

Taking control of your Rheumatoid Arthritis

A practical guide to treatments,
services and lifestyle choices



How can this booklet help you

This booklet is designed for people who have rheumatoid 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 rheumatoid 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 impact of arthritis.

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

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Medical and consumer consultants

Medical and consumer consultants

Dr Paul Bird, Rheumatologist

Dr Mona Marabani, Rheumatologist and President of Arthritis Australia (2007-2010)

Dr Peter Nash, Rheumatologist

Mrs Judith Nguyen, Arthritis Australia Consumer Representative and Board Member (2002-2010)

Dr Peter Youssef, Rheumatologist and Chair of Arthritis Australia Scientific Advisory Committee

Understanding rheumatoid arthritis

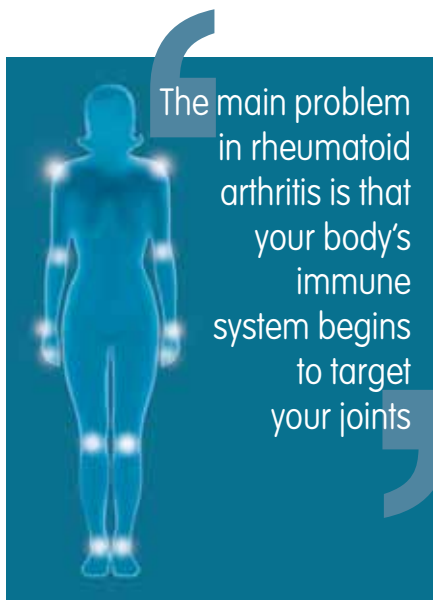
What is rheumatoid arthritis?

Rheumatoid arthritis is a disease where your immune system mistakenly targets your own body. It especially affects the lining of the joints between your bones. Early symptoms include swelling, heat, tenderness, pain or stiffness in your joints. Rheumatoid arthritis can occur at any age and is the second most common form of arthritis, affecting nearly half a million Australians.

What causes rheumatoid arthritis?

At present, the causes of rheumatoid arthritis are not fully understood and research continues. Rheumatoid 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 rheumatoid arthritis is that your body's immune system begins to target your joints. While the immune system usually protects you against infections, in rheumatoid 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. Damage to your joints can be reduced with early and ongoing treatment.

How will rheumatoid arthritis affect me?

Rheumatoid arthritis affects different people in different ways. In some cases, the disease may disappear, or may come and go ('flare') for many years. For other people, the symptoms and disability may slowly worsen over time.

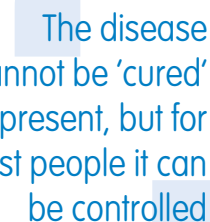
If left untreated, rheumatoid arthritis may lead to damage to joints that cannot be repaired. Other parts of the body may also be affected, such as your lungs or your eyes. Fortunately, these problems outside of your joints are uncommon and the risk is reduced dramatically with treatment.

Joint inflammation may initially cause ongoing pain and some degree of disability, which can affect your ability to work or undertake home duties. This may mean changing your role at work or asking for more support at home until treatment has become effective. However, more than half of the people who develop rheumatoid arthritis continue to work for 20 years after their diagnosis.

The disease cannot be 'cured' at present, but for most people it can be

controlled with ongoing care. Many people achieve remission, which is the goal of treatment — control of symptoms and return to normal function.

Joint replacement may be an option for people who have significant damage to their joints.



The disease cannot be 'cured' at present, but for most people it can be controlled

How will my doctor diagnose rheumatoid arthritis?

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

- talk to you about your symptoms, including where and when you feel joint pain
- check whether you have had fevers, lost weight or been very tired
- examine your hands, feet and other joints for swelling, heat, tenderness or bumps, called 'nodules'
- take a blood sample to check whether your body's immune system is activated and whether it is attacking your joints

- possibly use a needle to take a small amount of fluid from one of your affected joints
- send you to a radiologist for an x-ray or other scan, such as an MRI or ultrasound, of the affected joints.

Because early diagnosis and correct treatment can reduce the impact of the disease



What about pregnancy?

