

# MINNESOTA Health Care News

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Arthritis is the most common cause of disability and the third leading cause of work limitation in the United States. And it is not just an old person's disease: Nearly two-thirds of those affected by arthritis are younger than 65. There are more than 150 different types of arthritis, and they affect people of all ages and racial and ethnic groups.

Arthritis currently affects 46 million people in the United States, just under 1 million of whom live in Minnesota. According to predictions by the Centers for Disease Control and Prevention (CDC), by 2030 the number of adults with doctor-diagnosed arthritis will increase to 67 million by 2030 nationally and to more than 1.2 million in Minnesota. At present, 23 percent of the adult population and an estimated 5,000 children in Minnesota are affected by arthritis.

Arthritis affects the joints, surrounding tissues, and other connective tissues. Common symptoms include pain, aching, stiffness, and swelling in or around the joints. Some forms of arthritis, such as rheumatoid arthritis and lupus, can affect multiple organs and cause widespread symptoms in addition to the pain and inflammation in the joints that can lead to joint damage and malformation. In those with osteoarthritis (OA), degeneration of cartilage and bone results in pain, swelling, and damage to the joint. OA is the most common form of arthritis, affecting more than 27 million Americans; rheumatoid arthritis affects 1.3 million and gout 3 million.

Arthritis can interfere with a person's ability to work and be productive. National surveys show that 19 million people report activity limitations because of arthritis; among adults of

## Arthritis



**Programs advocate self-management**

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working age, almost one in three report work limitations. In Minnesota, 35 percent of adults between the ages of 18 and 64 report work limitations related to arthritis, and 38 percent report that their arthritis limits them in their work, leisure, and social activities.

The economic impact of arthritis is enormous. The total cost of arthritis and other rheumatic conditions in the U.S. was \$128 billion in 2003, with \$81 billion in medical costs and \$47 billion in lost earnings. In Minnesota that year, costs associated with arthritis totaled \$2.2 billion, with \$1.5 billion in medical costs and nearly \$750 million in lost earnings. Employment rates are lower among adults with arthritis, meaning they are working less or not

working at all due to limitations related to their arthritis.

The effect of arthritis is heightened when it exists simultaneously with other chronic conditions. Surveys by the Minnesota Department of Health (MDH) show that more than half (54 percent) of Minnesota adults with heart disease also have arthritis and almost half (47 percent) of adults with diabetes have arthritis. People with inflammatory arthritis, particularly rheumatoid arthritis, are at significantly increased risk for cardiovascular disease and sudden death from cardiac disease. Physical activity is key for managing all these chronic conditions, but having arthritis presents barriers to increasing physical activity. People with arthritis report they are prevented from exercising by pain, fear of pain, and lack of information about how to exercise safely.

### Current treatment

Many people with arthritis think it is an inevitable part of aging and that little can be done to treat it. In fact, a number of interventions have been shown to be effective and can be used in different combinations at different times, tailored to a patient's individual condition. Prescription drugs are particularly important in treating inflammatory rheumatic conditions, including rheumatoid arthritis, psoriatic arthritis, and lupus. Pain medications may be used to support day-to-day activities. Disease-modifying agents (DMARDs) such as methotrexate and biologic response modifiers can often arrest the progress of inflammatory rheumatic conditions and prevent joint damage, and new drugs continue to be developed. Pharmacological treatments that might delay or prevent the progression

## Resources

of osteoarthritis and the need for joint replacements remain on the horizon. Pain medications can help in management of OA, but have side effects and may not totally meet pain relief needs.

Joint replacement and other joint surgery can be an effective method of reducing pain and improving physical function but are associated with significant surgical risks and costs. Patients should discuss the potential benefits and risks to their overall health with their physician.

### Self-management

Just as important as medical care is what people with arthritis do to take care of themselves day-to-day. Strategies such as physical activity and self-management education can significantly affect pain, disability, quality of life, and health care costs, but have not been widely used.

Self-management refers to the tasks individuals must perform to live well with one or more chronic conditions. These tasks include confidently managing day-to-day medical care requirements; undertaking behavior change to increase physical activity or develop healthier eating habits; managing stress, fatigue, and pain; and working effectively with health care providers to find the best care solutions.

