

# Taking control of your Psoriatic Arthritis

A practical guide to treatments,  
services and lifestyle choices



# How can this booklet help you

This booklet is designed for people who have psoriatic arthritis.

It will help you understand your condition so that you can better manage your symptoms and continue to lead an active and healthy life.

This booklet offers information and practical advice to help you:

- understand what psoriatic arthritis is and what it means for you
- work with your healthcare team to manage the disease and reduce symptoms
- choose foods and activities that are appropriate to your situation
- understand how your medicines can help in the short and long term

- find support to cope with the emotional and lifestyle impacts of arthritis.

The information inside is based on the latest research and recommendations, and has been reviewed by Australian experts to make sure it is current and relevant to your needs. So go ahead — take control of your psoriatic arthritis!

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Proudly sponsored by an unrestricted educational grant from:



**Abbott Australasia**

Sir Joseph Banks Corporate Park, 32–34 Lord St Botany NSW 2019  
ABN 95 000 180 389

Original booklet produced by: **Indegene Australia Pty Ltd**

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# Understanding psoriatic arthritis

## What is psoriatic arthritis?

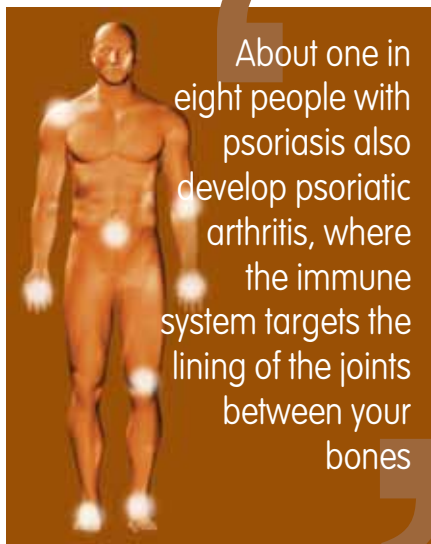
Psoriatic arthritis is a disease where your immune system mistakenly targets your own body.

Psoriasis is a condition which results in red, scaly patches on the skin, especially the knees, elbows and scalp. About one in eight people with psoriasis also develop psoriatic arthritis, where the immune system targets the lining of the joints between your bones. Sometimes the arthritis appears before or at the same time as the psoriasis, but for most people the joint problems occur after the skin condition.

While psoriatic arthritis tends to affect different people in different ways, early symptoms may include swelling, heat, tenderness, pain or stiffness in your joints. It affects men and women equally and can occur at any age.


## What causes psoriatic arthritis?

At present, the causes of psoriatic arthritis are not fully understood. While there is no clear pattern of inheriting psoriatic arthritis, genes do seem to be an important contributor



About one in eight people with psoriasis also develop psoriatic arthritis, where the immune system targets the lining of the joints between your bones

in up to two out of every five people who develop the disease. Psoriasis and psoriatic arthritis can also be triggered by other factors, including smoking and a range of infections and viruses.



Whatever starts the process, the main problem in psoriatic arthritis is that your body's immune system begins to target your joints. Usually the immune system protects you against infections, but in psoriatic arthritis it mistakenly treats the tissue of your joints as 'foreign'. The resulting inflammation can lead to the painful symptoms of arthritis and permanent damage to your bones and joints if untreated. However, damage to your joints can be reduced with early treatment.

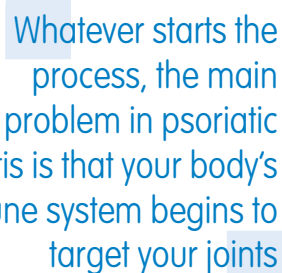
### **How will psoriatic arthritis affect me?**

Psoriatic arthritis affects different people in different ways. Sometimes the same joints on both sides of the body are affected, while for some people the problems are spread out across different joints. Occasionally, a finger or toe can swell like a small sausage — this is called dactylitis. The spine (backbone) may also become inflamed, resulting in pain and stiffness — this is called spondylitis.

Psoriatic arthritis may also lead to pain in places where muscles and tendons attach to your bones (enthesitis), especially at the back of

the heel and in the sole of the foot. As well as the skin rash, you could possibly develop red, sore eyes, or swollen fingers or your fingernails may become thick and change colour.

