assignment**

Parallel

**Other design features****Secondary Ids**

empty

**Ethics committees****1****Ethics committee****Name of ethics committee**

Research and Ethics Committee

**Street address**

Adjacent Fish Farm, Satayana Rd, Faisalabad, Punjab 44000

**City**

Faisalabad

**Postal code**

38000

**Approval date**

2023-02-15, 1401/11/26

**Ethics committee reference number**

REC-FSD-00321

**Health conditions studied****1****Description of health condition studied**

Knee Osteoarthritis

**ICD-10 code**

M17

## ICD-10 code description

Osteoarthritis of knee

## Primary outcomes

### 1

#### Description

Pain at Knee Joint

#### Timepoint

Pain will be measured at baseline, after 2 weeks and after 4 weeks

#### Method of measurement

Pain will be measured by Numeric Pain Rating Scale

## Secondary outcomes

### 1

#### Description

Range of Motion at Knee Joint

#### Timepoint

Range of motion will be measured at baseline, after 2 weeks and after 4 weeks

#### Method of measurement

Range of motion will be measured by Goniometer

## Intervention groups

### 1

#### Description

Intervention group 1: will receive Callisthenic Exercises. Calisthenics is a form of exercise that uses a person's body weight and requires little to no equipment. Here are many health benefits to calisthenics, and most people can start exercising right away. Participants will receive 3 sets of 15 repetitions with 5 seconds rests between the sets. This treatment session will continue for 3 sessions per week for 4 weeks. Hence participants will get total 12 sessions.

#### Category

Treatment - Other

### 2

#### Description

Intervention group 2: will receive Isometric Exercises. Isometric exercises are tightening (contractions) of a specific muscle or group of muscles. During isometric exercises, the muscle doesn't noticeably change length. Participants will receive 3 sets of 15 repetitions with 5 seconds rests between the sets. This treatment session will continue for 3 sessions per week for 4 weeks. Hence participants will get total 12 sessions.

#### Category

Treatment - Other

## Recruitment centers

### 1

#### Recruitment center

##### Name of recruitment center

Allied Hospital Faisalabad

##### Full name of responsible person

Sobia Nawaz

##### Street address

Dr. Tusi Rd, Faisalabad

##### City

Faisalabad

##### Postal code

38000

##### Phone

+92 41 9210082

##### Email

vcfmuf@gmail.com

## Sponsors / Funding sources

### 1

#### Sponsor

##### Name of organization / entity

Riphah International University Faisalabad

##### Full name of responsible person

Sahreen Anwar

##### Street address

Adjacent Fish Farm, Satayana Rd, Faisalabad

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Faisalabad

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##### Phone

+92 41 8777210

##### Email

sahreen.anwar@riphahfsd.edu.pk

#### Grant name

#### Grant code / Reference number

#### Is the source of funding the same sponsor organization/entity?

Yes

#### Title of funding source

Riphah International University Faisalabad

#### Proportion provided by this source

100

#### Public or private sector

Private

#### Domestic or foreign origin

Domestic

#### Category of foreign source of funding

empty

#### Country of origin

#### Type of organization providing the funding

Academic

## Person responsible for general inquiries

#### Contact

##### Name of organization / entity

Riphah International University Faisalabad  
**Full name of responsible person**  
Muhammad Talha Hassan Javed  
**Position**  
Lecturer  
**Latest degree**  
Master  
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Physiotherapy  
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## Person responsible for scientific inquiries

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## Person responsible for updating data

### Contact

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## Sharing plan

### Deidentified Individual Participant Data Set (IPD)

No - There is not a plan to make this available

### Justification/reason for indecision/not sharing IPD

Our decision not to share deidentified IPD in this study is based on several factors. First and foremost, ensuring the privacy and confidentiality of the study participants is of utmost importance to us. We take data protection and ethical considerations seriously, and we believe that releasing individual-level data could potentially compromise the anonymity and confidentiality of the participants. Furthermore, there may be legal and regulatory constraints that prevent us from sharing the deidentified IPD. These constraints could be related to data protection laws, patient consent requirements, or specific agreements with the participants or institutions involved in the study.

### Study Protocol

No - There is not a plan to make this available

### Statistical Analysis Plan

No - There is not a plan to make this available

### Informed Consent Form

No - There is not a plan to make this available

### Clinical Study Report

No - There is not a plan to make this available

### Analytic Code

No - There is not a plan to make this available

### Data Dictionary

Undecided - It is not yet known if there will be a plan to make this available