LIVING WITH
OSTEOARTHRITIS
FALL 2022

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SCAN ME
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THE LATEST ON
OSTEOARTHRITIS

ARE YOU GETTING ENOUGH EXERCISE?
Federal guidelines recommend that all adults get 150 minutes a week of moderate to vigorous physical activity. According to a new study, only about 13% of people with knee osteoarthritis meet that recommendation. But many come close. On average, people diagnosed with osteoarthritis of the knee get about 130 minutes a week and 7,753 steps a day. Folks with hip osteoarthritis tend to move more. They average 189 minutes a week of moderate to vigorous physical activity and 8,174 daily steps.

SOURCE: Osteoarthritis and Cartilage

OSTEOARTHRITIS RATES ON THE RISE
Osteoarthritis cases are rapidly increasing around the globe, according to a new study. In the last 30 years, the number of people with the condition worldwide has more than doubled. While about 247.5 million people had osteoarthritis in 1990, that number skyrocketed to 527.8 million in 2019. That’s an increase of more than 113%. The researchers attribute the increasing global burden of this disease to a growing population, longer life spans, and rising rates of obesity.

SOURCE: Arthritis and Rheumatology

A PERSONALIZED EXERCISE PLAN
Exercise is a top recommendation for managing and improving joint stiffness and pain from osteoarthritis. But what kind of exercise? Doctors typically say that the best exercise program is whichever one you can stick with. But artificial intelligence (AI) may one day offer more specific guidance. Researchers in Finland have devised an application that considers a patient’s individual symptoms, such as pain severity and joint stiffness, and their various goals, such as a low-cost exercise program or a home-based program, to recommend the best type of exercise for that person’s osteoarthritis.

SOURCE: Annals of Medicine

Scan to visit our Arthritis Support Center

Scan me
For more ways to move your body, flip through this slideshow on Simple Exercises for Joint Health:

SOURCE: Arthritis Foundation
STATS & FACTS

By Sonya Collins
Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

32.5 million
Number of U.S. adults who have osteoarthritis (OA).

1 in 4
Number of women who develop some form of arthritis—most often OA.

#1
OA's rank among causes of disability in adults.

50
Age at which osteoarthritis becomes more common in women than men.

1 in 5
Number of men who develop some form of arthritis—most often OA.

1 in 2
Number of people with OA who are under 65.

SOURCES: CDC, Arthritis Foundation
START YOUR DAY OFF RIGHT WITH THESE TIPS

By Rachel Reiff Ellis
Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

When you have osteoarthritis, it’s common to feel stiff and sore right after waking. That’s because after a night of stillness, your joints can feel locked up. Doctors call this phenomenon “gelling,” a stiffness and pain that happens when you haven’t moved for a long period of time.

“Think of it like gelatin thickening,” says Amy S. Kehl, MD, rheumatologist at Cedars-Sinai Medical Center in Los Angeles. “Or like motor oil in a car that’s been sitting at cool temperatures.” Until your joints have a chance to “warm up,” she says, movement can be a challenge.

How severely you have it depends on your degree of arthritis and your personal pain threshold. “With osteoarthritis, that stiffness typically lasts less than 30 minutes in the morning,” Kehl says. With other inflammatory types of arthritis such as rheumatoid arthritis, Kehl says it can last much longer.

Here’s how you can manage morning stiffness and even prevent some of the pain from happening in the first place:

Try heat. Warmth keeps joints loose, flexible, and increases your circulation. “I’ve had patients who sleep with heated mattresses or use electric blankets,” Kehl says. To help with pain after you’re up, you can try paraffin wax treatments or heated gloves for your hands or a heating pad.

Shower right away. Get yourself into a hot shower (or bath) to start your day. You can do simple stretches while in the water such as wrist rolls and head tilts. Showering before a morning workout can also limber up your joints for exercise.

Get good exercise. When you keep your joints in motion during the day, they stay better lubricated and supported, which can help reduce pain later on. “Movement and exercise remain the main recommendation for osteoarthritis management,” Kehl says. You can do gentle stretches in bed before you even pull back the covers in the morning, to start your day with movement.