Whatever your symptoms, many people find that the disease comes (flares) and goes (remission) over many years, and some people never need treatment. For a small number of people, the symptoms and disability may slowly worsen over time.



Whatever starts the process, the main problem in psoriatic arthritis is that your body's immune system begins to target your joints

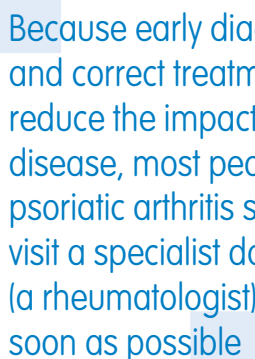
The disease cannot be ‘cured’ at present, but for most people it can be controlled with ongoing care. Remission — the control of symptoms and a return to normal function — is the goal of treatment and can be achieved for many people with psoriatic arthritis.

### How will my doctor diagnose psoriatic arthritis?

There is no single test for psoriatic arthritis. Because early diagnosis and correct treatment can reduce the impact of the disease, most people with psoriatic arthritis should visit a specialist doctor (a rheumatologist) as soon as possible. Specialists look at the results from many tests to help them decide whether a person has psoriatic arthritis. Your rheumatologist will:

- talk to you about your symptoms, including where and when you feel joint pain
- carefully check your skin and nails for signs of psoriasis, and ask about any family history of skin problems

- examine your hands, feet, spine and other joints for swelling, heat or tenderness
- take a blood sample to check whether your body’s immune system is activated and to ensure that you don’t have other conditions such as rheumatoid arthritis
- send you to a radiologist for an x-ray of the affected joints.



Because early diagnosis and correct treatment can reduce the impact of the disease, most people with psoriatic arthritis should visit a specialist doctor (a rheumatologist) as soon as possible

## What about pregnancy?

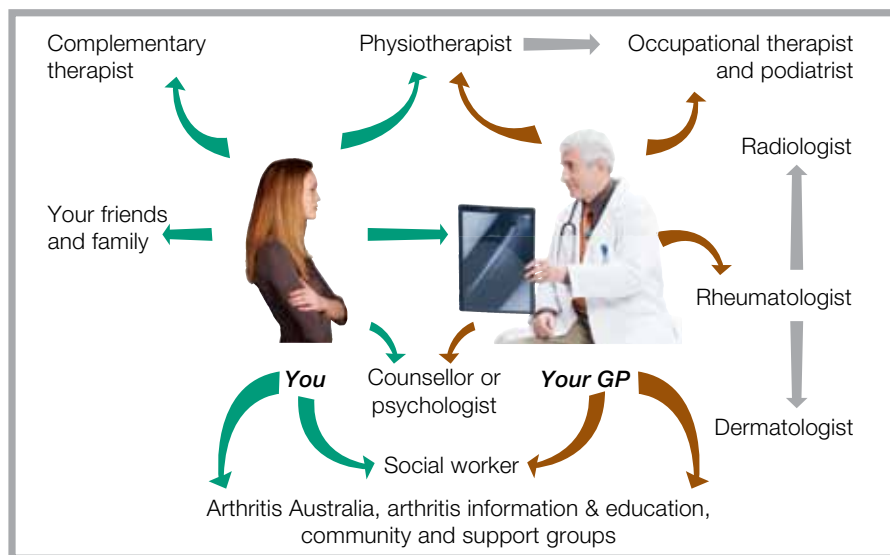
It is possible for women with psoriatic arthritis to have children. Some arthritis medicines can still be used during pregnancy if necessary, but many can harm the foetus and should not be taken while trying to conceive, when pregnant, or during breastfeeding.

Whether you are male or female, discuss your pregnancy plans with your doctor so that your medications can be reviewed. Talk to your doctor for more advice on psoriatic arthritis and pregnancy.

It is possible for  
women with  
psoriatic arthritis to  
have children



# Who can help?



Psoriatic arthritis can be effectively managed. The best approach is a team approach, which involves you and your healthcare professionals together with support from family, friends and community organisations.

