



Overcoming joint pain and arthritis

The 9 things you need to know to get moving again

This guide provides an overview about managing joint pain, stiffness and swelling without sacrificing your quality of life. We're here for you with the education, tools and expertise you need to get your joint pain under control and get you back to doing the things you love.

Arthritis is chronic, but the pain doesn't have to be



Joint aches, pains and stiffness — some can be expected as a normal part of aging or activity. But when do they signal something more?

Persistent joint pain and stiffness can be signs of arthritis, which affects more than 52 million American adults and 300,000 children, according to the Centers for Disease Control and Prevention.

If you suspect you may have arthritis, it's critical that you seek medical attention to diagnose and treat the type of arthritis you have. Early intervention is the best way to manage pain and symptoms, and prevent the disease from progressing further or causing permanent joint damage.

Whether you have new joint pain and stiffness or are recently diagnosed with arthritis, here are the top nine things you should know about arthritis and how you can get moving again.

1 Arthritis is not a single disease

There are more than 100 different types of arthritis and related conditions. Contrary to the misconception that arthritis only affects the elderly, arthritis affects people of every age, sex and race. It is most common among women and occurs more frequently as people age.

While arthritis has many different types and causes, the disease can be broken down into two main types: mechanical disease (such as osteoarthritis) and inflammatory (such as rheumatoid arthritis). Mechanical arthritis can be degenerative (when joints wear and break down) or metabolic (when uric acid accumulates in joints and crystallizes). Inflammatory arthritis can be caused by the immune system attacking the joints or by an infectious agent, such as a bacterium, virus or fungus.

2 Osteoarthritis is the most common type of arthritis

Osteoarthritis (OA), or degenerative joint disease, is associated with a breakdown of joint cartilage, the firm, rubbery material that covers the ends of bones in normal joints. Cartilage acts as a shock absorber in the joints and reduces friction. OA causes joint cartilage to become stiff and lose its elasticity, making it more prone to damage. Over time, the cartilage may wear in some areas. As cartilage deteriorates, tendons and ligaments stretch, causing pain. If cartilage wears even further, you may experience painful bone-on-bone rubbing.

3 OA can occur in any joint in the body

While OA can occur in any body joint, it most commonly occurs in the weight-bearing joints of the hips, knees and spine. It also commonly affects fingers, thumbs, the neck and large toe.

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4 OA doesn't just affect seniors

More than 27 million Americans have OA, and the chance of developing the disease increases with age. People in their 20s and 30s can get OA, though it's usually attributable to joint injury or repetitive joint stress.

Several factors can increase your risk to develop OA

- **Heredity:** Your risk of arthritis increases if you have family members who have arthritis. It is possible to inherit a defect in the gene responsible for making cartilage. People born with joint abnormalities are also at an increased risk for OA.
- **Obesity:** Excess weight increases the risk of OA in the knees, hips and spine. Losing excess weight can help slow the progression of OA.
- **Injuries:** Joint injuries or broken bones near joints can contribute to the development of OA.
- **Joint overuse:** Overuse and repetitive stress of certain joints increase the risk of developing OA in those joints.
- **Other diseases:** People with rheumatoid arthritis are more likely to develop OA. Excess iron and growth hormone along with certain other conditions also increase OA risk.

5 OA symptoms typically develop gradually and can be much more than just aches and pains

When arthritis is involved, small nagging aches can progress over time to become something much more painful.

Common OA symptoms

- Aching pain deep in the joint
- Joint pain that feels better with rest
- Joint stiffness after periods of rest
- Pain that isn't noticeable in the morning but gets worse throughout the day
- Joint stiffness that is worse in the morning and improves during the day
- Joint aching or soreness, especially with movement
- Joint swelling
- Joint pain that affects your posture and gait that may cause limping
- Feeling a sensation of bones grating or catching on something when moving the joint
- Difficulty using a joint in a normal manner
- Pain that increases with rainy weather or that interferes with daily activities and tasks

6 Early diagnosis is critical to accurately treat arthritis

Your doctor will diagnose you with arthritis using a detailed description of your symptoms, the location and pattern of your pain, and a physical exam. X-rays may be used to determine how much joint damage has occurred and to confirm you have OA and not another type of arthritis. An MRI may be necessary to get a better look at the joint if X-ray results are unclear. Occasionally, blood tests will be performed to determine if you have a different type of arthritis than OA. If fluid has accumulated in your joints, your doctor may also need to extract some to examine under a microscope.

How to prepare for your appointment

- Start keeping a diary of your pain each day. Be sure to note time of day when your symptoms are the worst, any tasks that are difficult due to your pain and what makes your pain or stiffness better or worse.
- Consider what adjectives best describe your pain: throbbing, aching, sharp, shooting, hot, burning, grinding, grating, dull, tender. All of these descriptors will help your doctor accurately diagnose your type of arthritis.

7 Many treatment options are available to alleviate pain, control symptoms and slow disease progression

OA is a chronic disease. While there is no cure, many treatments can improve your symptoms and slow progression of the disease.

The type of treatment that you and your doctor choose will vary based on your age, activity level, overall health, medical history, OA location and severity of your condition.

