10 steps for living well with arthritis

Arthritis AUSTRALIA
## contents

<table>
<thead>
<tr>
<th>Step</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1</td>
<td>Take control by knowing your disease</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Arthritis - what is it? • Osteoarthritis • Rheumatoid arthritis • Gout</td>
<td></td>
</tr>
<tr>
<td>Step 2</td>
<td>Don’t delay, see your doctor</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>What to expect • Different types of tests</td>
<td></td>
</tr>
<tr>
<td>Step 3</td>
<td>Work with your healthcare team and be an important part of it</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>Making the most of your healthcare team - some tips</td>
<td></td>
</tr>
<tr>
<td>Step 4</td>
<td>Know about your treatment options</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>Physical therapies • Medicines – an overview • Complementary therapies</td>
<td></td>
</tr>
<tr>
<td>Step 5</td>
<td>Find new ways to stay active</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>Why exercise? • What is the right exercise for arthritis?</td>
<td></td>
</tr>
<tr>
<td>Step 6</td>
<td>Learn techniques to help manage your pain</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>Some pain management techniques</td>
<td></td>
</tr>
<tr>
<td>Step 7</td>
<td>Acknowledge your feelings and seek support</td>
<td>24</td>
</tr>
<tr>
<td></td>
<td>Dealing with depression and understanding your feelings</td>
<td></td>
</tr>
<tr>
<td>Step 8</td>
<td>Make food choices that count</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>Omega 3 oils • Diet and gout</td>
<td></td>
</tr>
<tr>
<td>Step 9</td>
<td>Balance your life</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>How to pace yourself</td>
<td></td>
</tr>
<tr>
<td>Step 10</td>
<td>Call your local State or Territory Arthritis Office</td>
<td>33</td>
</tr>
<tr>
<td>More about using medicines safely</td>
<td>34</td>
<td></td>
</tr>
<tr>
<td>More about making informed decisions about treatment</td>
<td>35</td>
<td></td>
</tr>
</tbody>
</table>

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Arthritis is a very common condition in Australia affecting people of all ages and from all walks of life. Its symptoms often have a big impact on the daily lives of people.

Although arthritis can be difficult to live with, there are many simple measures that can help anyone with arthritis manage their symptoms and cope with daily life. They rely on input from a number of people but the most important person is you - the person with arthritis.

This book will put you on the path to managing your arthritis by taking an active role in understanding and treating your condition. By doing this, you will experience less pain and stay more active than those who feel there is nothing they can do.

The key steps listed on this page form a simple-to-follow check list for living well with arthritis. Read the rest of the information in this book to find out more about each of the steps - and good luck on your journey to better living!
With arthritis, knowledge is invaluable.

Spend the time to understand what type of arthritis you have and then discover the best ways to improve your condition.

Many people with arthritis say that learning about their arthritis and what they can do about it gives them back a feeling of control over their lives and their health.

The information on the following pages is a good start to understanding your arthritis but to learn more phone your State or Territory Arthritis Office or visit www.arthritisaustralia.com.au

See page 37 for contact details for your local State or Territory Arthritis Office

Arthritis - what is it?
Arthritis is not a single disease. The word ‘arthritis’ is a name for a group of more than 100 conditions that affect the joints. Arthritis can affect many different parts of the joint and nearly every joint in the body. People can be affected in all sorts of different ways but the most common symptoms of arthritis are pain, stiffness and swelling in one or more joints. The three most common types of arthritis are osteoarthritis, rheumatoid arthritis and gout.

Osteoarthritis
Easily the most common form of arthritis is osteoarthritis. It mainly affects people over the age of 40 but it can develop at any age. Osteoarthritis can affect any joint in the body but it usually occurs in large joints that support the weight of your body such as the hips, knees and lower back. It can also occur in the hands, particularly at the base of the thumb and the end joints of the fingers.
In a healthy joint, the ends of the bones are covered by a smooth layer of cartilage. The cartilage cushions the ends of the bones and helps the joint move smoothly.

In osteoarthritis, the cartilage breaks down and becomes thin. This can be the result of:

- an injury to the joint, such as a fracture or torn cartilage - which might have happened years before arthritis appears
- being overweight - this puts extra strain on weight-bearing joints and they may become worn under the pressure

In many people there is no obvious cause.

When the cartilage breaks down, its surface becomes weaker and rough, so that the joint cannot move smoothly. This also leads to inflammation. Inflammation is part of the body’s normal healing process but it also produces pain and swelling.

In severe osteoarthritis, the cartilage may become so thin that it splits and leaves the ends of the bones unprotected. In the most advanced cases, the bones may grind against one another, which can be extremely painful. The joint can become narrowed and difficult to bend. Small spurs of extra bone may also grow at the edges of the joint.

The symptoms of osteoarthritis vary from person to person. The most common signs are:

- joint pain and tenderness
- stiffness of the joints
- symptoms that worsen after overactivity or underactivity. For example, many people find their
6

symptoms worsen after doing lots of activity such as walking or gardening, or after periods of inactivity such as when getting out of bed in the morning or after sitting for long periods.

Other symptoms include:

- swelling of the joints
- muscle weakness, which may feel like the joint is unstable or will give way
- a grinding sensation in the joints
- a feeling that the joint might lock
- loss of mobility.

A cure for osteoarthritis is yet to be uncovered however there are things you can do to manage the pain and limit further damage to the cartilage.

One of the most important things you can do is exercise the joints. This helps because the cartilage relies on the fluid in the joint (‘synovial fluid’) to keep it healthy by providing nutrients and lubrication. Movement stimulates the body to produce synovial fluid and keeps it moving around the entire joint. Exercise also strengthens the muscles that support the joints and gives you greater mobility and flexibility.

See page 18 for more details about exercise.

