Taking control of your Osteoarthritis

A practical guide to treatments, services and lifestyle choices





How can this booklet help you

This booklet is designed for people who have osteoarthritis.

It will help you understand your condition 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 osteoarthritis is and what it means for you
- work with your healthcare team to reduce symptoms such as joint pain and stiffness
- choose activities that are appropriate to your situation

- understand how your medicines can help in the short and long term
- find support to cope with the emotional and lifestyle impacts of osteoarthritis.

The information inside is based on the latest research and recommendations. It has also been reviewed by Australian experts in the field of arthritis to make sure the contents are current and relevant to your needs. So go ahead — take control of your osteoarthritis!

© Copyright Arthritis Australia 2009. Reviewed November 2016. Original booklet produced by: **Indegene Australia Pty Ltd**

Contents

Understanding osteoarthritis	
Who can help?	8
Working with your GP	10
Seeing a rheumatologist	11
Other health professionals	12
Healthy moves for your joints	15
Making the most of medicines	19
What other treatments can help?	22
Seeking support	25
Glossary of terms	28
Useful resources	29



Australian Rheumatology Association



Medical and consumer consultants

Dr David Hunter, Professor of Rheumatology, University of Sydney Dr Paul Bird, Rheumatologist Ms Tanya deKroo, Information Resources Coordinator, Arthritis Australia Dr Mona Marabani, Rheumatologist and President of Arthritis Australia (2007-2010) Ms Jean McQuade, Manager, Health & Education Services, Arthritis WA Dr Peter Nash, Rheumatologist Mrs Judith Nguyen, Arthritis Australia Board Member Dr Peter Youssef, Rheumatologist and Chair of Arthritis Australia Scientific Advisory Committee

Understanding osteoarthritis

What is osteoarthritis?

Osteoarthritis (OA) is the most common form of arthritis, affecting more than 1.8 million Australians. It can appear at any age, but tends to occur more commonly in women and in people aged over 40 years or those who have had severe joint injuries.

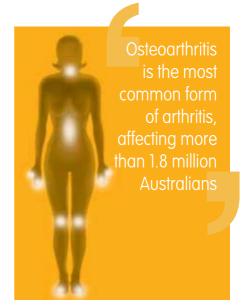
It is a condition that affects the whole joint including bone, cartilage, ligaments and muscles.

Osteoarthritis may include:

- inflammation of the tissue around a joint
- damage to joint cartilage this is the protective cushion on the ends of your bones which allows a joint to move smoothly
- bony spurs growing around the edge of a joint
- deterioration of ligaments (the tough bands that hold your joint together) and tendons (cords that attach muscles to bones).

Whatever the cause, the symptoms of OA can include joint pain, swelling, stiffness and, in some cases, a feeling that the joint might lock or give way.

Osteoarthritis is not the same as osteoporosis — a condition where



the bones become thin and are more likely to break — although sometimes people can have both conditions.

OA tends to come on slowly, over months or even years. The joint pain or stiffness is usually worst with activity initially but can be more constant in later disease. These symptoms may affect your ability to do normal daily activities, such as walking, climbing stairs and opening jars.

The symptoms of OA can vary from person to person and depend on which joints are affected. Many people have OA without noticing any symptoms. For those people who do experience symptoms, the most common sites are the fingers and the joints that support the weight of your body — your spine (backbone), hips and knees (see the diagram).

What causes osteoarthritis?

Research shows there are some things that may put you at more risk of developing osteoarthritis (OA) in certain joints, such as:

- Knees: being overweight; having a previous knee injury; jobs involving kneeling, climbing and squatting.
- Hips: being overweight; having a previous hip injury; jobs involving lifting heavy loads (including farming); having a history of OA in the family.
- Hands: having a history of OA in the family; occupation; injury, being overweight.

Growing older also increases the likelihood of developing osteoarthritis.

Whatever the cause, the main problem with OA is the pain, stiffness and loss of mobility that comes with the disease. This can stop you from doing the things you need to do or want to do.



Being overweight increases your risk of osteoarthritis. The heavier you are, the higher the risk.

How will osteoarthritis affect me?

Osteoarthritis (OA) affects different people in different ways. For many people, OA may not cause significant problems, or can be easily managed with exercise and medication. Your symptoms may not worsen over time, but sometimes the condition will slowly progress, leading to increased pain and reduced function.