## How can you help?

Remember, you are the most important member of your healthcare team. By understanding your condition and how to stay on top of it, you can carry on living a normal life. Psoriatic arthritis doesn't have to get in the way of working,

driving, sex, pregnancy or parenting (see Arthritis Australia's range of information sheets, including *Sex and arthritis*).

Understand how your treatments will help and how to get the most out of them. Your healthcare team can address your concerns and provide practical advice. Contact your State/Territory Arthritis Office on 1800 011 041. They can provide information and introduce you to support groups, exercise programs and other arthritis management services.



# Working with your GP

## How can my GP help?

Your GP is an important partner in managing your psoriatic arthritis. They can also help you to access other specialists, health professionals and services. Your GP will probably make the initial diagnosis and then refer you to one or more specialists, including a rheumatologist and a dermatologist.

Once your psoriatic arthritis is fully assessed, your GP or specialist may prepare a care plan to manage the services and treatments you require. They will also see you regularly to check on your treatment and its progress.

Your GP may also employ a practice nurse, who may coordinate your care and access to services.

## How do I find a GP?

If you don't have a regular GP, speak to your local practice or medical centre.

## When should I see my GP?

- You should visit your GP at least every 3–4 months once your treatment is underway

- Visit your GP immediately if you notice a sudden worsening in symptoms, particularly eye problems (pain, redness and blurry vision), knee pain, or severe back or neck pain.

Your GP is an important partner in managing your psoriatic arthritis



# Seeing a specialist

## How can the specialist help?

**Rheumatologists** are doctors who specialise in diseases of the joints such as psoriatic arthritis. All people with psoriatic arthritis should visit a rheumatologist, and in some cases they will organise your ongoing care.

The rheumatologist will probably start you on medicine to slow down the disease and reduce pain, and may suggest treatment such as physiotherapy if you are having problems moving your joints or spine. Because every person's psoriatic

arthritis is different, your specialist will probably select different treatments over time to find the best one for you.

Many people with psoriasis are also referred to a skin specialist (dermatologist). Your dermatologist may offer a range of treatments including tablets, skin creams or ultraviolet (UV) light therapy for your skin problems.

If you suffer any eye problems, you may be referred to an eye specialist (ophthalmologist).

All people with psoriatic arthritis should visit a rheumatologist, and in some cases they will organise your ongoing care



## How do I find a specialist?

- Your GP can refer you to a rheumatologist and a dermatologist — they will then stay in touch to coordinate your care
- You can also contact the Australian Rheumatology Association on (02) 9256 5458 or visit [www.rheumatology.org.au](http://www.rheumatology.org.au) to find a rheumatologist (but you will still need a referral from your GP)
- To find a dermatologist, you can contact the Australasian College of Dermatologists on 1300 361 821 or visit [www.dermcoll.asn.au](http://www.dermcoll.asn.au)
- To find an ophthalmologist, ask your GP or optometrist for a referral, or contact The Royal Australian and New Zealand College of Ophthalmologists on (02) 9690 1001 or visit [www.ranzco.edu](http://www.ranzco.edu)
- One or both specialists may start your treatment and check on your progress over time
- Because psoriatic disease tends to come and go, you may only need to visit your rheumatologist or dermatologist when the symptoms flare up.

Your GP can refer you to a rheumatologist and a dermatologist — they will then stay in touch to coordinate your care

## When should I see my specialist?

- At first you will probably see your specialists to confirm your diagnosis

# Other health professionals

## How can other health professionals help?

Some people with psoriatic arthritis may need to visit a **physiotherapist** (physio). These practitioners can use various treatments, including exercise therapy and hydrotherapy (water exercise), to keep your joints as flexible and pain-free as possible. They will also show you exercises and pain relief techniques to practise at home.

You might also visit an **occupational therapist** (OT), or they may come to your home or work. OTs can provide advice on how to do things in a way that reduces joint strain and pain. They may also suggest changes to your house, such as new taps, or aids, such as splints, that can make life easier and protect your joints.

A **podiatrist** can help take care of your feet. They may find ways to reduce the pain in your toes, knees or hips, perhaps by providing shoe inserts or advice on footwear.

See the section on **Seeking support** if you would like information on health professionals who can help you to cope with the emotions you may be feeling, such as psychologists and counsellors.

