

Taking control of your Back Pain

A practical guide to treatments,
services and lifestyle choices



How can this booklet help you

This booklet is designed for people who have back pain.

It will help you understand back pain so that you can better manage your symptoms and continue to lead an active and healthy life.

This booklet offers information and practical advice to help you:

- understand what back pain is and what it means for you
- work with your healthcare team to manage and reduce symptoms
- understand how your medicines can help in the short and long term
- choose treatments and activities that are appropriate to your situation

- find support and additional information to cope with the emotional and lifestyle impact of back pain.

The information inside is based on the latest research and recommendations, and has been reviewed by Australian experts in the field of arthritis to make sure it is current and relevant to your needs.

So go ahead — take control of your back pain!

© Copyright Arthritis Australia 2015. Reviewed September 2015

Proudly sponsored by an unrestricted educational grant from:



UCB Australia Pty Ltd ABN 48 005 799 208
Level 1, 1155 Malvern Road, Malvern VIC 3144

Contents

Understanding back pain	4
Understanding your spine	4
What are the symptoms of back pain?	6
Why do I have back pain?	6
How long does back pain last?	8
Should I see a doctor?	8
What will happen when I first see someone for my back pain?	9
Will I need an x-ray or scan?	10
Treatments for back pain	12
How can you help?	12
When you first get back pain	12
When back pain persists or returns	13
Are injections helpful?	19
Will an operation fix my back pain?	19
Preventing back pain from returning	20
Seeking support	22
Who can help?	22
What about information from websites?	22
Glossary of terms	23
Useful resources	24



Australian Rheumatology
Association



Medical and consumer consultants

Tanya deKroo, Information Resources Coordinator, Arthritis Australia

Wendy Favorito, Consumer Director, Arthritis Australia Board

Dr Simon Burnet, Rheumatologist and Member of Arthritis Australia Scientific Advisory Committee

Prof David Hunter, Rheumatologist and Member of Arthritis Australia Scientific Advisory Committee

Matthew Jennings, Physiotherapist/Director Allied Health, Liverpool Hospital

Lynne Newcombe, Health Educator, Arthritis Queensland

Karen Smith, Health Services Manager, Arthritis South Australia

Assoc Prof Peter Youssef, Rheumatologist and Chair of Arthritis Australia Scientific Advisory Committee

Understanding back pain

Put simply, back pain can be a real pain.

It can stop you from being able to move, work and get a good night's sleep. Even the simplest of everyday tasks, like getting out of bed, can be unbearable.

When you've got back pain you may also feel irritable or short-tempered. You might worry that you're going to have this pain for the rest of your life and feel helpless to do anything about it.

It can feel like back pain is controlling your life. But, whether this is the first or the fiftieth time you've had back pain, there are many things you can do to get on top of it and lessen the chance of it happening again.

Understanding your spine

Your spine, or backbone, is one of the hardest working parts of your body. It keeps you upright when you're sitting and standing, supports your head and upper body, allows you to bend and move, and protects your spinal cord.

The spine is made up of 24 small bones stacked on top of each other.

'The worst thing is that I can't get away from it...it hurts to sit down, stand up, bend over, lie down. I can't sleep, I can't work, I can't even bend down to put on a pair of socks. That pain just gnaws away at you. It really messes with my head.' **Michael, 54**

These bones are called **vertebrae**. Between the vertebrae are flat, round intervertebral **discs**. These discs have flexible outer rings with a jelly-like centre that harden as you get older. They act as shock absorbers for the spine, as well as allowing your spine to move.

Connecting each vertebrae are small joints called **facet joints**. These joints also give the spine the ability to bend and move.

Strong ligaments (bands that run between bones) and muscles provide support and stability to the spine.

A small tunnel is created by the vertebrae to protect the spinal cord as it threads down through the middle of the spine. The spinal cord contains nerves that connect the brain to all the other parts of the body. Nerves branch out from the spinal cord through spaces between each of the vertebrae. These nerves are called **nerve roots**.