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**Rheumatoid arthritis**

Rheumatoid arthritis is a disease that causes inflammation of the joints, often in the smaller joints, such as the joints in the hands and feet. However larger joints such as the hips and knees are also often affected. Women are three times as likely as men to develop rheumatoid arthritis. It usually starts to develop between the ages of 25 and 50 years.

Rheumatoid arthritis is classified as an autoimmune disease. The normal role of your body’s immune system is to fight off infections to keep you healthy. In an autoimmune disease, your immune system starts attacking your own healthy tissues. In rheumatoid arthritis, the immune system targets the lining of the joints (the ‘synovial membrane’), which becomes inflamed and thickened. This causes the body to produce larger than normal amounts of fluid in the joints (‘synovial fluid’), which leads to swelling, pain and stiffness.

If the joint continues to be inflamed, the bones, the cartilage that covers the ends of the bones, and the muscles and ligaments of the joint can all become damaged. In advanced rheumatoid arthritis, this inflammation and swelling can cause the joint to become unstable and become deformed, making it difficult to use the joint.
The symptoms of rheumatoid arthritis vary from person to person but often include:

- joint pain and tenderness
- early morning stiffness in the joints
- swelling in the joints
- the same joints on both sides of the body are affected.

In the early stages, these symptoms may come and go with no particular pattern. In some people the symptoms may disappear for weeks or years - or never appear again. In other people, the symptoms can last a lifetime.

Currently there is no cure for rheumatoid arthritis but there is a lot you can do to control it, manage the pain and live a full life with the disease:

- see your doctor immediately - an early diagnosis and treatment can limit joint damage caused by inflammation
- learn pain management techniques - like relaxation and using hot and cold packs
- be physically active, especially warm water exercise, strength training and tai chi - these will strengthen supporting muscles and keep your joints flexible. They will also maintain your feeling of well-being. Before starting an exercise program talk to your doctor
- learn how to protect your joints and pace yourself – use equipment such as specially designed cooking utensils and get plenty of rest. This will help you reduce stress on the joints and prevent you from becoming fatigued
- stop smoking - smokers are twice as likely to get rheumatoid arthritis as non-smokers
- take the medicines recommended by your doctor
- seek support from other people and support groups - for advice, social contact and emotional support.

This book will tell you more about how to do each of these things and where to get more information and advice.

“...there is a lot you can do to control it...”

**Gout**

Gout is a common and painful condition. It tends to mostly affect men between the ages of 40 and 50 years or older people taking diuretics.
(also known as ‘water or fluid pills’ or tablets which help the body get rid of water).

It often affects the joint of the big toe first, although it can go on to affect the knees, ankles and hands.

Gout is caused when tiny crystals of uric acid form in the joints. This causes inflammation, pain and swelling.

Uric acid is a normal waste product produced by the body. The body usually disposes of it by dissolving it in the blood, then filtering it through the kidneys, to be finally removed in urine. Gout can occur if the body produces higher than normal amounts of uric acid, or it is not filtering uric acid from the blood. The excess uric acid crystallises in the joints as well as other organs of the body.

Unlike other types of arthritis, which develop slowly, an attack of gout can occur quickly, even overnight.

If an attack of gout is untreated, it will usually last about a week. Another attack may not occur for months, but if the causes of gout are left untreated, attacks may become more common and the joints can become permanently damaged.

Gout is aggravated by anything that reduces the kidneys’ ability to remove uric acid from the blood. Gout attacks can be prevented by:

- cutting down the amount of alcohol you drink and avoid drinking a lot of alcohol at one time (binge drinking). Talk to your doctor or see www.alcohol.gov.au for Australian government guidelines on recommended alcohol intake
- avoiding rapid fluctuations in weight, ‘crash’ diets or fasting (for example, before an operation). Make sure you have a healthy diet as ‘crash’ or ‘starvation diets’ can actually increase uric acid levels. See a dietitian for advice
- limiting foods that contain high levels of purines, a substance that can be made into uric acid in the body

See page 30 for more information.

- taking medicines to lower uric acid levels in your blood. These medicines need to be taken every day, whether you are having an attack or not.

Medicines and relaxation techniques can also help you manage the pain during an attack of gout.

This book will tell you more about how to do each of these things and where to get more information and advice.
Because arthritis can get worse if left untreated, you need to see your doctor as early as possible to get a proper diagnosis.

This will help you understand your arthritis and develop a plan for managing it. Early diagnosis and treatment can limit the effects of arthritis on your life and help you stay active and independent.

What to expect when you go to the doctor

When you first visit your doctor, you will be asked a number of questions about your symptoms including:

- how long you have experienced pain
- which joints are affected
- when you get pain and what seems to cause it
- what makes the joint feel better or worse
- whether anyone else in your family has had arthritis or joint pain.

Your doctor may also order tests including:

- blood tests
- a test of your joint fluid (‘synovial fluid’)
- x-rays.

At your next appointment, your doctor will tell you what the results were and whether you have arthritis. However it can often be difficult and take several visits to your doctor before the type of arthritis is diagnosed. This is because there is often no single test to diagnose some types of arthritis and the symptoms can be similar to other forms of arthritis.

What are the different types of tests

Blood tests
There are several blood tests your doctor may order. The main ones used to check for common types of arthritis are:

- uric acid levels - a higher than normal level of uric acid means you may have gout
- antibody tests - antibodies are substances the body normally produces to fight infections from things like bacteria and viruses. In some forms of arthritis that affect the connective tissue - the tissue...
that binds other tissues and organs together - such as lupus, the body produces a type of antibody called ‘antinuclear antibody’. Another type of antibody found in more than seven out of ten people with rheumatoid arthritis is ‘rheumatoid factor’

- inflammation tests - there are two main tests used to check if you have an inflammation: ESR (erythrocyte sedimentation rate) and CRP (C-reactive protein). Together with the other blood tests, your ESR and CRP levels will help your doctor decide whether you have a form of inflammatory arthritis such as rheumatoid arthritis.

Sometimes your doctor may order other, more specialised blood tests.