Position yourself with pillows. Depending on which joints are most affected by your arthritis, a pillow prop may help you sleep in a more comfortable position. “Some people with knee arthritis may benefit from using a pillow between the knees,” Kehl says. But she warns that you want to avoid putting yourself in a position that keeps you flexed or contracted through the night. “That can actually aggravate that stiffness,” she says.

Time your pain relief. Anti-inflammatory drugs, like NSAIDs, are the most common treatment for osteoarthritis pain and stiffness. If your doctor has cleared you to take an NSAID for pain relief, you may consider taking it later in the day. “Taking an anti-inflammatory with dinner can offer some relief overnight,” Kehl says.
HOW TO PROVIDE SUPPORT
CAREGIVING FOR SOMEONE WITH OSTEOARTHRITIS

By Rachel Reiff Ellis
Reviewed by Brunilda Nazario, MD,
Chief Physician Editor, Medical Affairs

When someone you care about has osteoarthritis, you can help them manage their symptoms and live a fuller life. The type of care your loved one needs will be unique to them, but in general, you can:

LEARN ABOUT THE DISEASE
It's easier to offer the right help if you understand what someone is going through. Educate yourself about the different causes, symptoms, and treatments of osteoarthritis. You can also go to doctor's appointments with your loved one and ask questions about their specific condition so you're well-equipped to care for their needs.

ASK THEM WHAT THEY NEED
Your loved one should have a say in their own care. Find as many ways as possible to include them in decision-making processes. “Always start by asking, ‘What are the important things each day that you want to make sure you can do? What things are difficult in your daily routine that we can find ways to make it easier on you?’” says Rebecca Gillett, occupational therapist in Centennial, CO, and director of content strategy and planning for the Arthritis Foundation.

When you know the challenges they face on a daily basis, you can better understand and guide them toward safe solutions.

SET UP A SAFE ENVIRONMENT
Joint pain can make it hard to get around the house. As a caregiver, you can scout out rooms and hallways for areas of improvement. Clear pathways of any obstacles that could increase their risk of a fall. In the bathroom, installing grab bars and using shower chairs can be helpful.

“You can move often-used items to lower shelves if reaching up is difficult, or move items higher to avoid the need to bend down low,” Gillett says. “You also want to remove any throw rugs that are a big hazard for trips.”

MONITOR MENTAL HEALTH
It's common for people with arthritis to experience stress, anxiety, and depression. “Many times, when someone with arthritis is limited by joint pain, they have to give up hobbies or things they love to do, so make sure you’re addressing their mental and emotional health,” Gillett says. You can help them think through different ways of finding joy daily and foster connections to other people with arthritis who can offer support and encouragement.

BUILD A TEAM
Although you may be clocking the most time with your loved one, you're one of several members of a team. Along with doctors and nurses, there are other professionals such as therapists and social workers who can help.

“I recommend having your loved one's doctor give a referral to an occupational therapist who can perform a home evaluation and guide you and your loved one in setting up the home for safety as well as learning some joint protection measures to reduce further joint pain,” Gillett says.

PROVIDING PAIN RELIEF
Rebecca Gillett, OT, offers some ways you can help when a loved one's joints hurt.

+ Guided stretches. Gentle movement of the joint and stretching can help stiffness. Many exercises can be done while seated in a chair.

+ Ice or heat. Depending on the type of arthritis and joint pain your loved one is having, you can use either ice or heat on the joint to alleviate pain.

+ Encouraging movement. Even if you go on a walk with them to the mailbox or just around the block, sometimes getting moving can help reduce pain from stiffness.
Osteoarthritis: Everything You Need to Know—Plus, How to Find Relief

What causes osteoarthritis?

OA can be caused by biological and environmental factors, including:

• **Age:** As you age, your risk of developing OA increases. Most of the time, symptoms occur in people over 50.

• **Weight:** Obesity places more pressure on the joints and causes inflammation, both of which increase the likelihood of developing OA and exacerbate the condition if you already have it.

• **Injury:** A break in your bone or tear in your cartilage or ligament.

• **Overuse:** Repetitive use of the same joint for a sport, activity, or job.

• **Genetics:** If you have OA in your family, you are more likely to develop it.

• **Gender:** OA is more common in women and often more severe.