If not managed effectively, the symptoms of osteoarthritis can limit your ability to complete normal tasks or to move about, reducing independence and enjoyment of life. A loss of mobility may also lead to depression and/or weight gain, which can then lead to a cycle of worsening pain and function. However, only a relatively small number of people have to give up work or home duties on account of their osteoarthritis.

While there is no 'cure' for osteoarthritis, early and ongoing treatment will help reduce symptoms and maintain your ability to use the affected joints. Medical management includes medicines, joint injections and lifestyle advice — these are discussed in detail in the following sections. Joint replacement surgery may be an option for people who have significant damage to their joints, particularly their hips and knees.

> While there is no 'cure' for osteoarthritis, early and ongoing treatment will help reduce symptoms

How will my doctor diagnose osteoarthritis?

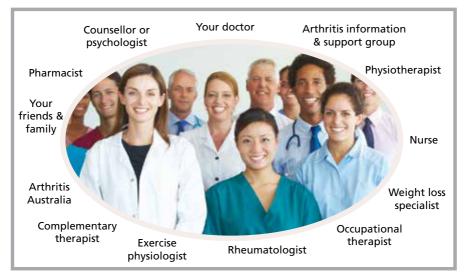
Doctors assess many factors to help them decide whether a person has osteoarthritis. Your GP or specialist may:

- talk to you about your symptoms, including where and when you feel joint pain, and whether the pain feels better or worse when you move
- ask if there is any family history of joint problems, and whether or not the sore joint has been previously damaged at work or during sport, for instance
- carefully examine your sore joints, which may include moving them and feeling or listening for any signs that the bones are rubbing against each other
- send you to a radiologist for an x-ray of the affected joints
- drain some fluid from your joint if it is swollen and send a sample of the fluid for analysis. This does not happen frequently.

Doctors assess many factors to help them decide whether a person has osteoarthritis



Who can help?



The good news is that OA 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.

Contact your State/Territory Arthritis Office on 1800 011 041 for guidance. They can provide information and introduce you to support groups, exercise programs and other arthritis management services.

Arthritis Australia has a website www.MyJointPain.org.au to help you manage your osteoarthritis. By answering a few questions at the start, the website will provide you with recommended management approaches that will be most helpful to your situation.

The key to managing your OA is by staying in control and the website encourages you to do this by returning every week to report your pain and weight. Every month, you'll be asked additional questions which will help you see what treatments are working and also allow the website to provide other guidance.

You can also find healthcare providers in your area who can support you along with lots of detailed information and videos.

Arthritis Australia also has a range of information sheets about treatments for osteoarthritis available at www.arthritisaustralia.com.au

How can you help?

Remember, you are the most important member of your healthcare team. By understanding your condition and learning how to manage it, you can carry on living a normal life. Work closely with your healthcare team to develop a management plan for your arthritis, that may include medicines and other treatments. This will help you be actively involved in your care and decision-making about treatments. OA doesn't have to get in the way of working, travelling, relationships, pregnancy or parenting. Believing that you can improve your condition isn't just wishful thinking – it actually helps reduce your symptoms. People who believe that they are in control of their OA, and become actively involved in managing it, report less pain and better function than people who are less involved.

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 for more about treatments for osteoarthritis.

Understand how your treatments will help and how to get the most out of them



9

Working with your GP

How can my GP help?

Your GP is an important partner in managing your osteoarthritis. They can also help you to access other specialists, health professionals and services. Your GP will probably make the initial diagnosis of osteoarthritis and may refer you to a rheumatologist (arthritis specialist) if required.

Once your osteoarthritis is fully assessed, your GP or specialist may prepare a care plan to manage the services and treatments you require. They may prescribe medicines and other lifestyle changes to improve your symptoms, and will also see you regularly to check on your treatment and its progress.

Your GP may employ a practice nurse, who may coordinate your care and access to services.

How do I find a GP?

If you don't have a regular GP, find one who can support you. Speak to your local practice or medical centre or use the Find a Health Care Professional section of www.MyJointPain.org.au

When should I see my GP?

- You should visit your GP least every 3–4 months once your treatment is underway.
- Visit your GP immediately if you notice a sudden worsening in symptoms or disability, or if other joints become affected.

If you don't have a regular GP, find one who can support you.



Seeing a rheumatologist

How can a rheumatologist help?

Rheumatologists are doctors who specialise in problems of the joints such as osteoarthritis. Your GP may refer you to a rheumatologist if:

- the cause of your symptoms is unclear
- your symptoms are not improving or are worsening
- you require an injection into your knee joint
- you and your GP are unsure if you will require surgery
- you and your GP wish to seek advice about newer treatments.