At the same time as you have blood tests for arthritis, your doctor may also order blood tests to check your general health. These will show whether you have any other health conditions that may affect your arthritis or the medicines you can take.

Tests of the joint fluid (synovial fluid)

To help diagnose some types of arthritis, your doctor may take a sample of fluid from the affected joint.

Your doctor will do this by putting a needle directly into the joint, then drawing out a small amount of the fluid. It can hurt slightly but local anaesthetic may be used before the procedure. Your doctor will then have the sample checked under a microscope to see if crystals, such as uric acid from gout, are present.

“Early diagnosis and treatment can limit the effects of arthritis on your life…”

X-rays

X-rays provide pictures of bones and can show changes in the shape of the joint, such as narrowing or deformities. X-rays are not always helpful in the early stages of arthritis as changes in the joint structure may not visible for months or even years after arthritis begins. The amount of pain you are experiencing may not equal the amount of damage shown on the x-ray. For example, your joint may be very painful despite x-rays being normal. Pain can be associated with soft tissues such as muscles or tendons that are not visible on an x-ray. However x-rays are often useful to see if arthritis is well controlled or worsening over time.
The best way to live well with arthritis is by working closely with your healthcare team.

It may include a variety of healthcare specialists, such as doctors, pharmacists, physiotherapists, occupational therapists, podiatrists, nurses, psychologists and complementary medicine practitioners.

Your doctor may also refer you to a rheumatologist (a specialist in conditions that affect the joints and the structures around them) who can provide you with the most up-to-date information and advice on all aspects of arthritis management and treatment. Your rheumatologist may develop a comprehensive arthritis management program with you and will assess your ongoing response to treatment.

Remember, you are the most important member of your healthcare team. Make sure you establish and maintain good communication with all the other members.

Making the most of your healthcare team

To get the most out of a visit to your doctor or other health professional it is important to be prepared. Here are some tips:

- Think about, and write down, the questions you want to ask before your visit
- Always take x-rays and test results related to your condition to the consultation
- Consider taking a family member or friend with you as a second set of ears
- Ask your doctor or health professional to explain any information that you did not understand
- Feel free to ask questions, especially about the benefits, side effects and costs of treatments
- Tell your doctor or health professional if you need time to think or to discuss something with family members
- Write down any important information or instructions that you are given to help you remember
• Ask your doctor or health professional where you can learn more about your condition or treatment

• Tell your doctor about any other medicines, herbal remedies, creams or any other products you are using - including any you have bought from a supermarket, pharmacy or health food store. Any of these may interact with your arthritis medicines causing serious health problems or make other medicines (eg. prescription medicines) less effective.

If you are unsure about treating your arthritis or planning for the future, discuss this with one of your healthcare team or seek a second opinion. They can also advise you about support services for people with arthritis and where to find more information.

“Remember, you are the most important member of your healthcare team.”
There are many treatments to relieve pain and stiffness and slow the development of your arthritis.

Work with your healthcare team to find a combination of treatments that best suits:

- your type of arthritis
- the joints affected
- the amount of pain or other symptoms you experience
- your lifestyle.

A treatment program may include a combination of:

- physical therapies including physiotherapy, occupational therapy and podiatry
- medicines including prescription, non-prescription and complementary medicines
- exercise
- healthy eating
- pain management techniques such as relaxation and meditation
- emotional and social support
- finding a balance between activity and rest.

This book will give you advice on all of these, as well as where you can get further information and advice.

**Physical therapies**

Physical therapies are often an important part of a successful arthritis treatment program.

Physiotherapists, occupational therapists, podiatrists and other therapists offer a range of treatments that will help your joints function better.

When choosing any kind of therapist, look for an accredited practitioner or one who is a member of their professional association.

**Physiotherapy**

Physiotherapists can advise you on exercise, posture and non-medicine-based pain relief. They may also use
techniques to keep your joints and muscles flexible.

Treatments that physiotherapists may use include:

• joint mobilisation
• hydrotherapy - exercise in water
• electrotherapy - the use of mild electrical impulses to treat pain and swelling
• muscle strengthening exercises and stretches.

To find a physiotherapist, see the Australian Physiotherapy Association website www.physiotherapy.asn.au or look under ‘Physiotherapist’ in the Yellow Pages.

“Physical therapies are often an important part of a successful arthritis treatment program.”

Occupational therapy
Occupational therapists can advise you on how to take stress and strain off joints affected by arthritis.

They look at all aspects of your daily life, including your job, the work you do around your home, as well as your leisure activities. They can then show you ways to conserve your energy by simplifying daily tasks, and how to protect your joints when you are performing those tasks.

Occupational therapists can also advise you on:

• any special equipment you might need to help you get about, such as walking sticks or wheelchairs
• splints and braces you might need, particularly for your hands
• aids and equipment that can make daily activities such as showering and cooking easier on your joints.

To find an occupational therapist see the Occupational Therapy Australia website www.ausot.com.au or look under ‘Occupational therapist’ in the Yellow Pages.

Podiatry
Podiatrists treat problems in the feet. They can help you with footwear, nail care and orthoses (shoe inserts) if you have arthritis in your feet, legs or lower spine.

To find a podiatrist, see the Australasian Podiatry Council website www.apodc.com.au or look under ‘Podiatrist’ in the Yellow Pages.
Medicines
Medicines can help:

- relieve arthritis symptoms, such as pain
- reduce inflammation and swelling
- slow down damage to joints in some types of arthritis.

The medicines your doctor prescribes will depend on your type of arthritis and the severity of your symptoms. The most common examples include:

- painkillers
- creams and ointments
- non-steroidal anti-inflammatory drugs
- corticosteroids and injections into the joint
- anti-rheumatic medicines.

Some of these medicines require a prescription from a doctor, but many are available over-the-counter from pharmacies.

Always talk to your doctor and pharmacist before you start taking any medicines.

Find out what side effects may occur and watch out for them. Make sure you know what to do if you develop any side effects and how quickly you need to act.