Your spine is classified into three main regions:

- The **cervical** spine, or neck, is made up of the seven vertebrae below your head.
- The **thoracic** spine, or upper back, is made up of 12 vertebrae that connect to each of your ribs.
- The **lumbar** spine, or lower back, is made up of five larger vertebrae. Sitting below the lumbar spine is a triangular shaped bone called the sacrum that connects to your pelvis.

You may hear your doctor or health professional referring to parts of your spine using letters and numbers. The letters refer to the region of the spine, with C meaning the cervical spine, T meaning thoracic, and L meaning lumbar.



The number tells you which of the vertebrae in that part of the spine is affected. For example, C6 refers to the sixth bone in the neck. L4/5 refers to the area between the fourth and fifth bone in the lumbar spine.

What are the symptoms of back pain?

Back pain may be felt as a sharp pain, ache or spasm in the lower part of the back, or in the hips/buttocks. Your back may feel stiff, making it difficult to turn or bend.

Sometimes pain can also travel down one or both of your legs. You may also notice tingling (pins and needles) or numbness in your legs and/or feet. These symptoms can be caused by irritation of the nerve roots (see Figure on previous page). An example of this type of pain is **sciatica**, caused by irritation or compression (squeezing) of the sciatic nerve. The sciatic nerve runs all the way from your back, through your buttocks, down the back of your thigh and into your foot and toes. Sciatica is pain, numbness and/or a tingling sensation felt along the sciatic nerve.

Why do I have back pain?

Back pain is different to many other types of pain. Most of the time it is impossible to find one particular thing that is causing the pain. Often, it is due to a combination of different factors, such as:

- poor posture
- muscle weakness (back and abdominal muscles)
- muscle strain or spasm
- putting extra pressure on the spine, for example bending and twisting, by lifting something awkwardly or sitting for long periods
- poor fitness or low physical activity levels
- being overweight/obese.

You may feel frustrated or worried about not knowing the exact cause of your symptoms. However it is rare for back pain to be caused by a serious medical problem and severe pain does not necessarily mean there's a serious problem. Research has also shown you do not need to know the cause of back pain to be able to deal with it successfully.

In some cases, you may be told your back pain is caused by a certain condition, such as:

- **Spondylosis:** this is another name for 'wear-and-tear', or degeneration, of the spine. As we get older, the discs in our spine get thinner and less flexible. Small spurs (lumps) of bone called osteophytes may also form on the edges of the vertebrae. Most people will have some degree of wear and tear as they age although not everyone will have pain. Finding signs of degeneration on an x-ray does not predict whether you will ever get back pain or how severe it will be.
- **'Slipped disc':** This is more accurately known as a prolapsed or herniated disc. This occurs when one of the discs that sit between the bones of the spine is damaged or weakened. The disc does not come out of place but bulges and may press on the nerves that come out from the spine. It can also cause pain, tingling and/or numbness into your leg(s) and feet.

- **Osteoporosis:** Thinning of the bones does not cause pain but can lead to fractures (breaks) of the bones in the spine. The most common are compression fractures where the bone (vertebra) loses height or collapses.
- Recent injury to the bones and soft tissues of the spine caused by trauma.

It is rare for back pain to be caused by more serious conditions such as:

- Inflammation of the spine (spondylitis): Certain types of arthritis cause inflammation and stiffening of the joints in the spine, for example **ankylosing spondylitis** and **psoriatic arthritis**
- An infection
- A tumour.









How long does back pain last?

Fortunately most people recover from back pain over a short period of time, often needing little treatment. Nine out of ten people will have recovered within two months. However half the people who get back pain will

have pain again within a couple of years. Research tells us that if you return to your activities sooner, move as normally as possible and do more exercise you are much less likely to get back pain again. And, if you do it happens less often.

Should I see a doctor?