Physiotherapists will use various treatments, including exercise therapy and hydrotherapy to keep your joints as flexible and pain-free as possible



## How do I find a health professional?

- Your GP or specialist can provide a referral, or you can contact a private therapist directly
- For physiotherapists, visit the Australian Physiotherapy Association website ([apa.advsol.com.au](http://apa.advsol.com.au)) or look under 'Physiotherapist' in the Yellow Pages
- For occupational therapists, visit the Occupational Therapy Australia website ([www.ausot.com.au](http://www.ausot.com.au)) or look under 'Occupational Therapist' in the Yellow Pages
- For podiatrists, visit the Australasian Podiatry Council website ([www.apodc.com.au](http://www.apodc.com.au)) or look under 'Podiatrist' in the Yellow Pages.

## When should I see a health professional?

- You may be referred to one or more therapists by your GP or specialist if your joint problems begin to interfere with your ability to move about or work normally



- Ask your GP or rheumatologist about seeing a health professional if you notice your physical condition or abilities change.

You may be referred to one or more therapists by your GP or specialist if your joint problems begin to interfere with your ability to move about or work normally

# Healthy moves for your joints

While healthcare professionals can offer a range of treatments for your psoriatic arthritis, there are many things you can do too. The Australian Government's Healthy Active website provides straightforward suggestions for good eating and activity levels — visit [www.healthyactive.gov.au](http://www.healthyactive.gov.au)


Quitting smoking is an important first step to help your joints — call the Quitline on 13 18 48 or visit [www.quitnow.info.au](http://www.quitnow.info.au) Talk to your doctor or other care team members before making lifestyle changes.

## Eating well

### **What foods are good or bad for psoriatic arthritis?**

There is very little evidence that particular foods are good or bad for people with psoriatic arthritis, and there is certainly no diet proven to 'cure' it. Eating a balanced diet that is low in saturated fat, sugar and salt, but high in fruit, vegetables and cereals is good for most people. This can help you lose weight (if required), which may reduce the strain on your joints and help reduce the possibility of psoriasis in skin folds.

Both vitamin A and vitamin D can help the skin problems of psoriasis, but only at very high doses which are likely to cause side effects. Rather than taking potentially harmful doses of these vitamins, speak to your doctor or specialist about medicines which can take their place.



Quitting smoking is an important first step to help your joints

The Australian Government publishes a useful guide to healthy eating called Food for Health — you can find it at [www.nhmrc.gov.au/publications/synopses/\\_files/n31.pdf](http://www.nhmrc.gov.au/publications/synopses/_files/n31.pdf)

For help in working out the best things to eat, you can ask your GP to refer you to a dietitian or contact one directly via the Dietitians Association of Australia — call (02) 6163 5200 or visit [www.daa.asn.au](http://www.daa.asn.au)

## Fish oils

Current research suggests eating foods rich in Omega-3 fats can help reduce inflammation in some forms of arthritis. While these effects are modest compared with medicines, omega-3 fats do not have serious side effects. Foods rich in omega-3 fats include oily fish like sardines and salmon, plus canola oil and walnuts. If you cannot eat these foods regularly, daily fish oil supplements that provide around 2.7 g of omega-3 (EPA plus DHA) may be a useful substitute.



## Keeping active

### What exercise should I be doing?

Regular physical activity benefits everyone, whether or not you have psoriatic arthritis. It helps to reduce your pain, strengthen your muscles, maintain joint function and improve your sleep and overall health.

Regular physical activity benefits everyone, whether or not you have psoriatic arthritis

Inflammation in your muscles, tendons and other tissues may make it harder for you to stand up straight, turn and bend, or take a deep breath. Your physio can suggest suitable exercises to stretch and strengthen your muscles. These exercises will improve your posture and help to maintain flexibility. You should aim to do this stretching program every day, or at least five times per week. If you experience early morning stiffness, gentle stretching exercises under a warm shower will help.

In addition to your stretching exercises, it is important to do at least 30 minutes of moderate exercise on most days of the week for your general fitness. You can do this either in one go or break your exercise into smaller efforts (for instance, three 10-minute or two 15-minute blocks per day).