See page 34 for detailed information on how to take arthritis medicines safely.

Painkillers (analgesics)
Paracetamol is a simple painkiller used to treat mild to moderate arthritis pain. It is usually the first medicine your doctor will recommend if you need pain relief.

For severe, uncontrolled pain your doctor may prescribe strong painkillers such as a combination of paracetamol and codeine, tramadol and a range of morphine-like medicines (opiates).

Painkillers have no effect on the joint or your arthritis. They simply stop you feeling the pain.

Creams, gels and ointments
These can be rubbed into the skin over a painful joint to relieve pain. Some creams and ointments relieve pain by simply warming or cooling the skin when rubbed in. Other creams, which appear to be more effective for pain, contain ingredients such as anti-inflammatory medicine or capsaicin (a substance found in cayenne and chilli peppers) to help relieve pain.

Non-steroidal anti-inflammatory drugs
These are medicines that treat inflammation, pain and swelling. They are usually the next step if simple painkillers, creams and ointments have failed to control your arthritis symptoms.

Non-steroidal anti-inflammatory drugs are commonly referred to as ‘NSAIDs’ (pronounced ‘ensayeds’).
NSAIDs stop the body producing substances that cause inflammation and pain. There are many different types of NSAIDs available, such as naproxen and ibuprofen. There is also a certain group of NSAIDs called COX-2 inhibitors that are slightly less likely to cause stomach problems.

There has been a lot of controversy recently about anti-inflammatory drugs. Some studies have suggested that there may be a small increase in risk of heart attack or stroke in people who take these drugs at high doses. People with high blood pressure, kidney or heart problems need careful assessment by their doctor to make sure they are on the right drug at the most suitable dose for the appropriate length of time. Most people will have no problem but you should talk to your doctor or pharmacist before taking these medicines.

**Corticosteroids**

If you have severe pain and inflammation in your joints, then your doctor may prescribe a stronger anti-inflammatory medicine called a corticosteroid. These can be taken as tablets or given by injection directly into a joint, muscle or other soft tissue.

Corticosteroids can have serious side effects if taken in high doses or for a long time (more than a few weeks). Your doctor will closely monitor you for side effects while you are taking corticosteroids.

**Anti-rheumatic medicines**

These disease-modifying medicines are used for inflammatory forms of arthritis, such as rheumatoid arthritis. Discuss these highly specialised medicines with your rheumatologist.

**Complementary therapies**

‘Complementary therapies’ are any treatments or therapies that are not part of the conventional treatment (such as medicines or surgery) of a disease. Complementary therapies are taken alongside conventional treatments and may also be known as ‘traditional’ or ‘alternative’ therapies. Examples of complementary therapies include acupuncture, massage, aromatherapy, naturopathy and herbal medicines.

Just like using conventional treatments, you should take reasonable care when using complementary medicines and therapies, including getting your doctor’s advice. Not all complementary therapies are regulated and may not be standardised in terms of purity, dosage, effectiveness or safety. This does not mean you should not try complementary therapies but do make sure you are fully informed about the treatment and seek advice from a
qualified practitioner so that you are not misled or given false hope.

Like food and other medicines, some people may have sensitivities to these products - nutritional supplements may interact with prescribed medications causing undesirable effects; magnetic therapy may cause interference with pacemakers; and some herbs and supplements should not be taken during pregnancy or if you are intending to get pregnant.

For information about registered complementary therapy practitioners, contact the Australian Traditional Medicine Society on 1800 456 855, visit www.atms.com.au or contact the relevant registration body.

Joint replacement
If medicines have not worked for you, and you are unable to go about your day-to-day life because of pain and loss of mobility, you may require joint replacement surgery. These are commonly performed operations and most people find that joint replacement surgery improves their quality of life.

Your doctor will refer you to an orthopaedic surgeon who can advise you on whether surgery is required.

To make a fully informed choice about surgery, find out about the possible risks of surgery, waiting lists, costs and recovery time.

Glucosamine and chondroitin
Glucosamine and chondroitin are substances naturally produced by the body and appear to be involved in the formation and repair of cartilage.

It is believed these supplements may be useful for people with osteoarthritis, where there has been a breakdown of cartilage. It is thought that taking glucosamine and/or chondroitin supplements may relieve the pain and prevent or slow the breakdown of cartilage in OA.

The results from studies of glucosamine and chondroitin are unclear. There have been some promising results, particularly from glucosamine sulfate, however newer studies show little benefit. Most studies have only looked at OA of the knee, with very few studies of other joints, and there is no evidence these supplements are useful for any other forms of arthritis. While their usefulness remains unclear, it appears glucosamine and chondroitin are relatively safe treatment options for people with OA to trial.

Make sure you take the recommended daily dosage (1500mg/day glucosamine sulfate, 800-1000mg/day chondroitin sulfate). It may take four to six weeks before you notice any effects.

As with all supplements, you should ask your doctor or pharmacist for advice and information about possible side effects before taking glucosamine and chondroitin and check whether you can take it with your other medicines.
Research has found that regular exercise is one of the most effective treatments for arthritis.

Physical activity helps broadly in two ways. Firstly, exercise will help your arthritis by:

- decreasing the pain in your joints and muscles
- maintaining and increasing the flexibility of your joints and muscles
- strengthening muscles - this will help take the load off your joints, and make the joints more stable
- decreasing or relieving muscle tension - tension adds to the pain of arthritis and in the long term can lead to poor posture and joint deformity
- improving your posture and balance - this will take weight off affected joints, and reduce your risk of falling.