While your GP may have prescribed some medicines to reduce pain, the rheumatologist might also recommend other medications to control your symptoms.

Because every person's osteoarthritis is different, your rheumatologist will probably select different treatments over time to find the best one for you.

Your GP or rheumatologist may also refer you to

- other therapists for further advice on appropriate exercise and activities
- an orthopaedic surgeon to assess your need for additional treatment such as joint replacement surgery.

How do I find a rheumatologist?

- Your GP can refer you to a rheumatologist they will then stay in touch to coordinate your care
- Your GP may recommend a rheumatologist
- Visit the Find a Health Care Professional section at www.MyJointPain.org.au to find a rheumatologist near you (but you will need a referral from your GP)
- You can also contact the Australian Rheumatology Association on (02) 9252 2356 or visit www.rheumatology.org.au to find a rheumatologist (but you will still need a referral from your GP).

When should I see my rheumatologist?

- Your rheumatologist may initially want to see you every 2–3 weeks to work out how well you are responding to treatment
- You may also need to return to the rheumatologist if your symptoms continue despite your treatment, or if the pain or loss of function in your joints causes major interference in your life.

Other health professionals

How can other health professionals help?

Many people with osteoarthritis visit a physiotherapist (physio). These practitioners will show you exercises to do at home to strengthen and stretch the muscles in your joints and improve your function. They will also show you pain relief techniques to use at home, including the use of heat packs and walking sticks, to keep your joints as flexible and

pain-free as possible.

An exercise physiologist can give you advice about exercise, including how to get started safely and the best type of exercise for your health and ability. If you need to lose weight, they can also design an exercise program to work alongside a healthy diet.

If you are overweight, losing weight is key to managing osteoarthritis. A dietitian can give you tailored advice to assist with weight loss.

You might also visit an occupational therapist (OT), or they may come to your home or work. OTs can provide advice on how to do things in a way that reduces joint strain and pain. They may also suggest changes to your house, like adding handrails, or aids, such as splints, that can make life easier and protect your joints. A podiatrist can help take care of your feet. They may find ways to reduce the pain in your toes, knees or hips, perhaps by providing shoe inserts or advice on footwear.

A nurse can help you learn more about your condition, understand your treatments and provide support.

A pharmacist can give you information about your medicines, side effects and interactions, as well as helping you to manage your medicines (eg. checking dosage, managing repeats).

See the section on Seeking support on page 25 for information on health professionals who can help you to cope with the emotions you may be feeling.

Different people will have different preferences about the type of health professional or therapist they wish to see. There is no 'right' or 'wrong' but ensure your health professional is qualified and registered. You can check the registration of many types of health professionals with the Australian Health Practitioner Regulation Agency (AHPRA) at www.ahpra.gov.au or by calling 1300 419 495.



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 29 for information about finding a private therapist or visit the Find a Health Care Professional section at www.MyJointPain.org.au to find someone in your area).
- If you have private health insurance, your health fund may cover part of the cost of seeing certain private 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.
- Most health professionals are available in the public 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. These services are usually free or low cost.

When should I see a health professional?

- You may be referred by your GP or rheumatologist.
- You can also see a health professional if you feel you need further support or if you notice your condition or function worsens.



Healthy moves for your joints

While healthcare professionals can offer a range of treatments for your osteoarthritis, there are many things you can do too. The Australian Government's Healthy Active website provides straightforward suggestions for good eating and activity levels. Visit www.healthyactive.gov.au

Quitting smoking is an important first step to help your joints — call the Quitline on 13 78 48 or visit www.quitnow.gov.au Talk to your doctor or other care team members before making changes.

Eating well

What foods are good or bad for osteoarthritis?

There is very little evidence that particular foods are good or bad for people with osteoarthritis and there is certainly no diet proven to 'cure' it. Eating a balanced diet that is low in saturated fat, sugar and salt, but high in omega-3 (from fish and other oils), fruit, vegetables and cereals is good for most people. If you are overweight it is important to lose weight as this will significantly reduce the strain on knee and hip joints. A 10% weight loss can significantly reduce pain levels. The Australian government provides advice about the amount and kinds of foods that we need to eat for health and wellbeing, including Australian Dietary Guidelines, at www.eatforhealth.gov.au

Information to help with weight loss can also be found at www.8700.com.au

For help in working out the best things to eat, you can ask your GP to refer you to a dietitian or find one directly via the information on page 29 of this booklet.