Activities that are likely to be good for your fitness include walking, swimming, water exercise, low-impact aerobics and riding a bike or exercise bike. Your physio can also suggest specific exercises and stretches that are appropriate for your situation.

Ask your physio to create a special exercise program you can do at home or at the local gym or swimming pool.

Ask your State/Territory Arthritis Office about appropriate exercise programs in your local area, including community groups, sports centres or gyms who run programs specifically for people with arthritis.

### What if it hurts to exercise?

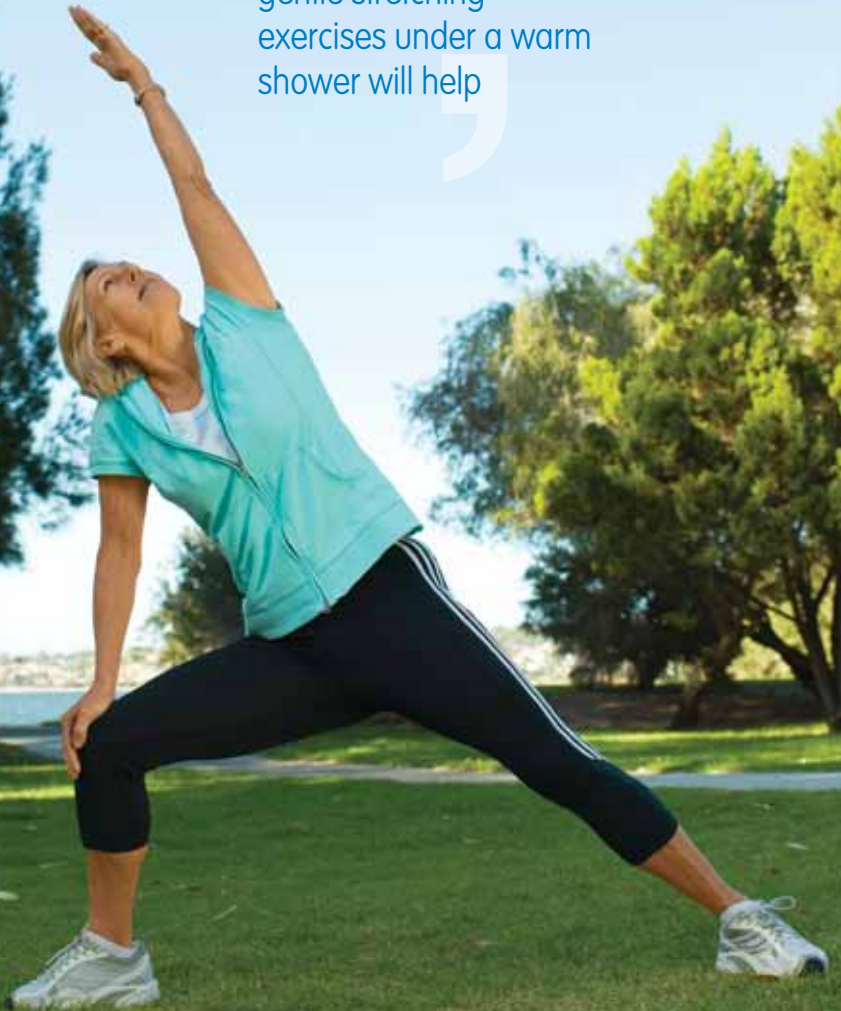
The level and type of exercise you will be able to do varies from person to person – while some people can aim to keep or improve their fitness through exercise, others may be aiming to remain mobile.

Some people will experience pain in their soft tissue and muscles when first exercising. If pain feels unusual or severe, or lasts for more than 2 hours after you have stopped an activity, it is probably best to avoid or change that activity. Applying a heat or cold pack to a sore joint may ease swelling and/or pain.

Try to plan your exercise for times when you are experiencing the least pain — generally when you are least tired and your medicine is having maximum effect.



“If you experience early morning stiffness, gentle stretching exercises under a warm shower will help”



# Making the most of medicines

At present, there is no 'cure' for psoriatic arthritis. However, early use of the right medicines can slow down any damage caused by the disease, relieve pain and stiffness, and reduce the possibility of long-term disability. The aim of treatment is to achieve remission — the absence of any symptoms and a return to normal function of your joints.

