

Clinical Trial Protocol

Iranian Registry of Clinical Trials

28 Feb 2026

Investigating the Effect of Weight Loss through Bariatric Surgery and Exercise on Knee Pain and Function in Women with Sarcopenic Obesity and Knee Osteoarthritis

Protocol summary

Study aim

The aim of this study is to evaluate the effect of weight loss through bariatric surgery combined with exercise programs on knee pain and function in women with sarcopenic obesity and knee osteoarthritis. The study also seeks to compare the effects of different types of exercise on the clinical improvement of these patients.

Design

This is a randomized, single-blind, parallel-group clinical trial conducted on 40 women with sarcopenic obesity and knee osteoarthritis after bariatric surgery. Participants are block-randomized into two exercise groups receiving whey protein: one with aerobic exercise alone and the other with both aerobic and resistance training.

Settings and conduct

This single-blind trial at Sina Hospital sports and exercise medicine ward studies aerobic vs. resistance exercise with whey protein on knee pain and function in sarcopenic obese women post-bariatric surgery. Participants are randomly assigned and blinded to exercise type.

Participants/Inclusion and exclusion criteria

Inclusion criteria: women with sarcopenic obesity, BMI >40, bariatric surgery candidates with knee osteoarthritis, no recent intra-articular treatment or physiotherapy, and adequate function. Exclusion criteria: arthroplasty history, protein allergy, uncontrolled heart or lung disease, neurological/cognitive disorders, less than 70% exercise adherence post-surgery, or physiotherapy during the study.

Intervention groups

Both groups follow a low-calorie diet with whey protein. The control group does aerobic walking, while the intervention group adds resistance training. Training is supervised then home-based, with intensity monitored. Progress is logged; missing over 30% of sessions leads to

exclusion. Acetaminophen up to 1000 mg/day is allowed for pain.

Main outcome variables

Body composition; pain intensity; improvement in muscle function and sarcopenic indices

General information

Reason for update

Acronym

IRCT registration information

IRCT registration number: **IRCT20250603066046N1**

Registration date: **2025-06-13, 1404/03/23**

Registration timing: **prospective**

Last update: **2025-06-13, 1404/03/23**

Update count: **0**

Registration date

2025-06-13, 1404/03/23

Registrant information

Name

Farideh karimipour Haddadan

Name of organization / entity

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Iran (Islamic Republic of)

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Recruitment status

Recruitment complete

Funding source

Expected recruitment start date

2025-06-22, 1404/04/01

Expected recruitment end date

2025-12-21, 1404/09/30

Actual recruitment start date

empty

Actual recruitment end date

empty

Trial completion date

empty

Scientific title

Investigating the Effect of Weight Loss through Bariatric Surgery and Exercise on Knee Pain and Function in Women with Sarcopenic Obesity and Knee Osteoarthritis

Public title

The Effect of Weight Loss and Exercise on Knee Pain and Function in Women with Sarcopenic Obesity and Knee Osteoarthritis

Purpose

Treatment

Inclusion/Exclusion criteria**Inclusion criteria:**

Individuals with a BMI over 40 who are candidates for bariatric surgery and willing to undergo the procedure. Diagnosis of knee osteoarthritis based on the American College of Rheumatology criteria and radiographic evidence according to Kellgren-Lawrence grades 2 to 4. A skeletal muscle mass to height squared ratio of less than 5.7 kg/m², or skeletal muscle mass less than 15 kg. No intra-articular injection, exercise therapy, or physiotherapy within one month prior to enrollment. Walking speed less than 1 meter per second over a 6-meter distance. Grip strength less than 27 kg in men and less than 16 kg in women. Taking more than 15 seconds to perform five chair stands (sit-to-stand test). Timed Up and Go Test result equal to or greater than 20 seconds. 400-meter walk test time equal to or more than 6 minutes.