**Physical activity.** Research has shown that for people with all types of arthritis, regular physical activity decreases pain, improves function and mental health, reduces risk of falls, and reduces disability as well as risks for other chronic conditions. The CDC recently released new recommendations for physical activity, including those with arthritis: [www.cdc.gov/arthritis/features/pa\\_guidelines.htm](http://www.cdc.gov/arthritis/features/pa_guidelines.htm).

The safest, most effective physical activities for adults with arthritis are low-impact, moderate-intensity aerobics such as walking, water exercise, and cycling, and muscle-strengthening exer-

- **The Minnesota Department of Health Arthritis Program**, in partnership with the Arthritis Foundation and other organizations, offers community programs in self-management for people with arthritis and other chronic conditions. For more information, go to [www.arthritis.org](http://www.arthritis.org), [www.mnhealthyaging.org](http://www.mnhealthyaging.org), [www.health.state.mn.us](http://www.health.state.mn.us) (search on “arthritis”), or e-mail [health.arthritis@state.mn.us](mailto:health.arthritis@state.mn.us). The Chronic Disease Self-Management Program is offered in Minnesota under the names Living Well With Chronic Conditions, Pathways to Better Health, and Living in Balance.
- **The Arthritis Foundation**, [www.arthritis.org](http://www.arthritis.org), [www.fightarthritispain.org](http://www.fightarthritispain.org), [www.letsmovevetogether.org](http://www.letsmovevetogether.org); 800-333-1380
- **National Institute of Arthritis and Musculoskeletal and Skin Diseases**, [www.niams.nih.gov](http://www.niams.nih.gov)
- **CDC Arthritis Program**: [www.cdc.gov/arthritis](http://www.cdc.gov/arthritis)

cises that use different forms of resistance.

Many people benefit from group exercise programs, which provide support and accountability to regular participants. The Arthritis Foundation Exercise Program and Aquatic Exercise Program have been shown to improve participants' health status. These community programs are conducted by trained leaders and include a variety of exercises targeting range of motion, flexibility, balance, and endurance. The Arthritis Foundation has partnered with the Minnesota Department of Health Arthritis Program to expand the availability of these programs in Minnesota and introduce a new program, Walk With Ease (see sidebar). Offered in

### Walk with Ease

If you are looking for relief from arthritis pain, improved health, or just want to be active, this new walking program can provide support and teach you how to safely make physical activity part of your everyday life. Whether you have arthritis or other chronic conditions, are young or old, male or female, fit or not-so-fit, this program may be for you. We are looking for people to help us inaugurate this new program in Minnesota. We will be able to provide the program at no cost to a limited number of people in this trial period in both group and individual self-directed formats. Contact [health.arthritis@state.mn.us](mailto:health.arthritis@state.mn.us) for more information. The program will be available to everyone later this year.

group and individual formats, the program supports walking programs for people with arthritis and other chronic conditions. The Enhance Fitness exercise program is also available in many Minnesota communities and has been shown to be safe and effective for people with arthritis.

**Self-management education.** Programs like the Arthritis Self-Management Program and the Chronic Disease Self-Management Program help participants develop the skills and confidence to manage their arthritis and other chronic conditions day-to-day. These programs were developed by Stanford University at its Patient Education Research Center to help participants decrease pain and fatigue, increase physical activity and healthy eating, improve self-confidence and quality of life, and reduce health care costs. In both programs, small-group workshops help participants develop skills, set and achieve goals to make lifestyle changes, and identify ways to manage their symptoms and challenges. Led by trained facilitators, the workshops meet weekly for six two-hour sessions. Participants not only gain insight from others who are meeting the same challenges they are, but also have the opportunity to contribute their experience in helping others.

People with arthritis can live active, productive lives. Health care professionals can prescribe or recommend treatments to help manage arthritis, but the real key to living well with the disease is what individuals do for themselves. Research shows that people with arthritis who take part in their own care report less pain and make fewer doctor visits. They also enjoy a better quality of life. ❏

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