Most people with back pain will not need to see a doctor as most cases get better within a few weeks without treatment. However, you should see your doctor as soon as possible if you experience any of the following:

-  pain that does not improve after a few weeks, or starts getting worse
-  difficulty passing or controlling urine
-  loss of control of your bowels
-  numbness around your back passage or genitals
-  unsteadiness or difficulty walking
-  tingling (pins and needles), numbness or weakness in one or both legs
-  feeling unwell with sweats, chills, fevers or weight loss
-  back pain if you know you have osteoporosis.

You should also talk to your doctor if your back pain:

- is severely affecting your ability to move, exercise, work or sleep
- affects your general health, causing you to gain weight, have falls or develop other health problems
- makes it difficult for you to manage any other health conditions you may have, such as diabetes or heart problems
- is affecting your mood, making you feel depressed, anxious or angry
- is causing you to take strong pain relieving medicines continuously for more than a few days.

What will happen when I first see someone for my back pain?

Many people are unsure what to expect when they go to see someone for their back pain.

Your doctor, or other health professional, will firstly ask you questions about your pain and other symptoms, such as:

- When did your back pain start?
- Had you been doing anything different to normal in the time leading up to your back pain starting?
- Where is your pain? Do you have any feelings of numbness or tingling in your legs or feet?
- Have you had back problems in the past?
- How would you describe the pain?
- What makes the pain better or worse?

They may look at your posture, how well you can move and bend or twist your back, and press on your back to find the area that hurts. If you have tingling, numbness or pain into your legs they should also test how well

Inflammation of the spine?



There are a few signs that back pain may be due to inflammation of the spine rather than other causes. Talk to your doctor if you are under 40 years of age and you notice your back pain:

- Starts gradually
- Lasts more than three months
- Eases with exercise
- Feels worse after rest
- Wakes you during the night, particularly in the early hours of the morning
- Causes stiffness of your back that takes longer than 30 minutes to ease after getting up in the morning.

the nerves in your legs are working by checking your muscle strength and the sensation in your skin (by lightly touching your skin at certain spots on your legs and feet). They may also check your reflexes, which involves gently tapping on your knee and/or ankle with a rubber hammer.

Will I need an x-ray or scan?

Most people with back pain will not need special tests, such as x-rays, blood tests and scans, as they are generally not useful in finding out the cause of your back pain. Research shows most scans of people with back pain find no abnormalities or only minor changes of 'wear and tear' (arthritis). These types of changes are also found in people without back pain.

X-rays and scans do not improve your pain or help you to recover.

Your doctor may send you for a scan if:

- you have severe or worsening weakness in the muscles in your leg or foot
- you have signs of pressure on nerves (such as pain travelling down your leg) for more than four to six weeks and is severe enough to consider surgery
- a serious underlying condition is suspected.

An MRI (magnetic resonance imaging) scan or CT (computerised tomography) scan may be able to give more information about the cause of your symptoms in these cases.

X-rays and scans are generally not useful in finding out the cause of your back pain, do not improve your pain or help you to recover.



Treatments for back pain

The good news is that back pain can be effectively managed - and a team approach is the best way to combat it. This involves you and your healthcare professionals together with support from family, friends and community organisations.

How can you help?

Remember, you are the most important member of your healthcare team. By understanding your condition and how to stay on top of it, you can carry on living a normal life.

Work closely with your healthcare team to develop a management plan for your back pain, which may include medicines and other treatments. This will help you be actively involved in your care and decision-making about treatments. It will allow you to take control, keep you motivated and help you to stay positive. With the right treatment, back pain doesn't have to get in the way of working, travelling, relationships, hobbies and leisure activities.

Understand how your treatments will help and how to get the most out of them. Your healthcare team can

address your concerns and provide practical advice. Contact your State/Territory Arthritis Office on 1800 011 041. They can provide information and introduce you to support groups, exercise programs and other arthritis management services. See Arthritis Australia's range of information sheets at www.arthritisaustralia.com.au

When you first get back pain

There are many things you can do to get the pain under control:

- **Get moving.** Your back is designed for movement and the sooner you get back to your normal activities, the sooner you are likely to recover from back pain. You may need to do a bit less or avoid certain activities when your pain is bad and build back up to normal activities slowly as the pain begins to ease. But resting, particularly resting in bed, for more than a couple of days may do more harm than good. If you rest for too long, the muscles in your back and abdominal area become weak and this can make your back pain worse.

