**Proposed Approach**

We will be looking into the primary (disease onset), secondary (poor outcome) and tertiary (poor results from interventions) prevention of knee osteoarthritis. We have developed risk models identifying specific patient subgroups (phenotypes) at risk of poor outcomes at the primary, secondary and tertiary stages, partially in previous EU-funded work (KNEEMO-ITN). Based on current thinking, we would aim to include in an EU-funded project: 1) European data integration, 2) translation of epidemiological research models into clinical data models, allowing real-time identification of at-risk people using routine clinical data 3) developing pan-European public health resources for primary prevention, and clinical care pathways for secondary and tertiary prevention.

Partners we are looking for: data science, computer science (IT infrastructure), health care industry incl. insurance companies, clinical science, implementation science, public health groups, end user groups (health care / patients)

**Organisational Capabilities**

- University
- EU project management and coordination
- Musculoskeletal health research group led by applicants
- Data science infrastructure incl. secure access to big data repositories.
- Human performance lab for biomechanical research

**Experience**

- Experience coordinating and participating in EU-funded networks, projects and fellowships (KNEEMO-ITN, DIALECT-ETN, A-Footprint, D-Footprint).
- Leading researchers in osteoarthritis epidemiology, biomechanics and clinical science.
- Published extensively on subgroup identification and personalisation of treatment for osteoarthritis, including preventative biomechanical interventions – partly from KNEEMO-ITN research.
- Extensive network of European and wider international collaborators, including the world-leading experts in the field.

**Administrative Information**

Intention to coordinate project

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