How do I know whether I have osteoarthritis?

OA symptoms, including joint pain, stiffness, and limited mobility, often develop incrementally and worsen over time. This is why it’s important to talk to your doctor about lifestyle changes you can make to manage the condition.

How can I manage osteoarthritis?

If you have OA, there’s plenty you can do to manage the condition. Below are some tips.

- **Exercise:** Though you might feel inclined to avoid exercise because of your stiff and painful joints, movement is one of the most important ways to manage your OA. Exercise can help you maintain a healthy weight, enhance joint mobility and flexibility, reduce pain and stiffness, improve mood, and build muscle strength. According to the Arthritis Foundation, an exercise routine that targets OA symptoms should include strengthening exercises to build muscles, range-of-motion exercises and stretches for flexibility, aerobic and cardio exercises for energy and stamina, and balance exercises to help prevent falls.⁹¹

  - **Eat well:** A Mediterranean diet full of whole foods like fruits, vegetables, fish, lean meats, nuts, and beans can help reduce inflammation and maintain a healthy weight, which offers many benefits for people with OA. An additional four pounds of pressure is placed on your lower joints for every extra pound you carry.⁷

  - **Reduce your stress levels:** Stress can exacerbate your OA symptoms because it triggers the immune system’s inflammatory response. Unfortunately, it’s also true that OA can cause stress when its symptoms prevent you from doing what you love, disrupt your sleep or exercise routine, and cause chronic discomfort. To manage your stress, try talking to a therapist and maintain a daily exercise routine even if it needs to be adjusted during flare-ups.⁴

  - **Apply heat:** Easy, safe, and reliable, heat therapy has been shown to reduce stiffness in joints and relieve pain for people with OA. When you apply heat to a sore joint, your blood vessels expand to allow more blood and oxygen to reach the sore area. It’s helpful to apply heat first thing in the morning when joints tend to be stiff and painful. Try a warm shower or a heating pad.⁹

  - **SOME QUICK MOVEMENT TIPS:**

    • **Physical activity may help relieve arthritis pain**

    • **Movement may help to delay other chronic diseases,**
      like heart disease and diabetes

    • **You can adjust your activity depending on your symptoms**

    • **Some physical activity is better than none**

How do I know whether I need medication?

If you can’t manage your OA symptoms on your own, medication can help you find relief. Voltaren Arthritis Pain Gel is a topical NSAID that targets arthritis pain at the site. Voltaren is the first full-prescription-strength OTC topical NSAID that clinically proven to relieve joint pain, reduce stiffness, and improve mobility.

** WHAT CAUSES OA PAIN?**

**HEALTHY JOINT**

**OA JOINT**

**IF YOU EXPERIENCE...**

- Joint pain
- Stiffness
- Lack of mobility
- Enlarged or swollen joints

**YOU MIGHT HAVE OA**

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The joy of movement

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Use your mobile phone camera to activate the QR code for more information on managing your arthritis symptoms, including improvement checklist to help reduce pain!
LIVING WITH
OSTEOARTHRITIS

HERE’S HOW I LEARNED TO KEEP GOING IN MY 50s
By Denise Long
Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

I’m very active and love to exercise—home HIIT [high-intensity interval training] workouts are my favorite. Then about 2 years ago at age 50, I started having pain in my left elbow. I thought I had just injured myself through exercise overuse, but the pain persisted. I went to my doctor to have it checked. Because I see that doctor on a regular basis for an underactive thyroid condition, he knew about my regular exercise routine, so he also thought it was likely an injury.

UNEXPLAINABLE PAIN
But then my other elbow started hurting. And then my knees and ankles joined in. They often felt like they were going to break. It wasn’t long before all my joints were in pain, every single day. I was wearing supportive wristbands and taking pain relievers—even prescription strength ones—but nothing touched it. I got to the point where I hurt constantly. I couldn’t grip dumbbells and was losing muscle mass because I couldn’t exercise. I felt like I was undoing so much of what I’d worked toward in my fitness journey. It was incredibly discouraging.

Then at my next regular thyroid checkup, my doctor sent me to a rheumatologist who was able to diagnose the real issue: osteoarthritis. I was shocked. Sure, my parents dealt with some arthritic aches and pains, but they’re in their 70s, so I didn’t think it was something I might deal with myself, especially in my early 50s.