It is possible for women with rheumatoid arthritis to have children, and in fact the symptoms of the disease tend to lessen during pregnancy.

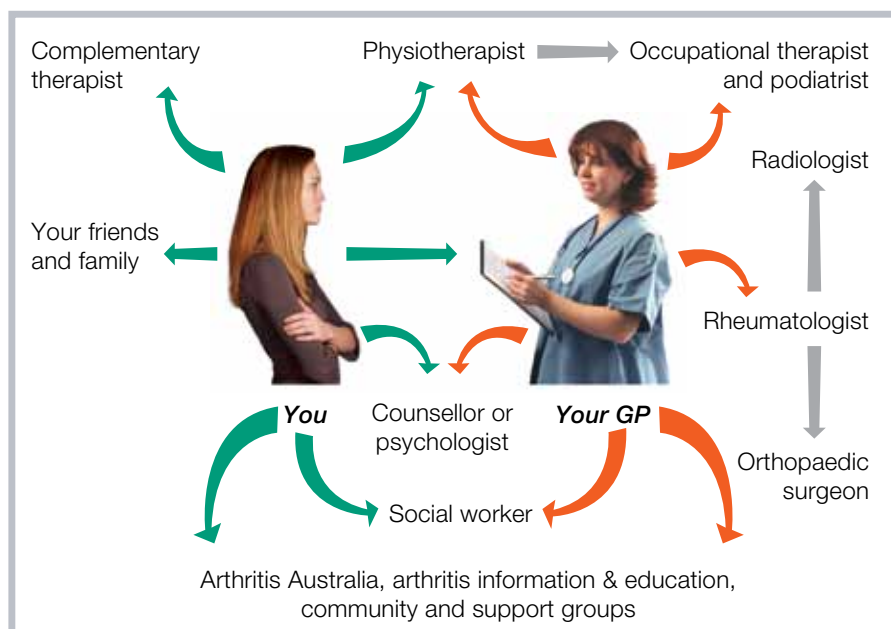
Some arthritis medicines can still be used during pregnancy if necessary, but many can harm the foetus and should not be taken while trying to conceive, when pregnant or during breastfeeding. Whether you are male or female, discuss your pregnancy plans with your doctor so that your medications can be reviewed.

Talk to your doctor for more advice on arthritis and pregnancy.



Discuss your pregnancy plans with your doctor so that your medications can be reviewed

Who can help?



Rheumatoid 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. Rheumatoid 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 rheumatoid arthritis. They can also help you access other specialists, health professionals and services. Your GP will probably make the initial diagnosis of rheumatoid arthritis and should then refer you to a rheumatologist.

Once your rheumatoid 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 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 or disability.

Your GP will probably make the initial diagnosis of rheumatoid arthritis and should then refer you to a rheumatologist



Seeing a rheumatologist

How can a rheumatologist help?

Rheumatologists are doctors who specialise in diseases of the joints such as rheumatoid arthritis.

All people with rheumatoid 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 certain types of physical therapies. Because every person's rheumatoid arthritis is different, your rheumatologist will probably select different treatments over time to find the best one for you.

The rheumatologist may refer you to an orthopaedic surgeon to assess your need for additional treatment, including joint replacement surgery.

How do I find a rheumatologist?

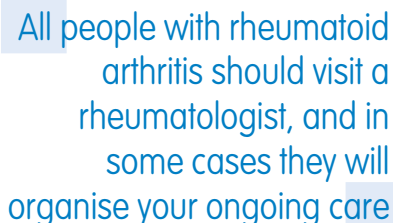
Your GP can refer you to a rheumatologist — they will then stay in touch to coordinate your care

- Your GP may recommend a rheumatologist

- You can also visit the Australian Rheumatology Association website at www.rheumatology.org.au to find a rheumatologist (but you will still need a referral from your GP).

When should I see my rheumatologist?

- At first, you will probably see the rheumatologist every 2–3 weeks
- After that you should visit about every 3 months.



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

Other health professionals

How can other health professionals help?

