

Osteoarthritis

Family Health Center
606 N Third Avenue Suite #101 - Sandpoint, Idaho 83864 - Telephone (208) 263-1435

What is it?

There are many kinds of arthritis. *Arthritis* literally means inflammation of the joints. It causes pain and usually also limits movement of the joints that are affected. *Osteoarthritis* is the most common form of arthritis. Osteoarthritis is also called degenerative arthritis, degenerative joint disease, osteoarthrosis, or hypertrophic arthritis. It is not life threatening and seldom results in severe disability. Osteoarthritis need not interfere with your social or occupational life.

What causes it?

The exact cause is not known. It seems to be related to the wear and tear put on joints over the years in most people, but wear and tear doesn't, by itself, cause osteoarthritis.

Normally a smooth layer of *cartilage* acts as a pad between the bones of a joint. Cartilage helps the joint move easily and comfortably. In some people, the cartilage thins as the joints are used. This is the start of osteoarthritis. Over time, the cartilage wears away and the bones rub against one another.

The cartilage in osteoarthritis degenerates abnormally. As it gets worse, the breakdown of cartilage happens faster than the body can repair it.

Bones may even start to grow too thick on the ends where they meet to make a joint, and bits of cartilage and bone may loosen and get in the way of movement. This can cause pain, joint swelling and stiffness.

Who gets it?

Osteoarthritis is one of the oldest and most common diseases of man. It probably affects almost every person over age sixty to some degree, but only some have it badly enough to notice any symptoms. Osteoarthritis is more common in older people because they have been using their joints longer. Using the joints to do the same task over and over, or simply using them over time can make osteoarthritis worse.

Younger people can also get osteoarthritis. Athletes are at risk, because they use their joints so much. People that have jobs that require the same movement over and over also are at risk. Overweight people are higher risk because the added weight contributes to the stress placed on the joints, and as a result, may damage them prematurely. Trauma to a joint also accelerates the progression of osteoarthritis.

What are the symptoms?

Osteoarthritis can affect any joint, but commonly occurs in the hips, knees, feet and spine. It may also affect some finger joints, the joint at the base of the thumb and the joint at the base of the big toe. It rarely affects the wrists, elbows, shoulders, ankles, or jaw, except as a result of injury or unusual stresses.

No matter what joint is affected, the symptoms usually begin slowly and may not seem important. Most people feel mild aching and soreness, especially when they move. A few people develop constant, nagging pain, even when resting. Stiffness may also be present

and is most noticeable in the morning and sometimes in damp, cold weather. Swelling and occasionally inflammation are present in the joints in more advanced and serious cases of osteoarthritis. If muscle weakness develops from lack of use, leg cramps and loss of motion may also occur.

How do you prevent it?

Since the cause of osteoarthritis is not known, there is no sure way of preventing it. However, it is clear that reducing the risk factors for osteoarthritis may help, specifically, maintaining ideal body weight and avoiding overuse or injury of a specific joint.

Can it be treated?

No cure has been found, but you don't have to become disabled. The right plan can help you stay active, protect your joints, limit injury and control pain. Your treatment program should include joint protection, exercise, medication, heat and cold treatments, weight control and when necessary, surgery.

- **Joint protection** means protecting painful joints from stresses and strains that can make them hurt more or cause further damage. You should reduce or avoid activities, such as prolonged kneeling or sitting, high impact aerobics, or task related motions that increase or cause pain. There are also special assistive devices which help protect your joints and keep you moving, such as a cane or splint.

- **Exercise** in small amounts through the day with rest time in between will help you avoid injury and pain by not trying to do too much. Exercises that don't strain your joints are best. These may include tightening your muscles and then relaxing them a number of times. You can do this with all of your major muscles several times throughout the day. Another good exercise for arthritis is movement in a swimming pool with much of your body's weight held up by the water.

The goals of your exercise program are to keep joints flexible, strengthen the muscles that keep joints stable, protect diseased joints against further damaging stress, reduce stiffness and improve posture.

- **Heat and cold treatments** may reduce pain and stiffness. Heat can be applied through warm baths, hot towels, hot water bottles or heating pads. Ice packs can also be used to make you feel better.

Try alternating heat with ice packs. Some people find that using heat before activity and cold after activity is useful. Try different combinations and see what works best for you. Everyone is different.

- **Weight control** is an important part of your treatment program. Extra pounds put even more stress on weight bearing joints (hips, knees, back and feet).

This extra stress can lead to further joint pain and damage. Losing weight can also make you look better, have more energy, and feel healthier.

The formula for losing weight is to eat fewer calories and increase your physical activity. Ask your doctor for further advice regarding weight control.

- **Glucosamine** can help with pain relief and can reduce the amount of other medicines needed. It often takes a few months to start to work. It is often combined with other supplements like chondroitin.

- **Medication** you can buy without a prescription include pain-killers - such as acetaminophen (Excedrin, Panadol, Tylenol) and anti-inflammatories - such as aspirin or ibuprofen (Advil, Motrin, Nuprin) can help you feel better. For most people, initial treatment with regularly scheduled acetaminophen is considered safer.

Medicine should be used smartly. You only need the amount that makes you feel good enough to keep moving. Using too much medicine may cause side effects. If you often take medicine that doesn't require a prescription, your doctor may give you a prescription medicine that can be taken less often to relieve pain. Talk to your family doctor about what is right for you.

- **Surgery** is occasionally needed to correct or prevent deformity, relieve pain, and improve overall movement. In the past several years, these operations have become very effective and many people have benefited from joint repair or replacement. Surgeons can replace or repair damaged joints with wear resistant artificial joints made of metal and plastic. There are replacements available for all the major joints.

Are there complications?

Osteoarthritis does tend to get worse over time. It is important to stay as active as possible. When joints hurt, people tend not to use them and the muscles get weak. This can cause *contractures* (stiff muscles) and you can lose your range of motion - it gets harder to get around. This causes more pain and the cycle begins again. Severe pain and discomfort can lead to depression, anger, and frustration. Emotional strain can also cause loss of sleep, which can make you feel tired and run down.

In summary

- Osteoarthritis is more common over age 60.
- For more information on osteoarthritis talk to your doctor or contact the Arthritis Foundation at www.arthritis.org or (800)-283-7800.