- **Use medicines to manage the pain.** Most people are able to get their pain under control with simple pain relievers and anti-inflammatory medicines. See page 16 for information and always talk to your doctor or pharmacist about the safest way to use medicines.
- **Heat/cold.** The benefits of heat and cold for back pain are not well proven in research but are easy to try at home and safe when used carefully. Try placing a heat pad or ice pack over the painful area for 15 minutes and see what works best for you. You can alternate heat or cold treatments and repeat throughout the day. Make sure the temperature of your skin has returned to normal before re-applying. Always have a layer of clothing or a thin towel between the heat/ice pack and your skin to avoid burns or irritation.
- **Take care of your back.** While you are recovering from back pain it is important to be careful about putting extra stress or strain on your spine. Change position more regularly, try to have good posture when you are standing and sitting

and avoid awkward tasks and heavy lifting. When sleeping, try to lie on your side with a small pillow between your knees. If you sleep on your back, try putting a pillow or rolled towel under your knees.

When back pain persists or returns

If your pain does not start to ease with the simple treatments listed above or comes back again, you may need to consider extra ways to manage your pain.

Exercise

Exercise is the most important thing you can do to help yourself if you have back pain. However, it can be difficult to get started and you may feel worried about making your pain worse. Consider getting advice from a physiotherapist or exercise physiologist. They can teach you the right exercises to do and ensure you are doing them correctly to prevent injury.

See a health professional

If you are finding it difficult to get your back pain under control by yourself, you may find it useful to see a health professional such as a physiotherapist for advice. Depending on your symptoms, they may provide treatments such as:

- Advice about posture, safe lifting and adjustments at work to reduce the strain on your back
- Providing a tailored exercise program for your ability
- ‘Hands on’ treatments such as manipulation of your spine, massage and muscle stretching.

Different people will have different preferences about the type of health professional or therapist they prefer to see. There is no ‘right’ or ‘wrong’ therapist but ensure your health practitioner is qualified and registered. You can check the registration of physiotherapists, chiropractors and osteopaths with the Australian Health Practitioner Regulation Agency (AHPRA) at www.ahpra.gov.au or by calling 1300 419 495. It is also important to tell your GP about the health professionals you are seeing.

How do I find a health professional?

- Your GP or specialist can provide a referral, or you can contact a private therapist directly (see page 22 for information about finding a private therapist).
- If you have private health insurance, your health fund may cover part of the cost of seeing certain health professionals.
- If your GP refers you to a health professional as part of a care plan, you may be able to have five sessions per year funded by Medicare. Ask your GP for more information.
- Many health professionals are available in the public health system (such as at a community health centre or public hospital). There is often a waiting list and you will usually need a referral from your GP. Their services are usually free or low cost.

Tips to get you moving

- Start slowly and gradually increase the amount of exercise you do. When you first start do less than you think you will be able to manage. If you cope well, do a little bit more next time and keep building up gradually.
- Your back may feel a little sore when you first start exercising. Don't panic! This is often very normal and you will usually feel less soreness over the next few weeks as you start getting stronger. If you find exercise continues to cause severe pain or increases your pain beyond what is normal for you, it might be useful to see a physiotherapist or exercise physiologist. They can suggest safe exercises and make sure you are doing your exercises correctly and at the right intensity to prevent injury.
- Talk to your doctor about how to time your pain relieving medicines with exercise to help make your exercise session more comfortable when you are first starting.
- Pick an activity that you enjoy and is convenient for you to do. Any activity that gets you moving can help your flexibility and strength, including:
 - Swimming
 - Water exercise, such as walking in water, water exercise class or doing physiotherapy exercises in the pool
 - Walking
 - Yoga, pilates or tai chi
 - Strength training with supervision, using weights, resistance bands or gym machines.