Exclusion criteria:

History of knee or hip arthroplasty Allergy to protein-based compounds Uncontrolled hypertension Any uncontrolled cardiac or pulmonary disease Neurological or cognitive disorders Failure to complete at least 70% of the post-surgery exercise therapy program Participation in a physiotherapy program during the study period

Age

No age limit

Gender

Female

Phase

N/A

Groups that have been masked

- Participant

Sample size

Target sample size: **40**

Randomization (investigator's opinion)

Randomized

Randomization description

In this study, block randomization with a fixed block size of 4 was used to allocate participants into two groups: aerobic exercise (A) and resistance training (B), in order to maintain balance between groups over time. All possible combinations of assigning two participants to

group A and two to group B within each 4-person block were considered (e.g., AABB, ABAB, ABBA, BAAB, BABA, BBAA). One of these combinations was randomly selected for each block. For instance, if the combination ABBA was randomly chosen, the first and fourth participants would be assigned to group A, and the second and third to group B. The randomization process was conducted using randomization software and carried out by an independent individual to prevent any potential allocation bias.

Blinding (investigator's opinion)

Single blinded

Blinding description

Participants are informed that they are receiving a type of "standard postoperative exercise program" that includes "various exercises tailored to their physical condition," without specifying whether the program consists of aerobic or resistance training.

Placebo

Not used

Assignment

Parallel

Other design features**Secondary Ids**

empty

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

Sina Hospital – Tehran University of Medical Sciences (Research Ethics Committee)

Street address

Research Deputy Office, Sina Hospital, before Hassan Abad Square, Imam Khomeini Street

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Province

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Postal code

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Approval date

2024-07-06, 1403/04/16

Ethics committee reference number

IR.TUMS.SINAHOSPITAL.REC.1403.051

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

KOOS Questionnaire Score

Timepoint

Before bariatric surgery, and at 1 month, 3 months

Method of measurement

Completion of KOOS form

2

Description

Knee pain

Timepoint

Before bariatric surgery, and at 1 month, 3 months

Method of measurement

Recording pain intensity on a graded paper (Visual Analogue Scale or VAS)

Secondary outcomes

1

Description

Gait Speed

Timepoint

Before bariatric surgery, and at 1 month, 3 months

Method of measurement

Measurement of distance covered per unit of time

2

Description

Score of Timed up and go test

Timepoint

Before bariatric surgery, and at 1 month, 3 months

Method of measurement

The Timed Up and Go (TUG) test measures functional mobility by timing how long it takes a person to rise from a chair, walk 3 meters, turn around, return, and sit down. The test begins when the person starts to stand and ends once they are seated again.

3

Description

Grip Strength Measurement

Timepoint

Before bariatric surgery, and at 1 month, 3 months

Method of measurement

With Isometric Dynamometer

4

Description

Chair Standing Test Score

Timepoint

Before bariatric surgery, and at 1 month, 3 months

Method of measurement

Measurement of the time it takes to stand up and sit down on a chair five times.

Intervention groups

1

Description

Intervention group: All participants, following bariatric surgery, will be placed on a standardized post-surgical dietary plan consisting of a low-calorie intake (800–1000 kcal/day) supplemented with 30 grams of whey protein (Kaleh Company) daily. This nutritional protocol is intended to support muscle preservation and recovery during the post-operative period and throughout the intervention. In addition to dietary management, participants in the intervention group will engage in a structured physical activity program comprising both aerobic and resistance training components: 1. Aerobic Exercise: Participants will perform low- to moderate-intensity walking sessions for 30 minutes per day, five days a week. To increase adherence and reduce fatigue, walking will be broken into three 10-minute sessions distributed throughout the day. The walking intensity will be adjusted to maintain a perceived exertion between 13 and 15 on the Borg Scale, ensuring safe and effective cardiovascular stimulation. 2. Resistance Training: Strength training will be conducted three times per week and will include exercises targeting both upper and lower limbs. Specifically, five exercises for the upper extremities and five for the lower extremities will be performed using TheraBand resistance bands (starting with red bands). The initial training load will consist of one set of 10 repetitions, gradually progressing to three sets of 10 repetitions as tolerated. Intensity will be monitored using the Borg Rate of Perceived Exertion (RPE) scale, and bands will be upgraded to higher resistance levels if the reported exertion falls below the target range of 13–15. The first resistance training session will be conducted under supervision at the clinic, where participants will be instructed on proper techniques and safety protocols. Subsequent sessions will be performed at home, with participants required to record their exercise adherence and progress in a logbook. Participants completing less than 70% of the scheduled exercise sessions will be excluded from the final analysis. 3. Pain Management: Participants will be allowed to consume up to 1000 mg of acetaminophen per day as needed for knee pain. They will be instructed to document the dosage and frequency of usage to monitor the potential influence of analgesics on outcome measures. This combined intervention aims to evaluate the synergistic effects of aerobic activity, resistance training, and protein supplementation on knee pain, physical function, body composition, and sarcopenic indices in women with sarcopenic obesity following bariatric surgery.