Many people with rheumatoid arthritis visit a **physiotherapist** (physio). These practitioners can use various treatments, including exercise therapy and hydrotherapy (water exercise), to keep your joints as flexible, strong and pain-free as possible. They will also show you exercises and pain-relief techniques to use 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 and teach you strategies to protect the mobility of your joints, particularly

those in your hands. 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.



How do I find a health professional?

- Your GP or rheumatologist can provide a referral, or you can contact a private therapist directly
- For physios, visit the Australian Physiotherapy Association website (apa.advsol.com.au) or look under 'Physiotherapist' in the Yellow Pages
- For OTs, visit the Occupational Therapy Australia website (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) or look under 'Podiatrist' in the Yellow Pages.

When should I see a health professional?

- You may be referred to one or more therapists soon after your diagnosis of rheumatoid arthritis by your GP or rheumatologist
- 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 soon after your diagnosis of rheumatoid arthritis

Healthy moves for your joints

While healthcare professionals can offer a range of treatments for your rheumatoid 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

Quitting smoking is an important first step to help your joints – call the Quitline on 13 18 48 or visit www.quitnow.info.au. Talk to your doctor or other care team members before making changes.

Eating well

What foods are good or bad for rheumatoid arthritis?

There is very little evidence that particular foods are good or bad for people with rheumatoid 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.

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 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



Fish oils

Current research suggests eating foods rich in Omega-3 fats can help reduce inflammation in rheumatoid 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.

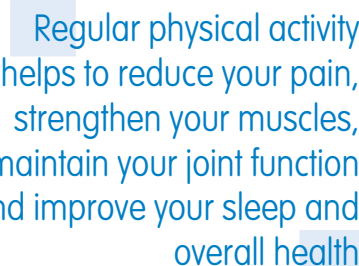
Keeping active

What exercise should I be doing?

Regular physical activity benefits everyone, particularly if you have rheumatoid arthritis. It helps to reduce your pain, strengthen your muscles, maintain joint function and improve your sleep and overall health.

Inflammation in your joints, 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, at least five times per week. If you experience early morning stiffness, gentle stretching exercises under a warm shower will help.



Regular physical activity helps to reduce your pain, strengthen your muscles, maintain your joint function and improve your sleep and overall health

Activities that are likely to be good for your fitness include walking, swimming, water exercise, low-impact aerobics and riding a bike



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 physiotherapist 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, swimming pools, 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 are new to exercise or finding it difficult to exercise, see a physio for advice. They can suggest safe exercises tailored to your condition and make sure you are doing your exercises correctly so you don't cause an injury.

Applying a heat or cold pack to a sore joint may ease swelling and/or pain



Making the most of medicines

Will medicine cure my rheumatoid arthritis?

At present, there is no 'cure' for rheumatoid arthritis. However, early use of the right medicines can slow down the damage caused by the disease, relieve pain and stiffness and reduce long-term disability. The aim of treatment is to achieve remission and return to your normal activities.

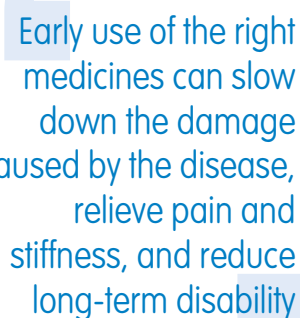
and should not be stopped suddenly — talk to your doctor if you have concerns about side effects, safety or cost.

What is the right medicine for me?

All medicines have risks and benefits, so before you start treatment talk to your doctor and pharmacist 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 whom to speak to if you experience any unwanted effects from your medication.

Many arthritis medicines need to be taken regularly to work properly



Early use of the right medicines can slow down the damage caused by the disease, relieve pain and stiffness, and reduce long-term disability

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 rheumatoid arthritis.

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 not be on the same medicine forever. Some medications can only be used once other medicines are no longer effective in controlling your arthritis.

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



How will the medicines help?

Doctors now know that the best way to attack rheumatoid arthritis is to start treatment that modifies the disease as soon as possible.

The main medicines for rheumatoid arthritis are the disease-modifying drugs, called DMARDs, which not only relieve symptoms but can also reduce the risk of long-term damage to your joints. Sometimes one DMARD is not enough, so you may need to take two or even three to gain the best control of your arthritis.