I remember at the consultation, the doctor showed me my X-rays and told me I’d probably have to give up the exercise I loved doing. I kind of shut down for a little after that. But once I got my mindset right, I started thinking, “OK. I can do this. I will
I work through it. I know there’s no cure and it’s not going away. I’ve just got to figure out what works for me and what I can handle for my body.”

**LEARNING TO MANAGE**

My doctor tried a whole host of treatments for my symptoms. I did 30 days of steroids two times a day. Not only did they not help, the side effects were awful. I was either having stomach issues or I just generally didn’t feel good. It felt like every 30 days we were trying something new that didn’t help enough to outweigh the unpleasant side effects.

I finally decided to go a different route. I stopped prescription medication and focused instead on taming inflammation in my body through diet, supplements, and movement. I can no longer do my routines all-out like I used to, but I’ve learned how to adjust to make them more arthritis-friendly so I can keep doing what I love. So far, I’ve been able to manage my symptoms this way.

Of course, I have days when I feel worse and days when I feel better, and I know there will likely come a day when I’ll need to try treatment again. I’ll be open to it when that day comes, but for now I want to avoid prescription medications as long as I can, because I’ll live with this condition the rest of my life.

In hindsight, I can see now that osteoarthritis was already there long before I knew what it was. I remember my ankles used to hurt terribly after a long day being out and about. I’d just stretch as much as I could and carry on, not really understanding the cause. It may have taken me a while to figure it all out, but here I am, 2 years post-diagnosis, living a full and active life.

**DENISE’S TIPS**

+ **Stay moving and mobile.**
  If you spend all your time sitting, your joints are going to just lock up and hurt.

+ **Try a massage.**
  I get one every other week to help relax the muscles around my joints and boost mobility.

+ **Adapt and modify.**
  You may not have to quit your favorite activities altogether, you just need to find arthritis-friendly ways to do them.
GET MOVING

THE BEST EXERCISES FOR OSTEARTHRITIS AND THE ONES TO AVOID

By Sonya Collins
Reviewed by Brunilda Nazario, MD,
WebMD Chief Physician Editor, Medical Affairs

When your joints are stiff and sore, exercise may sound like a terrible idea, but experts actually consider it the best nondrug treatment for pain and improved movement in people with osteoarthritis (OA).

“When we talk about OA, exercise is the first recommendation that comes to mind. It’s supported by pretty much all the guidelines,” says Sarah Burkhardt, DPT, a clinical physical therapist at CU Sports Medicine & Performance Center in Boulder, CO.

EXERCISE AS MEDICINE

Exercise can do you a lot of good when you have OA. For starters, gradually adding more weight and resistance to your joints through exercise improves the health of joints and tissue.

“When you do a movement, for example a bicep curl, you are giving some compression to the joint and muscle-joint structure, and that compression actually can improve the joint health, so exercise brings direct benefit to arthritis,” Burkhardt says.

But that’s not all. Research shows that exercise of almost any kind can help reduce pain, and it can also help alleviate depression and anxiety, which can often come along with osteoarthritis.

You could begin to feel these benefits in just a few weeks to a few months, Burkhardt says.

THE BEST EXERCISES

Simply put, the best exercise for people with OA is the one that you can stick with. What that exercise may be depends on your pain level, the joints affected, and your personal preferences and circumstances. You want to choose a type of movement that doesn’t hurt and hopefully brings you some joy.

“Whether you’re doing aerobic exercise, stretching, or strengthening, all have shown benefits, so it really comes down to what you want to do,” Burkhardt says.

Walking, cycling, swimming, and yoga are among Burkhardt’s top recommendations since they are low impact and easy to start.

EXERCISES TO AVOID

Everyone is different, but for many people with OA, too much impact on the joints causes pain. High-impact exercise that might hurt is anything that involves running or jumping, such as jogging, tennis, and basketball.

“Whether your joints can accept that impact depends on your fitness, your experience, and your symptoms,” Burkhardt says. “Listen to your body. If it’s painful, the joint may not be ready for that load.”