Secondly, regular exercise will improve your overall health. This means you will be able to do more in life, feel more in control of your arthritis and be better able to manage pain. In particular, exercise will:

- help control weight and reduce body fat - this will also reduce the load on weight-bearing joints such as feet, knees and hips
- decrease stress
- strengthen bones
- improve your sleep
- decrease fatigue and tiredness
- create a feeling of general well-being.
Types of exercise that are beneficial for arthritis

Not all forms of exercise are appropriate for every kind of arthritis. Before you start to exercise, it is important to ask your doctor and healthcare team to help you develop a program that will suit your type of arthritis, general health and lifestyle. Generally, you will need to do a mix of three types of activities:

- mobility exercises
- strengthening exercises
- fitness exercises.

Mobility
These are exercises designed to maintain or improve the range of movement of the joints and muscles. Mobility exercises are especially important for stiff joints and muscles, although all your joints will benefit from being put through their range of movement each day. Examples include moving each joint as far as it will comfortably go, muscle stretches and yoga.

Strengthening
These exercises are designed to increase the power of the muscles. Strong muscles help to support and take pressure off sore joints. Strengthening exercises also help strengthen bones and improve balance. Examples include exercises using weights, dumbbells and resistance bands.

Fitness
These are the exercises that will benefit the heart, lungs and your general well-being. These are usually activities that use the larger muscles in the body, rather than exercising a specific area, and may make you ‘puff’ a little. Examples include brisk walking, swimming and cycling.

Examples of exercises that are good for arthritis

There are many activities that can be beneficial for people with arthritis. The best activities are those you find enjoyable and are convenient. Low-impact exercises, with less body weight or force going through your joints, are usually most comfortable. Examples of low-impact activities include:

- walking - a simple way to increase fitness
- exercising in water, such as hydrotherapy (with a physiotherapist), swimming or water exercise classes
• strength training
• tai chi, yoga and pilates - good for flexibility and strength, as well as relaxation and stress management
• cycling
• dancing - excellent for flexibility and fitness and also helps build stability in the joints
• chair-based exercises.

Hydrotherapy or “water exercise” is a popular exercise for people with arthritis. The buoyancy of the water takes pressure off painful joints and you may find you can move more freely than you can on land. Warm water can also be soothing for sore muscles and stiff joints.

**Getting started**

Talk to your doctor and/or health professional before starting an exercise program. A physiotherapist can suggest safe exercises and make sure you are doing your exercises correctly to prevent an injury.

As a general guide, all Australian adults should be aiming to do at least 30 minutes of activity on most days of the week. You can do 30 minutes continuously or combine several 10 to 15 minute sessions. If you have arthritis and you have not exercised for a while, you may need to start with shorter sessions (for example, 5 to 10 minutes). When you first start, do less than you think you will be able to manage. If you cope well, do a little bit more next time and keep building up gradually.

Always start your exercise with some gentle movements to warm up your body and your joints. This can help prevent pain and injury during exercise.

Cool down at the end of your session with some gentle movements and stretches. This can help prevent muscle pain and stiffness the next day.

If the thought of ‘exercise’ seems too hard, try increasing your daily physical activity. For example:

• get off the bus one or two stops earlier than you normally would and walk the rest of the way
• walk up stairs instead of waiting for the lift, or walk up one flight of stairs then take the lift
• park the car a little bit further from
the shops instead of looking for the closest parking space.

**Sticking to an exercise program**

If you have not been active for a while or you have pain and often feel tired and unwell, it can be difficult to make exercise a regular part of your life. Here are some tips for sticking with an exercise program:

- do activities you enjoy
- do something that is convenient and affordable
- exercise with a friend or in a group
- start gradually and build up
- set short-term goals for what you want to achieve. Write them down and put them on the fridge
- keep an exercise diary, so you can see how you are progressing
- vary your exercise routine so you don’t get bored.

**When to exercise**

Try to do some form of exercise every day, even on bad days. If possible, try to exercise when:

- you have least pain
- you are least stiff
- you are least tired, and
- your medicines are having the most effect (ask your doctor or pharmacist about how to time your medicines with exercise if possible. This may help to make your exercise session more comfortable).

**When to stop exercising or be careful**

- Don’t vigorously exercise a joint that is red, hot, swollen or painful
- Stop exercising if it is causing you unusual pain or increases your pain beyond what is normal for you. Exercising through this type of pain may lead to injury or worsening of your arthritis symptoms. (Note, many people with arthritis have some amount of pain all the time. This is not a reason to avoid exercise. You should only stop if you notice extra or unusual pain while you are exercising)
- Use the two hour pain rule to measure how well your body is coping with an activity - if you have extra or unusual pain for more than two hours after exercising, you’ve done too much. Next time you exercise, slow down or do less
- Talk to your doctor or physiotherapist about any problems or questions you have about your
You may have to accept that sometimes medicines, physical therapies and other treatments cannot relieve all of your pain.

Pain may limit some of the things you do, but it doesn’t have to control your life. There are many techniques you can use to cope with pain so you can go on living your life the way you want to. Your mind plays an important role in how you feel pain. Thinking of pain as a signal to take positive action rather than being scared or worried about it can be helpful. Also you can learn ways to manage your pain. What works for one person may not work for another, so you may have to try different techniques until you find what works best for you.

Here are some things you can do to manage your arthritis pain:

- **make sure you are making the most of your medicines and physical therapies.** Visit your doctor regularly to make sure you are getting the best treatment for your arthritis symptoms
- **take care of your body.** Exercise to improve your fitness and strength, eat a healthy diet, and get a good night’s sleep every night
- **use heat and cold treatments for extra pain relief.** A warm bath or shower, or a heat pack placed over a painful joint for 15 minutes, can provide effective pain relief. An ice pack may reduce swelling and relieve pain in the same way. Ask your doctor or physical therapist which type of treatment (hot or cold) is best for you
- **find some distraction techniques that work for you.** These may include exercising, reading, listening to music, or seeing a movie. Anything that focuses your attention on something enjoyable, instead of your pain, will help you
• learn some relaxation techniques. When you are stressed, your muscles become tense, making pain feel more severe. Relaxation techniques such as meditation or deep breathing help decrease muscle tension

• ask your physiotherapist about transcutaneous electrical nerve stimulation (TENS). A TENS machine applies very mild electric pulses via small electrodes (pads) to block pain messages going from the painful area to your brain. TENS can be very useful for longer-term pain but does not work for all people. You should see a physiotherapist to trial a TENS machine, and to learn how to use it correctly

• some people with arthritis find massage and acupuncture useful to help control pain and improve relaxation but this has not yet been proven by research. It is wise to seek a registered practitioner who understands your condition.

