

Arthritis (osteo and rheumatoid under their headings)

Introduction

Types of arthritis

As well as osteoarthritis and rheumatoid arthritis, there are many other types of arthritis including:

ankylosing spondylitis – a long-term condition that affects the bones, muscles, and ligaments of the spine

cervical spondylitis – also known as degenerative osteoarthritis, cervical spondylitis affects the joints and bones in the neck

fibromyalgia – a condition that causes pain in the body's muscles, ligaments and tendons

lupus – a long-term condition that causes inflammation in the body's tissues

gout – a type of arthritis that usually affects the big toe, but can also develop in any joint in the body

psoriatic arthritis – joint inflammation that affects people with the skin condition, psoriasis

reactive arthritis – can cause inflammation of the joints, eyes, and urethra (the tube through which urine passes that runs from the bladder through the penis in men or the vulva in women)

secondary arthritis – a type of arthritis that can develop after a joint injury; it sometimes occurs many years after the injury

polymyalgia rheumatica – a condition where the immune system attacks healthy tissue, causing muscle pain, stiffness and joint inflammation

Arthritis is a common condition that causes pain and inflammation within a joint.

The condition affects people of all ages including children (see below).

There are many different types of arthritis that cause a wide range of symptoms.

Two of the most common are osteoarthritis and rheumatoid arthritis.

What is osteoarthritis?

Osteoarthritis is the most common form of arthritis.

In people affected by osteoarthritis, the cartilage (connective tissue) between their bones gradually wastes away, leading to painful rubbing of bone on bone in the joints. The most frequently affected joints are in the hands, spine, knees and hips.

Osteoarthritis often develops in people who are over 50 years of age. However, it can develop at any age as a result of an injury or another joint-related condition.

What is rheumatoid arthritis?

Rheumatoid arthritis is a more severe, but less common, form of arthritis than osteoarthritis. It occurs when the body's immune system attacks and destroys the affected joints, causing pain and swelling to occur. This can lead to a reduction in movement and the breakdown of bone and cartilage.

In the UK, rheumatoid arthritis affects around 400,000 people, and often starts in people between the ages of 40 and 50 years old. Women are three times more likely to be affected by the condition than men.

Symptoms of arthritis

There are many different symptoms of arthritis and the symptoms you experience will vary depending on the type of arthritis you have. However, common arthritic symptoms include:

joint pain, tenderness and stiffness

inflammation in and around the joints

restricted movement of the joints

warmth and redness of the skin over the affected joint

weakness and muscle wasting

Arthritis and children

Although arthritis is often associated with older people, it can sometimes affect children. Most types of childhood arthritis are referred to as juvenile idiopathic arthritis (JIA). JIA causes pain and inflammation in one or more joints for at least six weeks.

Although the exact cause of JIA is unknown, the symptoms often improve as a child gets older, allowing them to lead a normal life.

The main types of JIA are discussed below.

Oligo-articular JIA

Oligo-articular JIA is the most common type of JIA. It affects four or less joints in the body, most commonly in the knees, ankles and wrists.

Oligo-articular JIA has good recovery rates and long-term effects are rare. However, there is a risk that children with the condition may develop eye problems, so it is recommended that they have regular eye checks with an ophthalmologist (an eye care specialist).

Polyarticular JIA (polyarthritis)

Polyarticular JIA, or polyarthritis, affects five or more joints. It can develop at any age during childhood.

The symptoms of polyarticular JIA are similar to those of adult rheumatoid arthritis. The condition is often accompanied by a rash and a high temperature (fever) of 38C (100.4F) or above.

Systemic onset JIA

Systemic onset JIA begins with symptoms such as a fever, rash, lethargy (lack of energy) and enlarged glands. Later on, joints can become swollen and inflamed.

Like polyarticular JIA, systemic onset JIA can affect children of any age.

Enthesitis-related arthritis

Enthesitis-related arthritis is a type of juvenile arthritis that affects older boys or teenagers. The condition can cause pain in the soles of the feet and around the knee and hip joints where the ligaments attach to the bone.

Treating arthritis

There is no cure for arthritis but there are a number of treatments that can help slow down the condition's progress.

Medication can help relieve the symptoms of arthritis. In severe cases, surgery may be recommended.

For osteoarthritis, analgesics (painkillers), non-steroidal anti-inflammatory drugs (NSAIDs) and corticosteroids are often prescribed. In severe cases, surgery may be recommended such as:

arthroplasty (joint replacement)

arthodesis (joint fusion)

osteotomy (where a bone is cut and re-aligned)

The aim in treating rheumatoid arthritis is to slow down the progress of the condition and minimise joint damage. Recommended treatments may include:

analgesics (painkillers)

disease modifying anti-rheumatic drugs (DMARDs)

physiotherapy

regular exercise

Support groups

Support groups, such as Arthritis Research UK and Arthritis Care offer information, advice and support for people living with arthritis.