NEXT STEPS

If you’re ready to get moving, but don’t know where to start, Burkhardt says, “The simplest way to start is walking. If you’re able to start even with a 5-minute walk, that’s usually what I’d direct you to do.” It’s free and it’s available right outside your door—or even inside if you prefer.
WHY MOVEMENT MATTERS

TO MANAGE PAIN AND STIFFNESS, KEEP MOVING

By Rachel Reiff Ellis
Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

One of the most important things you can do to help ease the symptoms of osteoarthritis and improve function is to move your body on a regular basis. Adopting an individualized exercise program and losing excess weight are two of the most effective ways to relieve pain and stress on your joints, strengthen muscles around joints, and help prevent your disease progression.

Besides benefiting your joints themselves, exercise also boosts your mood and helps prevent other conditions linked to osteoarthritis, such as heart disease.

SUPPORTED JOINTS ARE HAPPY JOINTS

“When we move any of our joints, there’s joint fluid within the joint that helps to lubricate the structures of the joint,” says Maura Iversen, DPT, physical therapist in Fairfield, CT, and spokesperson for the American Physical Therapy Association. “And so movement helps that fluid to turn over.”

Another benefit to movement is the more you move, the more you maintain your muscle integrity, which helps stabilize joints. Your muscles, bones, ligaments, and tendons all work together. When one is weak, the others feel it, and your arthritis pain can get worse.

“If you think of joints like a bridge, the muscles and the ligaments are like the suspension of the bridge to keep everything together and properly aligned,” Iversen says.

By strengthening muscles, you strengthen the whole joint system.

WHAT KIND OF MOVEMENT DO YOU NEED?

The type of movement you do depends on how active you already are and your fitness level. The general recommendation for most people is to get some form of exercise that gets your blood pumping and heart rate up (cardio) for 30 minutes for at least 5 days a week and resistance training (weights or resistance bands) at least twice a week.

Slow and gentle exercises such as yoga or tai chi are especially helpful. As you move in multiple directions, your coordination and balance get a boost. “The meditative component also helps you relax, so it kind of loosens the muscles a little bit,” Iversen says. Lowered stress can help reduce inflammation in the body. While typical exercises are all ideal, Iversen says the ultimate goal is simply to prevent stretches of stillness.

“It’s just a matter of moving joints any way you can,” Iversen says. For example, if you use a wheelchair, or you’re on a plane for several hours, you can extend your legs or do ankle pumps to get your joint fluid flowing. At a desk all day? Set an alarm for every hour and just get up and walk—to the water cooler, down the hall, to the bathroom, anything that breaks up bouts of sitting.

START SMART

Maura Iversen, DPT, shares advice for moving well with osteoarthritis.

+ Pair up.
If you’re really self-driven, solo workouts may work fine, but if you need motivation, find a workout buddy to get you up and moving.

+ Don’t overdo.
Begin in moderation, especially if you’re someone who has been mostly sedentary.

+ Pay attention to pain.
One red flag is pain that persists for more than an hour after exercise.
If you are one of the 30 million Americans living with osteoarthritis (OA), you’re probably familiar with the pain and stiffness associated with the condition. What you may not know is how medications differ in their treatment of arthritic symptoms. When deciding what medicine is best for you, consider the factors below.

Oral medications
- Oral NSAIDs relieve arthritic pain by temporarily blocking the production of pain-signaling chemicals called prostaglandins.
- Acetaminophen works by elevating the body’s pain threshold so you feel less pain.

Topical medications
- Similar to oral NSAIDs, topical NSAIDs block the pain-signaling chemical prostaglandins. However, a topical like Voltaren Arthritis Pain Gel allows you to target the pain by applying the medicine directly to the troublesome joint.¹
- Topicals that feature the ingredient capsaicin, a compound found in chili pepper, provide a sensation of warmth, itching, or burning as a diversion.
- Other counterirritants such as menthol, camphor, and methyl salicylate, alter pain sensations by creating cooling, heating, or tingling sensation to mask the pain.

Alternatives
- CBD products have not been clinically proven, or FDA approved to relieve OA pain, unlike oral and topical NSAIDs or acetaminophen.

Voltaren Arthritis Pain Gel compared with other topicals:

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