You can find qualified massage therapists by contacting Australian Association of Massage Therapists at www.aamt.com.au or 1300 138 872 or the Institute of Registered Myotherapists of Australia at www.myotherapy.org.au or (03) 9418 3913. The Australian Acupuncture and Chinese Medicine Association can help you find an accredited acupuncturist at www.acupuncture.org.au or 1300 725 334.

“Relaxation techniques such as meditation or deep breathing help decrease muscle tension.”
It is natural to feel frustrated, angry, scared and even depressed at the prospect of having arthritis.

Many people with arthritis fear what the future might hold and are frightened by the impact arthritis might have on their everyday life.

It is not unusual either for a young person to feel especially angry or depressed at being diagnosed with a disease that is mistakenly thought to affect only ‘old’ people.

How to cope
People with arthritis often feel irritated about their limitations. This is a natural reaction. Unfortunately, it is likely there will be some activities you may no longer be able to do - like running a marathon. Part of learning to live well with arthritis is to accept that certain things are no longer possible.

To help you cope with the changes that arthritis brings you need to:

• find new activities and challenges that you can do with arthritis and that will give you satisfaction

• think about this process of adjustment as “just another part of growing” - it is about learning new skills and adjusting to experiences

• talk to people who have gone through what you are experiencing. Their experiences may not be identical but they can tell you about things that helped them

• talk to your friends, your doctor, a counsellor or a psychologist if you have strong feelings of loss or unhappiness. You are not alone and do not have to make these adjustments all by yourself. There are always people who can listen to you and help. Most people find talking through their experiences helpful.
**Stress**

Stress is the body’s response to pressure. When you are in a demanding situation, your brain releases chemicals that stimulate the rest of your body; your heart beats faster, your breathing changes, blood pressure rises and muscles become tense. People with arthritis need to learn how to manage stress, otherwise it can lead to muscle tension, pain and depression.

Managing stress involves two steps:

1. recognising when you are becoming stressed - learn to listen to your body
2. finding activities that will relieve stress.

There are many ways you can reduce stress. Talk to your doctor and other members of your healthcare team to find solutions that work for you.

Some things that you can do for yourself that will help manage stress include:

- being physically and mentally active - but don’t overdo it to the point of fatigue
- learning relaxation techniques - like meditation, yoga and tai chi
- learning deep breathing techniques - slowing and deepening your breathing will counteract the body’s stress response of fast, shallow breathing. Slow, deep breathing can also slow your heart rate
- talking to friends and your healthcare team about things you find stressful - researchers have found that some people also benefit from writing about stressful experiences
- learning what situations you find stressful and either avoiding them, changing them or learning how to use your relaxation techniques when they occur
- getting support from friends, family or other people with arthritis.

**Dealing with depression**

Depression is not just a low mood or feeling sad, but a serious condition that needs treatment. People with depression generally feel sad, down or miserable most of the time. They find it hard to be interested in normal day-to-day activities. Depression has serious effects on physical as well as mental health.
Depression is common and affects up to one million people in Australia each year. Signs to watch for are:

- feeling uncontrollably sad
- withdrawing from friends and family
- losing interest and pleasure in most of your usual activities
- thinking that no-one understands what you are going through
- feeling unable to cope, even with everyday things
- losing or gaining weight
- disturbed sleeping patterns
- tiredness and lack of energy
- poor concentration and not thinking clearly.

Like any other illness, the sooner you seek help the quicker your depression can be treated. Do not be afraid or embarrassed to speak with your doctor or healthcare team. They will be able to reassure you that your feelings are not unusual and that depression can be treated safely and effectively.

Treatment for depression will depend on how long you have been depressed and the severity of your depression and may include:

- medicines
- counselling
- consultation with a psychiatrist.

If you are depressed, one thing that will also help you greatly is finding someone you feel comfortable talking to, and expressing your feelings. This could be a member of your family, a friend, your doctor, a psychologist or a support group. You are not alone. Ask for help and support when you need it.

Contact your local State or Territory Arthritis Office to find out more about support services for people with arthritis or speak to your doctor.
Food and arthritis

There are many myths about food and arthritis. Unfortunately, most of it is wishful thinking. No diet has been proven by research to cure arthritis and there is very little scientific evidence that specific foods have an effect on arthritis. For example, it is unproven that ‘acidic’ foods such as tomatoes can cause arthritis or make it worse.

Except for gout, most foods will not have a direct effect on your arthritis, or on the pain and stiffness you experience. Be very cautious of special diets or supplements that claim to ‘cure’ arthritis or control its symptoms.

A healthy, balanced diet is important for maintaining your general health and well-being.

If you are overweight, a healthy diet will also help you reduce your weight, which will lessen the pressure on weight-bearing joints such as knees, ankles, hips and spine. This will help reduce the amount of pain you experience.

Some people with certain forms of arthritis can lose their appetite. If this happens to you, try eating more meals in smaller portions throughout the day. This will help provide the sustenance you need.

For more information about general healthy eating guidelines see the Australian Government's Food for health booklet at www.nhmrc.gov.au/publications.

For more advice on how to have a balanced diet or healthy weight loss, talk to a dietitian.