Make the most of medicines

There are several types of medicines that may help. You may need to try different types, combinations and timing of medicines to find the best way to keep your pain under control. In some cases pain can be relieved by taking the medicine just when it is needed. Sometimes your pain may be better controlled by taking the medicine regularly. Always ask your doctor or pharmacist for advice on the best way to use medicines to control your back pain, particularly if you are taking other medicines or have other health problems.

Some of the medicines used for back pain include:

- **Simple pain relievers, such as paracetamol:** These medicines can be bought without a prescription and can help with mild to moderate pain. Paracetamol has few side effects when taken at the recommended dose. However taking more than the recommended daily dose can potentially cause severe liver problems. Ask your pharmacist for advice.
- **Non-steroidal anti-inflammatory drugs (NSAIDs):** These medicines, such as ibuprofen and naproxen, reduce pain and swelling. Some NSAIDs can be bought over-the-counter while others require prescriptions. It is usually recommended to take



anti-inflammatory medicines at the lowest effective dose for the shortest period of time and should always be taken with food. Check with your doctor or pharmacist before taking these medicines as they can cause side effects for some people.

- **Stronger pain relievers:** These medicines usually require a prescription from your doctor or can only be bought from a pharmacy. These medicines have a higher risk of side effects so your doctor will usually only suggest you use them for short periods if you are having severe or ongoing pain that is stopping you from exercising, sleeping or working. If your pain is causing you to take these strong pain relieving medicines continuously for more than a few days, talk to your doctor about your risk of side effects and other ways you may be able to get your pain under control. Examples of stronger pain relievers include codeine, tramadol and morphine-based medicines (opiates).
- **Medicines to relax muscles and help with sleep:** These medicines

should also be used for short periods due to the risk of side effects. If your pain is causing you to take these types of medicines for more than a few days, talk to your doctor about other ways to get your pain under control.

- **Creams and gels:** You may find certain ointments and creams helpful to ease pain. There are many creams and gels that can be rubbed onto your back, including ones that contain anti-inflammatory medicines. Others may numb or heat the skin to reduce the feeling of pain.

Complementary therapies

Complementary, alternative or 'natural' therapies are any therapies or treatments that are not part of the usual medical treatment of a condition. Examples of complementary therapies are herbal medicines, vitamins and mineral supplements, acupuncture and massage.

There are many complementary therapies on the market that claim to relieve back pain. You will hear about treatments from friends,



family members, neighbours, on the internet or news, and in magazines. Some people certainly report feeling better when they use complementary therapies. However the main criticism of these types of therapies is that most have little, or no, scientific proof that they work.

Acupuncture and massage can be useful for longer-term back pain. Check that your therapist is qualified and has had experience working with back pain.

Several herbal medicines (Devil's Claw, White Willow Bark and Cayenne) may help to relieve pain but have only been tested in short-term (6 week) studies. It is unclear whether any of these herbal medicines, or others, are safe and useful for long term use.

Always talk to your doctor or pharmacist about your complementary medicines as even over-the-counter or 'natural' medicines can have side effects or interact with other medicines you might be taking.

Referral to a specialist

If your pain is difficult to get under control, your GP may refer you to a specialist, such as a rheumatologist (joint specialist), orthopaedic surgeon (bone specialist), neurologist (nerve specialist) or neurosurgeon (doctors who operate on nerves and the spinal cord) for further advice or treatment. Your GP may also suggest referring you to a pain management program to help you get back on track.

Are injections helpful?

Most people with back pain will not need an injection (needle inserted into the area around the spine). Your doctor will generally recommend trying simpler pain-relieving treatments, such as medicines, exercise and other treatments listed on page 12, before considering injections. If you have severe or ongoing pain that is greatly restricting your lifestyle despite these other treatments, your doctor may recommend a spinal injection. These injections deliver pain-relieving medicines, such as corticosteroids, directly into or near your spine. Injections may not always help but, if successful, the pain relief

is usually short-term, lasting from several days or weeks up to three months. There are many different types of injections and the type of injection you have will depend on your symptoms. Talk to your GP or specialist for further information.