Category

Rehabilitation

2

Description

Control group: All participants, following bariatric surgery, will follow a standardized post-operative dietary

plan consisting of a low-calorie intake (800 to 1000 kcal/day) along with 30 grams of whey protein supplementation (Kalleh Co.) per day. This nutritional protocol is designed to preserve muscle mass and support recovery during the post-operative period and throughout the intervention. In addition to dietary management, participants in the control group will engage in a structured exercise program that includes only the aerobic component: 1. Aerobic Exercise: Participants will perform low- to moderate-intensity walking sessions for 30 minutes per day, five days a week. To enhance adherence and reduce fatigue, walking will be divided into three 10-minute sessions throughout the day. Walking intensity will be adjusted to maintain a perceived exertion between 13 and 15 on the Borg Scale, ensuring safe and effective cardiovascular stimulation. 2. Pain Management: Participants will be allowed to take up to 1000 mg of acetaminophen per day as needed for knee pain. They will be instructed to document the amount and frequency of intake so that the potential impact of analgesics on study outcomes can be evaluated.

Category

Rehabilitation

Recruitment centers

1

Recruitment center

Name of recruitment center

Sina Hospital

Full name of responsible person

Farideh Karimipour Haddadan

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Sponsors / Funding sources

1

Sponsor

Name of organization / entity

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Full name of responsible person

Ramin Kordi

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Grant name

Grant code / Reference number

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

No

Title of funding source

Deputy of Research and Technology, Tehran University of Medical Sciences

Proportion provided by this source

100

Public or private sector

Public

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

Tehran University of Medical Sciences

Full name of responsible person

Farideh Karimipour Haddadan

Position

Resident Physician

Latest degree

Medical doctor

Other areas of specialty/work

Sport Medicine

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Person responsible for scientific inquiries

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Person responsible for updating data

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Sharing plan

Deidentified Individual Participant Data Set (IPD)

Yes - There is a plan to make this available

Study Protocol

Yes - There is a plan to make this available

Statistical Analysis Plan

Yes - There is a plan to make this available

Informed Consent Form

No - There is not a plan to make this available

Clinical Study Report

Yes - There is a plan to make this available

Analytic Code

Not applicable

Data Dictionary

Not applicable

Title and more details about the data/document

This research has been registered as a thesis proposal for the Sports Medicine Residency Program. The resulting thesis will include participant data (all data), the study protocol, statistical analysis, and a full report of the study (including all variables), and will be submitted to Tehran University of Medical Sciences and the Department of Sports Medicine. It is noteworthy that, upon approval of the thesis, a comprehensive article covering all the aforementioned aspects will be published in a journal relevant to the subject. Access to raw data not included in the final report or published article requires direct contact with the principal investigator.

When the data will become available and for how long

The present study started on 22 June 2025 (01/04/1404 in the Iranian calendar) and is expected to last for two years until its completion as a thesis. The data obtained from this research will be submitted for publication after the thesis is approved (at the end of the two-year period). Access to raw data not included in the final report or published article will be possible after publication by contacting the study's corresponding researcher.

To whom data/document is available

The data obtained from this study will be available to all interested individuals without any restrictions.

Under which criteria data/document could be used

There are no restrictions on the use, publication, or processing of this study's data, provided that prior communication is made with the principal investigator via email or other means, and the necessary permission is obtained from the principal investigator.

From where data/document is obtainable

To access information about this study, the applicant can contact the principal investigator via email or phone.

What processes are involved for a request to access data/document

Permission to use the information will be granted to the applicant as soon as their email is received or a phone call is made. The requested information will then be promptly sent to the applicant via their email.

Comments