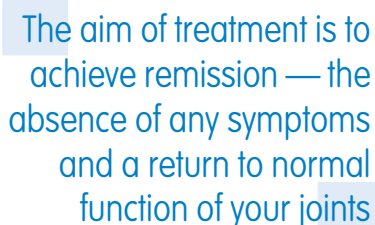
## What is the right medicine for me?

All medicines have risks and benefits, so before you start treatment talk to your doctor or specialist about how each medicine should be helping you and what risks it might have. Make sure your doctor knows about any other health problems that you or your family members have, as this can help them choose the best medicine for you.

You should also make sure that you understand what side effects the medicine might have, including what to do or who to speak to if you experience any unwanted effects from your medication.

Each person responds differently to arthritis medicines, which means

that you will need to work with your specialist and GP to find the best medications and doses for you. This can take time, but by finding the most effective medicines with the least side effects you can hope to really make a difference in controlling your psoriatic arthritis.



The aim of treatment is to achieve remission — the absence of any symptoms and a return to normal function of your joints

Your disease may also change over time, including which joints are affected, how much pain or disability you experience, and whether you have symptom-free periods. This means that you may need to change or add medicines over the course of your treatment — you may also be able to stop treatment when there are no symptoms (talk to your doctor before stopping any treatment).

Some medications can only be used once other medicines are no longer effective in controlling your psoriatic arthritis.

### How will the medicines help?

A group of drugs called NSAIDs (anti-inflammatory drugs) are generally the first medicines that are used to treat psoriatic arthritis. They can help relieve pain and reduce swelling and stiffness.

Corticosteroid drugs are very effective at controlling many symptoms, but they are usually used for short-to-medium term periods in conjunction with other medications.

If other treatments do not control your psoriatic arthritis, the

disease-modifying drugs called DMARDs can relieve symptoms and can also reduce the risk of long-term damage to your joints. Some DMARDs are also known to improve psoriasis as well as arthritis.



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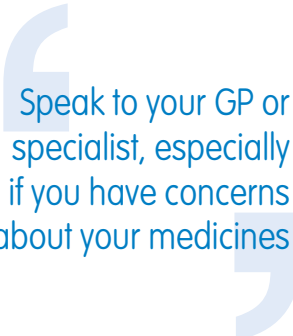
A new group of medicines called biological DMARDs are very effective in reducing symptoms and joint damage, but are often used only if other DMARDs have not worked.

Regular blood tests (every 1–3 months) may be necessary to test the effectiveness of the drugs you are taking and to check for any unwanted side effects.

### What side effects do these medicines have?

To understand more about your medicines and any risks or side effects that they may have, read the Consumer Medicine Information (CMI) leaflet that is available from your doctor or pharmacist. CMI leaflets provide easy to understand information including what the medicine is for and how it is used; things to consider before using the medicine; and possible side effects and what to do if they occur. Speak to your GP or specialist, especially if you have concerns about the long-term effect of medicines, or whether they should be taken during pregnancy or breastfeeding.

The Australian Rheumatology Association and Arthritis Australia publish medicine information sheets. Call the Arthritis Information line on 1800 011 041 for copies or visit [www.rheumatology.org.au](http://www.rheumatology.org.au) or [www.arthritisaustralia.com.au](http://www.arthritisaustralia.com.au)



Speak to your GP or specialist, especially if you have concerns about your medicines

## What other treatments can help?

There are many promises made for non-medical 'cures' or treatments to ease psoriasis or psoriatic arthritis — some of these may work but many have not been proven to help. Acupuncture has been found to relieve long-term back pain, but not specifically back pain related to psoriatic arthritis.

Because herbal, homeopathic, Ayurvedic or Chinese medicines may affect the treatments prescribed by your doctor, please tell your GP and specialist what other treatments you are thinking about using.

Acupuncture has been found to relieve long-term back pain, but not specifically back pain related to psoriatic arthritis



# Seeking support

## Why me?

It's perfectly normal to wonder why you have developed psoriatic arthritis, and to feel angry, sad, frightened or confused about it. By taking control of your arthritis and working with your healthcare team, you can approach the disease with a positive attitude. However, sometimes the condition can get you down, especially during a disease flare or if pain, stiffness and disability are affecting your everyday life.