You can also use the post code search to find arthritis services in your area and hospitals for arthritis.

Living with arthritis

If you have arthritis, there are a number of things you can do to manage your symptoms and improve your quality of life.

For example, you can:

control your weight to ease pressure on your joints

avoid stress or injury to your joints to prevent or reduce the severity of osteoarthritis

ensure good posture to strengthen healthy joint structure

use physiotherapy and a walking stick or cane to help prevent your condition getting worse

ensure that you regularly undertake weight-bearing exercise, such as walking, to help prevent osteoarthritis. This type of exercise will increase the strength of the muscles that support your joints

It is not true that avoiding exercise will help reduce joint problems occurring in later life.

Occupational therapy

Your doctor can refer you to an occupational therapist who will be able to advise you about the equipment that you may need to assist your independent living.

They can also write supporting letters to your local social services department. If you need to adapt your home, a range of services and merchandise is available, so it is important to shop around.

Preventative measures

Arthritis can sometimes make you less flexible and less mobile. This can increase your risk of having an accident.

Listed below are a number of measures you can take to limit this risk.

Eliminate home hazards - always keep your home well lit and remove all loose wires and cords that you may trip over. Make sure treads, rugs and carpets are secure. Keep rubber mats by the sink and in the bath to prevent slipping and always clean up spills immediately. Install grab rails in the bathroom and toilet to help you stand up without falling. Your doctor or local authority may be able to provide support and advice about safety in the home.

Improve your balance - exercise that helps improve your balance can prevent a fall. Being physically active can prevent up to 25% of falls. Ideal forms of exercise for improving balance include t'ai chi, yoga and dance.

Exchange high heels for flats - high heels are bad for your posture and make you more prone to falling, so wear flat, comfortable footwear.

Don't drink too much alcohol - alcohol can affect your balance, making you more likely to take a knock or a fall. Keep within the government's recommended daily amounts of alcohol consumption (no more than 2-3 units for women and 3-4 units for men). A unit of alcohol is half a pint of normal strength lager or beer, one pub measure of spirit or one small glass of wine. Read more about alcohol units.

Check your sight - as you get older, you will probably experience some deterioration in your eyesight. It is important to get your sight checked regularly by a qualified optician. Poor eyesight can increase your risk of accident and injury.

Ask for help - if you know you have arthritis, avoid standing on chairs to reach high cupboards or change a light bulb. Also, try to avoid doing chores that you know will cause more pain. Write a list of the jobs that need to be done around the house and save it for the next time your friends or family visit.

The Royal Society for the Prevention of Accidents (RoSPA) provides more information about safety in the home.

Arthritis Care also has more information about living with arthritis

Arthritis and diet

Some studies suggest that certain foods may help reduce inflammation and pain and slow the progression of arthritis

There are many food myths surrounding arthritis, but some studies suggest certain foods may help to reduce pain and inflammation and slow the progression of arthritis.

Some people say dairy products cause arthritis and that cider vinegar and honey will cure it.

Others believe acidic fruits, such as lemons, oranges and grapefruit, and nightshade vegetables, such as potatoes, aubergines and peppers, can make symptoms worse.

Many people living with arthritis, particularly rheumatoid arthritis, also say there is a link between certain foods and the flare-ups they experience.

Healthy, balanced diet

Although there is little evidence to support these claims, some studies suggest certain foods may help reduce the pain and inflammation caused by arthritis and slow down the condition's progression.

These foods all contribute to a healthy, balanced diet, which will help with your arthritis and also reduce your risk of developing health complications, such as heart disease, osteoporosis (weak and brittle bones) and obesity.

If you are taking steroids over a long period of time you are more likely to develop osteoporosis. To reduce your risk, eat foods rich in calcium and vitamin D.

Calcium-rich foods include dairy products (milk, cheese and yoghurt), nuts, seeds and fish, such as sardines or whitebait (particularly if you eat the bones).

Sunlight is our main source of vitamin D but it can also be found in oily fish and fortified foods, such as cereals and margarines.

There is increasing evidence that the Mediterranean diet is good for arthritis as well as a number of other conditions. This diet includes plenty of fruit and vegetables, fish, grains and pulses and a moderate amount of red meat.

Foods rich in omega-3 are believed to have an anti-inflammatory effect, which may reduce the pain associated with inflamed joints. Omega-3 is found in oily fish, such as sardines, mackerel and salmon.