For more information about diet and OA visit www.MyJointPain.org.au/ treatments/nutrition

Eating a balanced diet that is low in saturated fat, sugar and salt, but high in fruit, vegetables, some fish and cereals is good for most people

Fish oils

Current research suggests that foods rich in omega-3 fats can help reduce inflammation in some forms of arthritis and may help control symptoms of osteoarthritis. Foods rich in omega-3 fats include oily fish like sardines and salmon, plus canola oil and walnuts. If you can't eat these foods regularly, daily fish oil supplements which provide omega-3 (containing a minimum of 180mg EPA plus 120mg DHA) may be useful for osteoarthritis.

For more information about diet and OA visit www.MyJointPain.org.au/ treatments/nutrition

Keeping active

What exercise should I be doing?

Regular physical activity benefits everyone, whether or not they have OA. It helps to reduce your pain, strengthen your muscles, maintain joint function and improve your sleep and overall health. Regular physical activity helps to reduce pain, strengthen muscles, maintain joint function and improve sleep and overall health



Inflammation in your muscles, tendons and other tissues may make it harder for you to stand up straight, turn and bend, or take a deep breath. Your physio or exercise physiologist can suggest suitable exercises to stretch and strengthen your muscles. These exercises will improve your posture and help to maintain flexibility. You should aim to do this stretching program every day, or at least five times per week.

In addition to your stretching and muscle strengthening exercises, it is important to do at least 30 minutes of moderate exercise on most days of the week for your general fitness. You can do this either in one go or break your exercise into smaller efforts (for instance, three 10-minute or two 15-minute blocks per day).

Activities that are likely to be good for your fitness include walking, swimming, water exercise, low-impact aerobics, and riding a bike or exercise bike. Your physio or exercise physiologist can also suggest specific exercises and stretches that are appropriate for your situation.

Ask your physio or exercise physiologist to create a special exercise program you can do at home or at the local gym or swimming pool.

Ask your State/Territory Arthritis Office (call 1800 011 041) about appropriate exercise programs in your local area, including community groups, swimming pools, sports centres or gyms that run programs specifically for people with arthritis.

For more information about exercise and osteoarthritis visit www.MyJointPain.org.au/ treatments/exercise



What if it hurts to exercise?

The level and type of exercise you will be able to do varies from person to person — while some people can aim to keep or improve their fitness through exercise, others may be aiming to remain mobile.

It's normal to feel some pain in your muscles when you start an exercise program, or change to different types of activity. However, if pain feels unusual or severe, or lasts for more than two hours after you have stopped an activity, it is probably best to avoid or change that activity. Applying a heat or cold pack to a sore joint may ease swelling and/or pain.

Try to plan your exercise for times when you are experiencing the least pain — generally when you are least tired and your medicine is having maximum effect.



It's normal to feel some pain in your muscles when you start an exercise program

Making the most of medicines

Will medicine cure my osteoarthritis?

At present there is no 'cure' for osteoarthritis. Some people may not need medicines for their osteoarthritis, or may only need to use medications at times when symptoms are troublesome. However, for people whose osteoarthritis is constantly painful or is slowly worsening, finding the right medicines can help reduce pain, maintain the function in your joints and improve your quality of life.

What is the right medicine for me?

All medicines have risks and benefits, so before you start treatment talk to your doctor about how each medicine should be helping you and what risks it might have. Make sure your doctor knows about any other health problems that you or your family members have, and what other medication you are taking, including any complementary medicines. This information will help them choose the best medicine for you.

You should also make sure that you understand what side effects

the medicine might have, including what to do or who to speak to if you experience any unwanted effects from your medication. Many arthritis medicines need to be taken regularly to work properly and should not be stopped suddenly — talk to your doctor if you have concerns about side effects, safety or cost.

> For people with constantly painful or slowly worsening osteoarthritis, finding the right medicines can help reduce pain, maintain function and improve quality of life

Each person responds differently to arthritis medicines, which means that you will need to work with your GP or rheumatologist to find the best medications and doses for you. This can take time, but by finding the most effective medicines with the least side effects you can hope to really make a difference in controlling your osteoarthritis.

Your condition may also change over time, including which joints are affected, how much pain or disability you experience, and whether you have symptom-free periods. This means that you may need to change or add medicines over the course of your treatment — you may not be on the same medicine forever.