Foods that affect and reduce inflammation

Omega 3 oils

Although most foods have no effect on arthritis, studies show that eating foods rich in omega-3 fats can help reduce inflammation in some forms of arthritis. While these effects are modest compared to medicines, omega-3 fats do not have serious side effects. They also have other health benefits, such as reduced risk of heart disease and heart attack. Omega-3
omeg-3 fats are helpful for people with inflammatory arthritis, such as rheumatoid arthritis, ankylosing spondylitis and psoriatic arthritis, as well as lupus (systemic lupus erythematosus). Fish oils have not been thoroughly tested in other forms of arthritis, such as osteoarthritis, so it is unclear whether they are useful for these conditions.

"...foods rich in omega-3 fats can help reduce inflammation in some forms of arthritis."
Foods rich in omega-3 fats:
- fish: oily fish, such as sardines and salmon, have greater amounts of omega-3 fats. Try to eat fish at least two to three times a week
- fish oil supplements: see the box below for more information
- ground linseeds and linseed oil (also called flaxseed)
- walnuts
- canola oil (also called rapeseed oil).

Fish oil supplements
Fish oil supplements are available as capsules or as a liquid. Different brands of capsules differ in the amount of omega-3 fats they contain so it is worthwhile to compare brands. Research suggests the dose needed to reduce inflammation is 2.7 grams of omega-3 (EPA plus DHA) daily. This dose usually requires either:
- nine to 14 standard 1000mg fish oil capsules or five to seven capsules of a fish oil concentrate per day, or
- 15mL of bottled fish oil or five to seven mL of concentrated bottled fish oil per day.

(Note, fish oil can benefit your heart and general health at lower doses. However these doses, generally, will not control symptoms of arthritis).
You may need to take fish oil supplements regularly at the recommended arthritis dose for two to three months before you notice improvements in your arthritis symptoms. If there is no change by then, the supplements are probably not effective for your arthritis.

It is important not to confuse fish oils with fish liver oils (such as cod liver oil and halibut liver oil). Fish liver oils also contain vitamin A. Large amounts of vitamin A can cause serious side effects, particularly during pregnancy. To increase your intake of omega-3 fats, you should do so by taking pure fish oils, not fish liver oils.

As with all supplements, you should ask your doctor or pharmacist for advice before taking fish oil and check whether you can take it with your medicines.

**Diet and gout**

Some foods appear to trigger attacks of gout. These foods tend to contain high levels of purines, a substance that can be made into uric acid in the body. Purine-rich foods include:

- meat – particularly red meat and offal, such as liver, kidneys and heart
- seafood – particularly shellfish, scallops, mussels, herring, mackerel, sardines and anchovies
- foods containing yeast – such as Vegemite and beer.

Another food source that can increase uric acid levels in the blood and lead to gout attacks is a type of sugar called fructose. It is found in high levels in soft drinks sweetened with corn syrup (not used in soft drinks manufactured in Australia) and fruit juices.

There is very little scientific proof that avoiding all the purine-rich foods listed above can successfully reduce gout attacks. You may miss out on important nutrients and vitamins by completely cutting these foods from your diet. If you notice certain foods trigger your gout attacks, you may benefit from cutting down the amounts of those foods in your diet. However not all purine-rich foods are thought to cause gout. For example, a number of vegetables (asparagus, mushrooms, cauliflower and spinach) are also rich in purines but appear less likely to cause gout than diets containing meat and shellfish. Vitamin C and low fat dairy foods, such as skim milk, can reduce your risk of gout attacks. You should get individualised advice from your doctor or a dietitian before starting a special diet for gout.
When you have arthritis, you need to find the right balance between work, activity and rest.

Many people find arthritis a tiring disease particularly if they are in pain. If you find this to be the case, listen to your body and be guided by it. Rest when you are tired and don’t force yourself to work or exercise through pain.

Learn how to pace yourself
Carefully plan and organise your activities so you make the most of your energy. Here are some simple tips to help you pace your activities:

• Try to plan your day so that you can alternate periods of activity with periods of rest

• When you know you have a large task to do, such as preparing a meal or cleaning a room, plan ahead and break the job into smaller tasks. Then work on completing the tasks one at a time, and follow each with a rest break

• Try to prioritise jobs. Do the hardest jobs when you are feeling your best

• Take advantage of ‘good days’ to do the things you may have been putting off. Remember not to overdo it on these days as it could result in pain and fatigue the following days

• Simplify tasks. For example, buy pre-cut vegetables and meat to make cooking simpler. Find out about appliances that can make tasks easier (see below)

• If you are having a bad day, be ready to change your plans and not force yourself to work through pain

• Ask for help when you need it

• Visit an occupational therapist to discover ways you can save time and energy.

“...alternate periods of activity with periods of rest.”

Learn about equipment that can make daily tasks easier
There are many appliances that can make your daily activities simpler and less tiring. These aids and equipment aim to protect your joints by reducing the effort you have to put in. Examples include:

• adapted cutlery and cooking utensils to allow easy gripping
• tools to help with opening jars or bottles, and turning on taps

• equipment to make dressing and showering easier (such as long-handled sponges for reaching your feet, long-handled shoe horns).

You can find out more information about these types of equipment at an Independent Living Centre. The centres do not sell items but are a one-stop reference for discovering what is available and where you can buy it. You can get advice, including where to purchase equipment, in person or over the phone. Occupational therapists are also available at the centres to provide advice about equipment. Independent Living Centres are located in each capital city. See www.ilcaustralia.org.au or call 1300 885 886 to find your closest centre and more information.

(Note, the Independent Living Centre is called LifeTec in QLD).
You can have arthritis and still get the most out of life. You don’t have to stop doing the things you love doing.

Contact your local State or Territory Arthritis Office to take part in an arthritis self-management course. This will show you how you can make small changes that can lessen the impact of arthritis on your life. This problem-solving course will introduce you to a wide range of skills including:

- how to manage symptoms such as fatigue and depression
- how to communicate effectively with your doctor and healthcare team
- how to lessen your frustration and stress
- how to fight fatigue
- how to get more out of life.

Each State and Territory Arthritis Office runs arthritis self-management courses in both city and rural areas.