It may also feel as though people around you – even close friends or family – don't understand what you're going through.

Stress is often a trigger for a flare of psoriasis, so seeking help with unwanted thoughts and feelings can also help reduce the physical impact of the disease.

## Who can help?


There are many people who can help you deal with the emotional side of psoriasis and psoriatic arthritis. Your first step is to try to talk honestly with your partner, parents or children about how you feel. Give them a chance to talk too — they might



have worries or feel that they don't know enough about your disease and how it is affecting you.

Visit your GP if you are worried that unwanted feelings are too strong or have been there for a long time.





Your GP may be able to suggest ways of coping, or may prescribe medicines if you are especially worried or depressed.

They may also refer you to a counsellor or psychologist, who can talk to you about your worries, feelings and moods, then suggest practical ways to work through them.

If you want to contact a psychologist directly, call the Australian Psychological Society on 1800 333 497 or visit [www.psychology.org.au](http://www.psychology.org.au)


### **What other assistance is available?**

There are many resources available to help people with psoriatic arthritis. Your doctor may put you in touch with a social worker, who can help explain the financial and health services that are available to you. These can include any pensions or allowances that you might be entitled to, plus any financial assistance such as Health Care Concession Cards or low-cost treatment programs.

Your local council, community health centre, community group or religious organisation may also offer programs that include practical

advice, activities, social networks or just someone to talk to.

There are Independent Living Centres in each state that provide advice on products and services, including aids and devices, that can help with day-to-day activities. Visit [www.ilcaustralia.org.au](http://www.ilcaustralia.org.au) or call 1300 885 886 to find your closest centre or more information.



Contact your State/Territory Arthritis Office to find out about their wide range of resources available

Contact your State/Territory Arthritis Office to find out about their wide range of resources, management programs and support groups: call 1800 011 041 or visit [www.arthritisaustralia.com.au](http://www.arthritisaustralia.com.au)

You may also find valuable support services from the Psoriasis Association — call (07) 5599 1166 or email [info@psoriasis.org.au](mailto:info@psoriasis.org.au) or Psoriasis Australia — [home.vicnet.net.au/~psorias](http://home.vicnet.net.au/~psorias) or call (03) 9813 8080.

### What about information from websites?

The web can be a useful source of information and support. However, not everyone who puts information on the web is a qualified health practitioner. Some organisations make unrealistic promises in order to sell their products.

Treatment options and practices from overseas may also not be relevant or approved in Australia. Always check information from the web with a trusted member of your healthcare team.

The Australian Government's HealthInsite ([www.healthinsite.gov.au](http://www.healthinsite.gov.au)) is an excellent starting point for web searches, as every site that HealthInsite links to has been checked for quality and accuracy of information.