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

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

Some pain-relieving medicines (analgesics), like paracetamol or mixtures of paracetamol with codeine, can reduce your painful symptoms.



A group of drugs called NSAIDs (anti-inflammatory drugs) can help relieve pain, and they also reduce swelling and stiffness.

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

Some pain-relieving medicines (analgesics) can reduce your painful symptoms

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 1800 011 041 for copies or visit www.rheumatology.org.au or www.arthritisaustralia.com.au

What other treatments can help?

There are many promises made for non-medical 'cures' or treatments to ease arthritis – some of these may work, but many have not been proven to help. For example, there is unclear evidence that treatments such as acupuncture and gamma linolenic acid are helpful in reducing the symptoms of rheumatoid arthritis and further research is needed.

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.



Call the Arthritis Information
Line 1800 011 041 for medicine
information sheets



Seeking support

Why me?

It's perfectly normal to wonder why you have developed rheumatoid arthritis, and to feel angry, sad, frightened or confused about it. By taking control of your rheumatoid 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 if pain, stiffness or 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.


Who can help?

There are many people who can help you deal with the emotional side of rheumatoid 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

What other assistance is available?


There are many resources available to help people with rheumatoid 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 or call 1300 885 886 for your closest centre or more information.

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



There are many
resources available
to help people with
rheumatoid arthritis

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) is an excellent starting point for web searches, as every site that HealthInsite links to has been checked for quality and accuracy of information.



Always check information from the web with a trusted member of your healthcare team

Glossary of terms

Analgesic	an-al-jee-zik	A medicine that helps relieve pain.
Arthritis	are-thry-tiss	Inflammation of one or more joints. Rheumatoid arthritis means that the inflammation occurs mainly in the lining of the joints (the synovium).
Corticosteroid	core-tick-o-ster-oyd	A type of medicine that is very effective in reducing inflammation.
Dietitian	die-et-ish-un	A health professional who can recommend what foods you should and shouldn't eat.
DMARD	dee-mard	A range of medicines that are known as disease-modifying anti-rheumatic drugs. These help reduce damage to your joints as well as relieving symptoms.
Inflammation	in-fla-may-shun	The body's response to damage or infection, which mistakenly attacks your joints in rheumatoid arthritis. Inflammation can cause pain, swelling, warmth, redness and difficulty moving the joint.
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.
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.
TENS		A device called trans-cutaneous electrical nerve stimulation. This sends small electrical pulses through your skin to the nerves underneath, which can help reduce pain.

Useful resources

Australian resources

For access to quality online information about rheumatoid arthritis, start at HealthInsite
www.healthinsite.gov.au

For advice on healthy eating and appropriate exercise, visit Healthy Active
www.healthyactive.gov.au

For advice on quitting smoking, contact the Quitline
www.quitnow.info.au
Ph: 13 18 48

To find a specialist, contact the Australian Rheumatology Association
www.rheumatology.org.au
Ph: (02) 9256 5458

To find a physiotherapist, contact the Australian Physiotherapy Association
apa.advsol.com.au
Ph: 1300 306 622

To find an occupational therapist, contact Occupational Therapy Australia
www.ausot.com.au
Ph: (03) 9415 2900

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

To find a podiatrist, contact the Australasian Podiatry Council
www.apodc.com.au

To find a dietitian, contact the Dietitians Association of Australia
www.daa.asn.au
Ph: (02) 6163 5200

To find a psychologist, contact the Australian Psychological Society
www.psychology.org.au
Ph: 1800 333 497

International resources

The public area on the website of the American College of Rheumatology contains many useful resources
www.rheumatology.org/public

Arthritis Research UK also provides a wide variety of information for people with arthritis
www.arthritisresearchuk.org

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

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

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



Arthritis Australia Level 2, 255 Broadway Glebe NSW 2037

Mail: PO Box 550 Broadway NSW 2007

Phone: 02 9518 4441 **Fax:** 02 9518 4011

Email: info@arthritisaustralia.com.au

Web: www.arthritisaustralia.com.au

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