Self-management courses usually run over six weeks for two hours each week. The course is conducted by people who are trained according to the national, accredited guidelines of Arthritis Australia. Phone your local State or Territory Arthritis Office now to find out more about a course near you.

See page 37 for how to contact your local State or Territory Arthritis Office.

Arthritis Australia Offices all around the country also hold regular information sessions and seminars. Everyone is welcome to attend. These are a great way to learn more, hear about latest treatments and meet other people with arthritis.

Congratulations!

Just by learning more about living well with arthritis means you are already on your way to successfully managing your arthritis and lessening its impact on your life. Now it is time to put what you have learned into practice.

Re-visit the arthritis check list on page 3 from time to time to ensure that you continue to maintain control over your arthritis.
All medicines have risks and benefits.

Always talk to your doctor or pharmacist about the medicines you are taking and what you are using them for, so they can help you choose the most effective medicine for your condition, health and lifestyle.

**Before you take any kind of medicine**

Tell your doctor if you have allergies to:

- any medicines - particularly aspirin, painkillers or anti-inflammatory medicines
- any other substances - such as foods, preservatives or dyes.

If you are pregnant, intend to become pregnant or breastfeeding, talk to your as some medicines used to treat pain and inflammation are not recommended during these times. Inform your doctor of any other medical conditions you have because they may affect the medicines you can take and the best dose for you.

**Taking other medicines**

It is important to tell your doctor about all of the other medicines you are taking. This includes any that you buy without a prescription from a pharmacy, supermarket or health food shop. Some medicines may interfere with arthritis treatments which means you may need to take different amounts of your medicine, or you may need to take different medicines altogether.

**Read the Consumer Medicine Information leaflet**

Consumer Medicine Information (CMI for short) leaflets are available for all prescription medicines and some medicines that you buy over-the-counter at a pharmacy. Ask your pharmacist or doctor for a Consumer Medicine Information leaflet for your medicine. CMI leaflets provide easy to understand information on:

- what the medicine is for
- how to use the medicine
- possible side effects and what to do if they occur.

**Call the Medicines Line**

Medicines Line is a telephone service provided by the National Prescribing Service and healthdirect Australia, for independent information about prescription, over-the-counter and natural medicines from a registered nurse. Your question may be answered on the spot, or you may be referred to your GP or pharmacist, or put through to a NPS pharmacist.

Phone: 1300 633 424
Monday to Friday, 9am to 5pm EST.
www.nps.org.au
Read the Australian Rheumatology Association’s patient medicine information
The Australian Rheumatology Association has developed a series of information sheets in collaboration with Arthritis Australia, covering most of the medicines commonly used to treat arthritis. Copies can be obtained by ringing the Arthritis Information Line 1800 011 041 or visiting www.rheumatology.org.au

Before you start using any new treatment or therapy
Not all information you read or hear is trustworthy so always talk to your doctor or healthcare team about treatments you are thinking about trying. Here are a few steps to protect yourself:

- Get an accurate diagnosis from your doctor. It is important to know exactly what type of arthritis you have before you start any treatment
- Talk to your doctor about any treatments or lifestyle changes you are interested in trying. Find out if the treatment is likely to interact with your current treatments. Do not stop any current treatments without first discussing it with your doctor
- Get information about the treatment. Keep in mind that the information given to you by the person promoting the product or therapy may not be reliable, or they may have a financial incentive to recommend a specific treatment. Talk to your doctor, pharmacist, healthcare team or local Arthritis Office
- Make sure the treatment or therapy is something you can afford, particularly if you need to keep using it
- Check qualifications of practitioners involved. Most therapies have a professional association that you can contact for more information or can help you find an accredited practitioner.
Warning signs

Be on the look out for the following warning signs when considering any new treatment:

• A cure is offered. There is currently no cure for most forms of arthritis so be wary of products or treatments that promise a cure

• The cure, treatment or therapy is described as secret. Legitimate practitioners share their knowledge so that their peers can review their findings

• Proof for the treatment relies only on testimonials (personal stories). This may be a sign that the treatment has not been scientifically tested

• You are told to give up your current effective treatments or discouraged from getting treatment from your doctor

• The treatment is expensive and not covered by any health fund.

Make informed choices and be wary of products and/or therapies that:

• claim to work for all types of arthritis and/or other disorders

• claim to be free from all side effects

• don’t list the ingredients.

If you are still unsure about a treatment for arthritis, ring your State or Territory Arthritis Office or ask your doctor or pharmacist for advice.
Arthritis Australia is a not-for-profit organisation that provides support and information for all Australians affected by arthritis.

Contact your local State or Territory Arthritis Office on the Arthritis Infoline below for information, education and support for people with arthritis.

**Arthritis Infoline**

1800 011 041  
WEBSITE  
www.arthritisaustralia.com.au

**Arthritis ACT**  
Level 2B Grant Cameron Community Centre 27 Mulley Street  
Holder ACT 2611  
PO Box 4017 Weston Creek ACT 2611

**Arthritis New South Wales**  
Unit 1.15/32 Delhi Road  
North Ryde NSW 2113  
Locked Bag 2216  
North Ryde NSW 1670

**Arthritis Northern Territory**  
Shop 18, Rapid Creek Business Village  
48 Trower Road, Millner NT 0810  
PO Box 452 Nightcliff NT 0814

**Arthritis Queensland**  
1 Cartwright Street  
Windsor Qld 4030  
PO Box 2121 Windsor Qld 4030

**Arthritis South Australia**  
118 Richmond Road  
Marleston SA 5033

**Arthritis Tasmania**  
19A Main Road  
Moonah Tas 7009  
GPO Box 1843 Hobart Tas 7001

**Arthritis Victoria**  
263-265 Kooyong Road  
Elsternwick Vic 3185  
PO Box 130 Caulfield South Vic 3162

**Arthritis Western Australia**  
17 Lemnos Street  
Shenton Park WA 6008  
PO Box 34 Wembley WA 6913