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**BRIDGING BETWEEN PATIENTS PREFERENCE AND EVIDENCE BASED PRACTICE ACCORDING TO GUIDELINES IN OSTEOARTHRITIS MANAGEMENT: A QUALITATIVE STUDY**

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**Background and aims:** Osteoarthritis is the major cause of disability worldwide that causes significant problems in activities of daily living and deeply affects the quality of life. Osteoarthritis is predicted to become one of the major causes of disability in future that necessitates comprehensive global plans for resolving this health issue in accordance with patients' local culture, beliefs and attitudes. This study was a part of PhD dissertation that was conducted to carry out an in-depth examination of the experiences of patients with OA about their use of strategies for the OA self-management and compare them with scientific evidences.

**Methods:** The present qualitative study was conducted using a conventional content analysis approach on 33 participants including patients with OA, their family members and healthcare personnel who were selected by purposive sampling. Data were collected through unstructured and semi-structured interviews and continued until data saturation occurred. Data analysis was carried out simultaneously. Guba and Lincoln's standards of rigor and trustworthiness were respected including the credibility, transferability, dependability and conformability of the data. A narrative systematic review was conducted on osteoarthritis care guidelines and algorithms in order to compare patients' preference with scientific evidences.

**Results:** The analysis of the data revealed four main categories, including: Conservative approach in selecting treatment modalities, trend toward traditional treatment, Preferring complementary and alternative medicine, and concerns and barriers treatment modalities. The review of literature demonstrated little attention by professionals to the patients' values or priorities. Comparing of the modalities that were preferred by patients with scientific guidelines indicated some inconsistencies.

**Conclusion:** Patient's perceptions, preference, and adherence to treatment, play an essential role in relieving nagging symptoms and treatments outcomes. Although guidelines are used to define best practices in osteoarthritis care, patient preference that derived from their local culture, beliefs and attitudes should be considered to operationalization. Participating the patients on the therapeutic goal setting as well as clinical decision-making, and supervising the use of complementary treatments are recommended. Patients should be involved in the development of clinical practice guidelines.