Will an operation fix my back pain?

Very few people with back pain will need an operation. An operation is usually only recommended in serious cases when your doctor finds you have symptoms that mean a nerve(s) in your back or your spinal cord is at risk. Examples of this include loss of control of your bladder or bowel or weakness in the muscles of your leg(s) or feet. In most other cases your doctor will usually recommend you try to manage your symptoms with medication, physiotherapy, exercise and other treatments for at least six to twelve months before considering surgery. During this time, most people will find they can get their back pain under control without needing surgery. Talk to your doctor or physiotherapist for more information.

Preventing back pain from returning

Once you've had back pain, making a few simple changes to your lifestyle can help keep back pain from controlling your life. Here are a few things to consider:

- **Get moving:** exercise regularly and try to include exercises that strengthen your leg, back and abdominal muscles. See a physiotherapist or exercise physiologist to ensure you are doing the right exercises and have the correct technique to avoid injury.
- **Look after your back:** think about how you are lifting heavy items. Try to keep your back straight and bend at your knees and hips when picking up items.
- **Maintain a healthy weight:** being overweight can put extra stress on your back. Eat a healthy, balanced diet and seek advice from a dietitian if you are finding it difficult to lose unwanted kilograms.
- **Be aware of your posture:** try to maintain good posture when you are sitting and standing. Take regular stretch breaks if you are sitting or standing for long

periods of time. If you are sitting at a desk at work, ensure your work station and chair are well set up to promote good posture and best support your back.

Avoid smoking, reduce stress and try to have a healthy, balanced lifestyle: these lifestyle changes can make a big difference in your overall health and ability to keep pain under control. Ask your family, friends, doctor or health professional to support your lifestyle goals. This will help keep you motivated as we know making these changes can be difficult.

Making a few simple changes can help keep back pain from controlling your life.



Seeking support

Who can help?

There are many people who can help you deal with the emotional side of back pain. Your first step is to try to talk honestly with your partner, parents or children about how you feel. Give them a chance to talk too – they might have worries or feel that they don't know enough about your condition and how it is affecting you.

Visit your GP if you are worried that unwanted feelings are too strong or have been there for a long time. Your GP may be able to suggest ways of coping, or may prescribe medicines if you are especially worried or depressed.

They may also refer you to a counsellor or psychologist, who can talk to you about your worries, feelings and moods, then suggest practical ways to work through them. A psychologist can also help you learn relaxation and pain coping skills so you can better manage your pain. If you want to contact a psychologist directly, call the Australian Psychological Society on 1800 333 497 or visit www.psychology.org.au

beyondblue provides information and advice about depression, anxiety,

available treatments and where to get help. Visit www.beyondblue.org.au or call 1300 224 636.

Lifeline provides a 24hr confidential telephone crisis support service for anyone across Australia experiencing a personal crisis. Call 13 11 14.

What about information from websites?

The web can be a useful source of information and support. However, not everyone who puts information on the web is a qualified health practitioner.

Some organisations make unrealistic promises in order to sell their products. Treatment options and practices from overseas may also not be relevant or approved in Australia. Always check information from the web with a trusted member of your healthcare team.

The Australian Government's Healthdirect www.healthdirect.gov.au is an excellent starting point for web searches, as every site that HealthInsite links to has been checked for quality and accuracy of information.