You should try to eat at least two portions of oily fish a week. Omega-3 is also found in nuts and seeds (particularly linseed or flax seed), and is regularly used to fortify margarines, cereals and bio-live yoghurt drinks.

Certain foods, such as patés, uncooked meats and unpasteurised dairy products can increase the risk of developing food poisoning. If you are taking immunosuppressant medication, you should avoid these foods.

For more dietary advice, see the Arthritis Care website information about eating well

Exercising with arthritis

If you have arthritis, keeping active through regular exercise can help manage your condition. However, it is important you find the right type and level of exercise.

Regular exercise can help you maintain a healthy weight, improve your posture and reduce your chance of getting osteoporosis (weak and brittle bones).

In a survey carried out by Arthritis Care, 57% of people with arthritis said they found exercise to be an effective way of managing their symptoms.

Exercise programme

There are three types of exercise that combine to make up a good fitness programme. They are:

range of movement - this helps improve strength and flexibility and promotes good posture; try swimming, t'ai chi and golf

strengthening - this will help build the muscles, which in turn provide better support for your joints; try weight training.

aerobic - this raises your heartbeat, which helps to improve your level of fitness by strengthening your heart; some of the best forms of aerobic exercise are brisk walking, cycling and tennis.

Remaining physically active gives you the best possible chance of managing the symptoms of arthritis effectively. It is also essential for minimising your risk of developing a number of other health problems.

Finding the right level

Finding the right level of physical activity is very important if you are to gain the health benefits of exercise. Try to be realistic about the amount of exercise you are able to do and choose an activity you enjoy.

You may experience some pain when you first start a new exercise programme. This is often due to new muscles being used. However, if you feel pain for longer than

two hours after exercising, or you have any pain in the joints, consult your DOCTOR or physiotherapist before doing the exercise again.

Exercising with osteoarthritis

Listed below are some tips for exercising with osteoarthritis.

Regular exercise can be the best way to help reduce the symptoms of osteoarthritis. By keeping active you will strengthen the muscles surrounding your joints which will reduce further joint deterioration.

Exercise will help you maintain a healthy weight which means you will put less strain on your joints.

A moderate exercise programme is far more beneficial than a strenuous programme. Too much exercise can cause further pain and joint degeneration.

Try to do small exercises every day to improve your range of movement. Arthritis Care provides a comprehensive list of exercises for you to try.

Never force a painful joint.

Exercising with rheumatoid arthritis

Listed below are some tips for exercising with rheumatoid arthritis.

It is very important for people with rheumatoid arthritis to get the right balance between rest and activity.

You can still exercise during a flare-up, but you should reduce the intensity of your workout.

Exercise when you are least tired.

Try to do small exercises every day that improve your range of movement.

Exercising in the morning can help to reduce morning stiffness.

Exercises that build and strengthen muscles can help protect and support your joints.

Swimming, cycling and brisk walking are low impact exercises and particularly good for people with rheumatoid arthritis.

Concentrate on maintaining good posture at all times.

Complementary therapy

Photo of someone having acupuncture

There's no clinical proof that acupuncture will prevent arthritis, but some people say it helps with the pain.

Some people find complementary therapies can help ease the pain and discomfort of arthritis.

There are also complementary therapies that reportedly improve flexibility and mobility.

Most evidence regarding the benefits of complementary therapies for treating the symptoms of arthritis is anecdotal and has not been clinically proven to be effective.

However, if you are in pain and arthritis is having a detrimental effect on your life, trying complementary therapies is a positive way of taking control of your symptoms, and it may help you to manage your pain.

Your doctor or consultant will be able to advise about different treatment options, including some complementary therapies.

Arthritis Care provides further information about complementary therapy for arthritis. Arthritis Research UK also produce a leaflet called Complementary and alternative medicine for arthritis (PDF).

Safety

The following checklist will help ensure that your treatment is safe and reliable.

Ask how long the treatment is likely to last and how much it will cost.

Find out if there is a governing body for the treatment you plan to receive and whether your chosen therapist is a member.

Make sure your therapist has insurance cover.

Ask about their training, how long they have practised and whether they have any particular areas of expertise.

Tell them about any medication that you are taking.

Do not stop taking any medication until you have discussed it with your doctor or consultant.

If you don't trust a therapist, don't use them.

Acupuncture

There is no clinical proof that acupuncture can help treat symptoms of arthritis or prevent the condition from progressing further.

However, some people have reported acupuncture has helped them manage the pain of arthritis. Speak to your doctor if you are interested in trying acupuncture.