# Glossary of terms

|                        |                       |                                                                                                                                                                                                           |
|------------------------|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Arthritis              | are-thry-tiss         | Inflammation of one of more joints. Psoriatic arthritis means that the joint inflammation occurs in people who also have psoriasis.                                                                       |
| Corticosteroid         | core-tick-o-ster-oyd  | A type of medicine that is very effective in reducing inflammation.                                                                                                                                       |
| Dermatologist          | der-ma-tol-o-jist     | A doctor who is a specialist in treating skin problems. Your dermatologist may supervise the treatment of your psoriasis.                                                                                 |
| Dietitian              | die-et-ish-un         | A health professional who can recommend what foods you should and should not eat.                                                                                                                         |
| DMARD                  | dee-mard              | A range of medicines that are known as disease-modifying anti-rheumatic drugs. These help reduce joint damage and relieve symptoms, and some may also treat psoriasis.                                    |
| Enthesitis             | en-thee-sy-tiss       | Inflammation of the places where your muscles and tendons join your bones.                                                                                                                                |
| Inflammation           | in-fla-may-shun       | The body's response to damage or infection, which mistakenly attacks your joints and skin in psoriatic arthritis. Inflammation of joints can cause pain, swelling, warmth, redness and difficulty moving. |
| NSAID                  | en-sayd               | A group of medicines known as non-steroidal anti-inflammatory drugs. These can reduce inflammation, swelling and joint stiffness.                                                                         |
| Occupational therapist | OT                    | A health professional who looks at your activities at home or work, then suggests changes or devices to make everyday life easier on your joints.                                                         |
| Physiotherapist        | fizz-ee-o-ther-a-pist | A health professional who uses treatments to keep your joints mobile, and can suggest exercises and devices for you to use at home.                                                                       |
| Podiatrist             | po-die-a-trist        | A health professional who can suggest changes to the way you walk or provide special shoe inserts, to take the strain off your joints and reduce pain.                                                    |
| Psoriasis              | sore-eye-a-siss       | A disease where your immune system mistakenly attacks your own skin, leading to red, scaly patches.                                                                                                       |
| Rheumatologist         | roo-ma-tol-o-jist     | A doctor who is a specialist in treating problems of the joints. Your rheumatologist will probably start and review most of your medicines and treatments.                                                |
| Spondylitis            | spon-dee-ly-tiss      | Inflammation of the joints in the spine, which may lead to back pain and difficulty moving.                                                                                                               |

# Useful resources

## Australian resources

For access to quality online information about psoriatic arthritis, start at HealthInsite

[www.healthinsite.gov.au](http://www.healthinsite.gov.au)

For advice on healthy eating and appropriate exercise, visit Healthy Active

[www.healthyactive.gov.au](http://www.healthyactive.gov.au)

For advice on quitting smoking, contact the Quitline

[www.quitnow.info.au](http://www.quitnow.info.au)

Ph: 13 18 48

To find a rheumatologist, contact the Australian Rheumatology Association

[www.rheumatology.org.au](http://www.rheumatology.org.au)

Ph: (02) 9256 5458

To find a dermatologist, contact the Australasian College of Dermatologists

[www.dermcoll.asn.au](http://www.dermcoll.asn.au)

Ph: 1300 361 821

To find a physiotherapist, contact the Australian Physiotherapy Association

[apa.advsol.com.au](http://apa.advsol.com.au)

Ph: 1300 306 622

To find an occupational therapist, contact Occupational Therapy Australia

[www.ausot.com.au](http://www.ausot.com.au)

Ph: (03) 9415 2900

To find a podiatrist, contact the Australasian Podiatry Council

[www.apodc.com.au](http://www.apodc.com.au)

To find a dietitian, contact the Dietitians Association of Australia

[www.daa.asn.au](http://www.daa.asn.au)

Ph: (02) 6163 5200

To find a psychologist, contact the Australian Psychological Society

[www.psychology.org.au](http://www.psychology.org.au)

Ph: 1800 333 497

## Psoriasis resources

The Psoriasis Association does not currently have a website but offers help across Australia

Email: [info@psoriasis.org.au](mailto:info@psoriasis.org.au)

Ph: (07) 5599 1166

Psoriasis Australia is based in Melbourne and can assist with information and links to other support groups

[home.vicnet.net.au/~psorias/](http://home.vicnet.net.au/~psorias/)

Ph: (03) 9813 8080

## International resources

Arthritis Research UK also provides a wide variety of information for people with arthritis

[www.arthritisresearchuk.org](http://www.arthritisresearchuk.org)

Please keep in mind that some issues and treatments from overseas may not be relevant in Australia.

**My contact details**

My name:  
Telephone:

**My GP**

Name:  
Telephone:

**My specialist**

Name:  
Telephone:

**My support team**

Name:  
Telephone:  
  
Name:  
Telephone:

**My medicines**

| Name | Dosage | Instructions |
|------|--------|--------------|
|      |        |              |
|      |        |              |
|      |        |              |
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## Arthritis Australia

Arthritis Australia is a not-for-profit organisation that provides support and information for all Australians affected by arthritis.

Contact your State/Territory Arthritis Office to find out about the range of awareness and education programs, support services and resources available.

**Arthritis Infoline: 1800 011 041**

**[www.arthritisaustralia.com.au](http://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**

118-124 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



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ISBN: 978-0-9805024-1-1