How to approach long-term management

- Manage pain, stiffness and swelling
- Improve joint mobility and flexibility
- Maintain a healthy weight
- Get enough exercise

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Lifestyle changes that can improve your OA

Consistent physical activity

While it may seem counterintuitive or difficult to get moving when you're in pain, maintaining a consistent exercise plan is critical to manage and improve your OA symptoms. Studies have shown that even simple activities such as neighborhood walks can improve symptoms. Strengthening exercises build muscle around OA-affected joints, range-of-motion exercises improve joint flexibility and aerobic exercises increase energy levels and help reduce excess weight. Additionally, slow, gentle stretching is shown to reduce arthritis-related pain and joint stiffness while improving flexibility. The U.S. Department of Health and Human Services recommends everyone, including people with arthritis, get 150 minutes of moderate exercise per week. Talk to your doctor about what's appropriate for you.

Losing weight

Excess weight puts extra strain on weight-bearing joints, such as knees, hips and spines. Losing weight can ease OA symptoms and may prevent the disease from progressing further. Cutting back on calories and increasing exercise can help you get to an ideal weight. Consult with your doctor about appropriate weight loss goals and how to best get there.

Fostering a positive attitude

As silly as it may sound, many studies have shown that maintaining a positive outlook can boost the immune system's ability to manage pain.

Other treatment options

Pain and anti-inflammatory medications

OA medications come in many forms.

- Analgesics are pain relievers such as acetaminophen, opioids, etc.
- Nonsteroidal anti-inflammatory drugs (NSAIDs) include aspirin, ibuprofen, naproxen and celecoxib, etc.
- Duloxetine (Cymbalta) is an antidepressant that has been shown to improve chronic pain, including pain from OA.
- Corticosteroids are powerful anti-inflammatory medications taken orally or injected directly into the joint. Cortisone injections are normally limited to three or four per year as cortisone can weaken the joint over time.
- Hyaluronic acid occurs naturally in normal joints to help in lubrication. Joints affected by OA could benefit from the extra cushioning and lubrication provided by hyaluronic acid, which can be injected into your joint at your doctor's office.

Physical and occupational therapy

Specially trained physical and occupational therapists can provide myriad therapies and treatments to help ease arthritis symptoms, including applying heat and cold therapies; supplying assistive devices; performing range of motion and flexibility exercises; and showing you ways to properly use your joints to reduce pain and avoid further damage.

Assistive devices

Many devices exist to help your function and mobility. Using assistive devices can both reduce strain on your joints and ensure you are using your joints properly. Assistive devices include canes, walkers, splints, scooters, custom knee braces, custom shoe wedges or orthotics, jar openers, long-handled shoehorns and steering wheel grips.

Alternative therapies

Nutritional supplements, acupuncture and acupressure, massage, relaxation techniques, and many other alternative therapies are helpful to ease pain and reduce OA symptoms. Inform your doctor of any alternative therapies you may pursue, including supplements, as some can interact with other medications you may be taking.

Other treatment options *continued*

Surgery

In some cases, particularly where OA has progressed to where joints are rubbing bone on bone, joint surgery can repair or replace severely damaged joints, especially hips or knees.

In cases of joint repair, orthopedic surgeons are able to use minimally invasive techniques to see inside and treat the joint, such as removing damaged cartilage and free-floating pieces of bone. Most of these arthroscopic procedures can be performed quickly with no hospital stay and with minimal tissue damage or blood loss and a fast recovery time.

New technology has also greatly improved joint replacement results and recovery times. Knees and hips are the most commonly replaced joints, but replacements are also performed on shoulders, elbows, fingers, ankles and other joints.

Hips and knees can be replaced partially or totally and there are many techniques that can be used, depending on the location and level of damage to your joint. All techniques are aimed at fast recovery times, optimal results and minimal tissue damage or down time so you can get back to doing what you love sooner.

If you're a candidate for surgery, you will be referred to an orthopedic surgeon. Too often, patients delay seeking surgical consultation when they could have been feeling better faster with a joint replacement. Talk to your doctor and orthopedic surgeon about the treatment and timeline that is right for you.

8 Arthritis treatments can take time to determine what works best for you

OA and its symptoms are different for each person. Treatment is the same way. It's important to remember that this process isn't a sprint but a marathon — treating your arthritis long-term can be a process of trial and error as you and your doctor work together to determine what combination of treatments work best for you.

9 The effects of arthritis are not just physical

Anxiety and depression often accompany any chronic disease diagnosis, and arthritis is no exception. Speak candidly with your doctor about how you are feeling and how your pain and joint stiffness are affecting your quality of life and activity levels. Early treatment to minimize pain and alleviate symptoms is important to feel better faster, both physically and emotionally.

We can help

Arthritis and the pain that comes with it can greatly affect your quality of life and activities. Seeking help early can get you back to the activities you enjoy faster and help ensure that your joints are protected from further damage for years to come.

We're here for you with the resources, therapies, treatments and expertise you need to successfully manage your joint pain so you can get moving again.

To get started, visit NovantHealth.org/orthopedics