

OREGON PUBLIC HEALTH DIVISION • DEPARTMENT OF HUMAN SERVICES

ARTHRITIS CAN BE A REAL PAIN IN THE JOINT

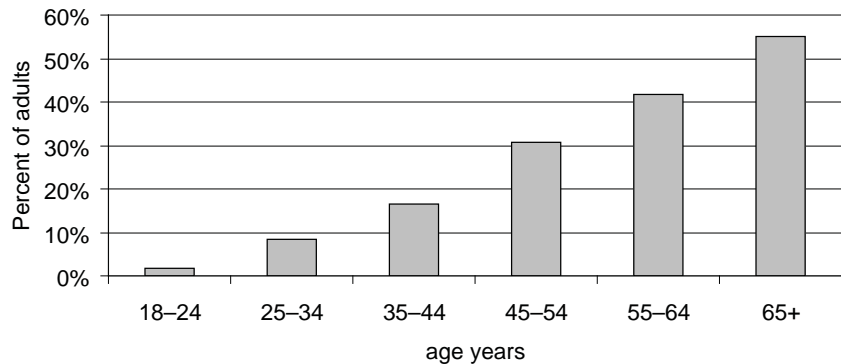
Arthritis is no laughing matter. Lucille Ball, the comedian icon of ages, lived with arthritis from the age of 17 years. Although she produced a lot of laughter during her lengthy career, we are certain she would attest to, “arthritis can be a real pain in the joint” — as can more than 1.8 million adults in Oregon. Arthritis encompasses an array of conditions and disease processes, such as bursitis, rheumatoid arthritis, lupus, gout, fibromyalgia, and osteoarthritis, that affect the joints and other parts of the body. While medical management is always important, this article describes a population-based public health approach to promote physical activity for management of arthritis symptoms. This *CD Summary* reviews the data on arthritis in Oregon and provides a description of physical activity benefits and community resources to which patients can be referred.

ARTHRITIS IN OREGON

In 2007, 26% or 754,839 adult Oregonians reported having clinically diagnosed arthritis, including 31% of women and 21% of men.* Another 38% of adults reported having symptoms consistent with “possible arthritis” (chronic joint symptoms in the absence of diagnosis by a health-care provider). The prevalence (figure) of arthritis increases with age: overall, 55% of Oregonians ≥65 report having arthritis. However, the elderly are not the only ones affected by arthritis. In 2007, 64% of adults in Oregon with clinically diagnosed arthritis were less than 65 years of age.

Arthritis is the leading cause of disability in the United States,¹ associated with substantial activity limitation, work disability, reduced quality of life, and high health-care costs.² With the downturn in the current economy, it is critical for people with arthritis to

Percent of adult Oregonians by age who report having arthritis, 2007*



manage their symptoms in order to productively continue working. One in six full-time employees in Oregon has been clinically diagnosed with arthritis, and three out of five people with arthritis have an arthritis attributable work limitation (AAWL).†

Whether someone is working or not, 41% of adults in Oregon who are clinically diagnosed with arthritis report limiting their usual activities because of the condition. While arthritis can present physical challenges, symptoms such as pain, depression and fatigue can also have a huge impact on a person’s quality of life. People with arthritis report having a poorer health status, are more likely to be physically inactive and obese,

and are at a greater risk of depression and other co-morbidities (table below).

PHYSICAL ACTIVITY: WHAT PATIENTS SHOULD KNOW

Health care providers can help their patients with arthritis by promoting physical activities and letting them know to gently push through the pain when starting an exercise program. Current evidence suggests that once some initial increase in pain subsides, pain is significantly improved in the long term for those persons with arthritis who engage in and adhere to prescribed physical activity.³ Both strength training⁴ and aerobic exercise^{5,6} have been shown to benefit people with osteoarthritis and rheu-

Oregonian Health Risk Factors for Arthritis, 2007*

	Arthritis	Possible Arthritis	No Arthritis
Fair/poor Health Status	25%	21%	9%
Depression (2005 data)	27%	21%	14%
Overweight/obese	72%	68%	59%
Meets CDC physical activity recommendations	50%	52%	58%

* Oregon Behavioral Risk Factor Surveillance System, 2007

† Oregon Depression Call-Back Survey, 2004–2005



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matoid arthritis, significantly decreasing pain while delaying disability and improving gait and function.⁷ Additional benefits of strength training in older adults include increasing muscle strength and bone density and decreasing risk for falls.⁸ For people with arthritis, low-impact activities at a moderate pace like walking, swimming, and riding a bicycle are great ways to stay active.

The new 2008 Physical Activity Guidelines published by the U.S. Department of Health and Human Services can provide the latest information on health benefits and recommendations for Oregonians. (See www.health.gov/paguidelines.) In addition to helping manage arthritis, physical activity can have an even greater impact on health by decreasing pain, improving functioning, delaying disability, promoting mental well being, and reducing the risk of co-morbid diseases.⁹

RESOURCES FOR PROVIDERS

• **"Physical Activity. The Arthritis Pain Reliever,"** a Centers for Disease Control and Prevention campaign, (see www.cdc.gov/arthritis/campaigns/) provides physicians with resources to help their patients with arthritis stay active. The campaign is designed to:

1. Raise awareness of physical activity as a way to manage arthritis pain and increase function,
2. Increase understanding of how to use physical activity (types and duration) to ease arthritis symptoms and prevent disability),

3. Enhance the confidence or belief of persons with arthritis that they can be physically active, and
4. Increase trial of physical activity behaviors.

The campaign encourages people with arthritis to start incorporating physical activity into their daily lives. "So take a walk. Go dancing. Ride a bike. Go for a swim. If 30 minutes is too much, try 10 or 15 minutes at a time. Stick with it, and in four to six weeks you could be hurting less and feeling more energetic." Call Oregon Arthritis Program 971-673-0984 for free brochures and posters while supplies last.

- **The Arthritis Foundation Exercise and/or Aquatic programs** (See www.arthritis.org/programs.php) are both evidence-based programs that have been shown to decrease pain and improve function. These two programs were created for people with arthritis to keep joints flexible, muscles strong and to help reduce the pain and stiffness associated with arthritis. People can find a class in their area by calling 503-245-5695.
- **Living Well with Chronic Conditions (Stanford's Chronic Disease Self-Management Program)** (See www.oregon.gov/DHS/ph/livingwell/) is an evidence-based self-management program that has been shown to improve healthy behaviors (exercise, cognitive symptom management, coping, and communications with physicians) improve health status (self-reported health, fatigue, disability, social/role activities, and health distress), and decrease days in the hospital. This is a six week workshop that teaches practical skills for living a healthy life with

an ongoing chronic condition. To have patients find out where to take a class in their community they can call 1-888-576-7414.

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