

## Arthritis

Arthritis is a chronic disorder that means a change inside a joint (specifically inflammation of a joint). 1 in 7 Canadians suffer from arthritis and half are between the ages of 30 to 50 years old. It is one of the major reasons people see their doctor.

The term arthritis is used for hundreds of different varieties of joint problems that have specific symptoms, such as pain, swelling, and stiffness. Osteoarthritis and rheumatoid arthritis are the two most common arthritic conditions. Other types of arthritis include gout, ankylosing spondylitis, systemic lupus erythematosus (or lupus), and psoriatic arthritis.

The effects of arthritis are often mild, but in some cases they can be crippling. The Arthritis Foundation estimates that almost every person over the age of 60 years probably has osteoarthritis to some degree, but fewer than half have it severe enough to notice any symptoms. Osteoarthritis occurs equally in both sexes but in people under 45 years of age, it is more common in men. It is also much more common in overweight people. All forms of arthritis affect the joints to some degree, but others may have their most serious effects on other parts of the body. Osteoarthritis is the most common form of arthritis, primarily affecting people over the age of 60 years, or in younger people who have had serious joint injuries. It is degenerative in nature - cartilage in the joints gradually wears away, causing the ends of the bones to rub against each other.

It can develop spontaneously for no apparent reason or be due to a secondary cause, where the joint damage results from an injury or trauma. By far the greatest risk factor for osteoarthritis of the hips and joints of the legs is being overweight.

Rheumatoid arthritis is caused by inflammation and thickening of the joint's lining, called the synovium. It is suspected that the inflammatory forms of arthritis such as rheumatoid arthritis may be triggered by bacterial or viral infections heightened by a flaw in the body's immune system resulting in an abnormal immune response that destroys the body's own tissues. In the case of rheumatoid arthritis, the joints are the primary target.

Some forms of arthritis, such as gout, are due to metabolic problems, called crystal-associated arthritis, which are caused by crystal deposits within the joints. 80% of gout sufferers are men, but women become equally prone after menopause. Gout may be genetic, but it can also be precipitated by excessive alcohol consumption, obesity, and conditions that suddenly break down large amounts of tissue. Gout results from the accumulation of uric acid, a waste product from the breakdown of digested proteins. This excess uric acid forms crystals that collect in many tissues, including the joint linings, causing inflammation and possibly leading to kidney stones.

Symptoms of osteoarthritis include:

- Stiffness on awakening or after prolonged rest
- Pain in a joint during or after use
- Discomfort in a joint before or during a change in weather
- Swelling and a loss of flexibility in a joint
- Bony lumps (called Heberden and Bouchard nodes) that develop on the end or middle joint of the fingers

Symptoms of rheumatoid arthritis include:

- Pain and swelling in any joint, but usually symmetrically (if one joint is affected, the other side will soon follow)
- Overall aching or stiffness, especially after sleeping or periods of motionlessness
- Joints that are swollen, painful, and warm to the touch during the initial attack and ensuing flare-ups
- Nodules, or lumps, that most commonly occur near the elbow (but can occur anywhere)
- Fatigue

Symptoms of gout include:

- Acute joint inflammation
- Severe pain
- Swelling
- Heat
- Redness

It can often be difficult to differentiate gout from an acute infection. Any joint can be affected, but the big toe is by far the most common. The attack may last up to a week or more without treatment, then usually resolves and gets better on its own.

Because there is no specific test to diagnose arthritis, almost all kinds of arthritis are based on the clinical diagnosis of the doctor. Doctors make a firm diagnosis based on the cumulative pattern of the person's own medical history, family history, environment, physical exam, tests, and course of condition over time.

Unfortunately, there's no cure for most forms of arthritis. The primary goal of treatment is to reduce symptoms of pain and inflammation with the help of exercise programs, physiotherapy, and medications.

Taking the proper precautions today can prevent the possibility of developing osteoarthritis later in life. Maintaining a healthy weight to limit stress on the joints is the most important step to reduce the possibility of developing arthritis in the hips and knees. Recent studies have shown that a weight gain of only 10 to 20 extra pounds in early adulthood increases wear and tear on the shock-absorbing cartilage in joints and can lead to serious joint damage in the long run. Exercise programs to maintain muscle tone are useful for managing osteoarthritis and other kinds of arthritis. These may include special exercises prescribed by your physician or physical therapist. These exercises strengthen muscles and improve range of motion. Walking is an excellent form of therapy for arthritis in the knees, but only to the point that it does not cause pain. In some cases, joint pain due to osteoarthritis is often relieved with heat and rest. Cold packs are good short-term pain relievers, but they can temporarily increase stiffness. Additionally, avoiding repetitive movements over long periods of time can help, but if repetitive motions are part of a job or leisure activities, proper training is important.

Medications for osteoarthritis include a wide range of pain relievers and anti-inflammatory medications. Acetaminophen is generally a good choice for long-term use, but it's important to not exceed the recommended amount. Even though it is sold over-the-counter, it can cause serious liver or kidney damage if used incorrectly. If acetaminophen is not effective or if inflammation is present, acetylsalicylic acid (ASA) or other non-steroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen or naproxen may be recommended. Acetaminophen and some forms of ASA and NSAIDs are available without a prescription, but always check with a doctor or pharmacist before taking any of these medications. They can also have serious side effects and medication interactions if used incorrectly. Prescription narcotic pain relievers (such as various codeine derivatives) can help people who experience acute periods of pain, but they also can be harmful if not used correctly and may be habit-forming. Constipation is a common side effect of these medications if they are used regularly and you may need to treat this side effect. If other options have failed, local injections of corticosteroid medication into the affected joints are another treatment option. These injections should not be used too often and should not be given to certain people, such as people with infection or blood problems. For severe cases, surgery such as a hip or knee replacement may be needed. Relieving stress on joints is important to avoid further damage. Canes, walkers, splints, or crutches are sometimes needed to reduce the amount of body weight placed on certain joints.

Living and coping with arthritis, as with any chronic disease, can be difficult. It may affect daily activities slightly, or it can be more severe and extremely debilitating. Some people may benefit from counselling or support groups to deal with the challenges of living with arthritis. There are many resources available - it's important to take advantage of them. The Arthritis Society provides valuable resources.

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