Glossary of terms

Corticosteroid	core-tick-o-ster-oyd	A type of medicine that is very effective in reducing inflammation in the joints.
Dietitian	die-et-ish-un	A health professional who can help you with a healthy diet and weight loss.
Exercise physiologist	fizz-ee-o-lo-jist	A health professional who can suggest an exercise program tailored to your health and ability.
Inflammation	in-fla-may-shun	The body's response to damage or infection. Inflammation can cause pain, swelling, warmth, redness and difficulty moving the joint.
Intervertebral discs	in-ta ver-ta-brul discs	Flat, round discs that sit between the bones of the spine. They act as shock absorbers for the spine, as well as allow the spine to move.
Lumbar spine	lum-ba spine	The five bones that make up the lowest part of your spine, also known as your lower back.
NSAID	en-sayd	A group of medicines known as non-steroidal anti-inflammatory drugs. These can reduce inflammation and pain.
Physiotherapist	fizz-ee-o-ther-a-pist	A health professional who uses treatments to reduce pain and keep your spine mobile, and can suggest exercises for you to use at home.
Rheumatologist	roo-ma-tol-o-jist	A doctor who is a specialist in treating problems of the joints such as gout.
Sciatica	sy-a-ti-ka	Pain, numbness and/or a tingling sensation that is felt along the sciatic nerve as it runs from your back, down the back of your thigh and into your foot and toes.
Vertebrae	vert-a-bray	The 24 small bones that stack on top of each other to make up the spine.

Useful resources

Australian resources

For access to quality online information about back pain, start at Healthdirect

www.healthdirect.gov.au

For advice on healthy eating and appropriate exercise, visit Healthy Active www.healthyactive.gov.au

To find a physiotherapist, contact the Australian Physiotherapy Association

www.physiotherapy.asn.au

Ph: 1300 306 622

To find an exercise physiologist, contact Exercise and Sports Science Australia

www.essa.org.au

Ph: (07) 3862 4122

To find a dietitian, contact the Dietitians Association of Australia

www.daa.asn.au

Ph: 1800 812 942

To find a psychologist, contact the Australian Psychological Society

www.psychology.org.au

Ph: 1800 333 497

International resources

The public area on the website of the American College of Rheumatology contains many useful resources

www.rheumatology.org/public

Arthritis Research UK also provides a wide variety of information for people with arthritis

www.arthritisresearchuk.org

Please keep in mind that some issues and treatments from overseas may not be relevant in Australia.



Notes

My contact details

My name:

Telephone:

My GP

Name:

Telephone:

My specialist

Name:

Telephone:

My support team

Name:

Telephone:

Name:

Telephone:

My medicines

Name	Dosage	Instructions

Arthritis Australia

Arthritis Australia is a not-for-profit organisation that provides support and information for all Australians affected by arthritis.

Contact your State/Territory Arthritis Office to find out about the range of awareness and education programs, support services and resources available.

Arthritis Helpline: 1800 011 041 www.arthritisaustralia.com.au

Arthritis ACT

Level 2B Grant Cameron
Community Centre
27 Mulley Street Holder ACT 2611
PO Box 4017 Weston Creek ACT 2611

Arthritis New South Wales

Suite 1.15 32 Delhi Road
North Ryde NSW 2113
Locked Bag 2216 North Ryde NSW 1670

Arthritis Northern Territory

Shop 18 Rapid Creek Business Village
48 Trower Road, Millner NT 0810
PO Box 452 Nightcliff NT 0814

Arthritis Queensland

WOTSO Chermiside, Level 2 Westfield
Chermiside, Chermiside QLD 4032
PO Box 2121 Lutwyche QLD 4030

Arthritis South Australia

111A Welland Avenue
Welland SA 5007

Arthritis Tasmania

19A Main Road
Moonah TAS 7009
GPO Box 1843 Hobart TAS 7001

Arthritis Victoria

263–265 Kooyong Road Elsternwick
VIC 3185
PO Box 130 Caulfield South VIC 3162

Arthritis Western Australia

17 Lemnos Street
Shenton Park WA 6008
PO Box 34 Wembley WA 6913



Arthritis Australia Level 2, 255 Broadway Glebe NSW 2037

Mail: PO Box 550 Broadway NSW 2007

Phone: 02 9518 4441 **Fax:** 02 9518 4011

Email: info@arthritisaustralia.com.au

Web: www.arthritisaustralia.com.au

Arthritis Helpline: 1800 011 041