How will the medicines help?

Some people with osteoarthritis find that their pain can be managed by regular use of pain-relieving medicines (analgesics) such as paracetamol, although new research is casting doubt on how useful it is for relieving osteoarthritisrelated 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 doctor or pharmacist for advice. You may also find short-term relief from analgesic creams that can be rubbed into the painful joints.

For stronger pain, a group of medicines called NSAIDs (anti-inflammatory drugs) can help, and they also reduce swelling and stiffness. A certain type of anti-inflammatory drugs called COX-2 inhibitors are effective in reducing arthritis pain and may be less likely to cause stomach problems. If pain is severe, strong pain-relieving medicines such as opioids may be used.

> For stronger pain, a group of medicines called NSAIDs can help

How do I find out more about these medicines, including side effects?

To understand more about your medicines and any risks or side effects that they may have, read the Consumer Information Medicine (CMI) leaflet that is available from your doctor or pharmacist. CMI leaflets provide easy to understand information including what the medicine is for and how it is used; things to consider before using the medicine; and possible side effects and what to do if they occur. Speak to your GP or specialist, especially if you have concerns about the long-term effect of medicines, how they might affect your pregnancy plans (whether you are male or female), or whether they should be taken during pregnancy or breastfeeding.

More information about individual medicines can also be found at www.nps.org.au

The Australian Rheumatology Association and Arthritis Australia publish information sheets about many arthritis medicines. Call the Arthritis Infoline on 1800 011 041 for copies or visit www.rheumatology.org.au or www.arthritisaustralia.com.au

For detailed information about analgesics, NSAIDs and COX-2 medication visit www.MyJointPain. org.au/treatments

CMI leaflets provide easy to understand information about risks or side effects of medications



What other treatments can help?

What other treatments can I take to ease osteoarthritis?

There are many promises made for non-medical 'cures' or treatments to ease arthritis. Some of these may work but many have not been proven to help, including glucosamine and/or chondroitin supplements. Many studies of these supplements show no benefit. See Arthritis Australia's *Glucosamine and chondroitin* information sheet for more details at www.arthritisaustralia.com.au

Acupuncture has been shown to help reduce knee pain in osteoarthritis.

Ensure your practitioner is qualified and registered. Most therapies have a professional association you can contact for more information or they can help you find an accredited practitioner. Some qualifications, for example Chinese Medicine Practitioners, can be checked at the Australian Health Practitioner Regulation Agency (AHPRA) www.ahpra.gov.au or by calling 1300 419 495. Because herbal, homeopathic, Ayurvedic or Chinese medicines may affect the treatments prescribed by your doctor, please tell your GP and specialist what other treatments you are thinking about using.

You may feel concerned that your doctor or other members of your healthcare team may disapprove of complementary therapies. However it is very important to keep your healthcare team informed, even if they may not approve. Your healthcare team, particularly your doctor and pharmacist, can't give you the best professional advice without knowing all the treatments you are using. This includes vitamin supplements, herbal medicines and other therapies.

See Arthritis Australia's Complementary therapies information sheet for more about the safe use of these types of treatments at www.arthritisaustralia.com.au or visit www.MyJointPain.org.au/ treatments

Are joint injections helpful to 'fix' joints?

Apart from surgically replacing the affected joint with an artificial joint, there is no treatment that can restore the lost cartilage in your joints. However, some joint injections may help reduce symptoms and improve movement, particularly in the knee. An injection of corticosteroid medication into the joint during a 'flare' can provide short-term pain relief (usually two to four weeks) and help you return to an exercise program or normal activity. The rheumatologist may also inject a liquid called hyaluronan, which helps to 'lubricate' your joint to stop the bones rubbing against each other. Joints should be treated gently for a few days after each injection, but otherwise the risk of infection or damage to the joint is relatively small.

Results from scientific studies do not clearly prove if this type of treatment is beneficial.

Further information about joint injections for osteoarthritis can be found at www.MyJointPain.org.au/ treatments



When should I think about joint replacement surgery?

In this kind of surgery your own joint is replaced with an artificial one. It should be used only when other treatments, including weight loss, don't work for you. Joint replacement may be an option if:

- You have severe, constant joint pain that does not improve with rest, medication, exercise or other treatments
- You have pain at night time that affects your ability to sleep
- You have major limitations of walking and other daily activities, such as showering and dressing.
- Your ability to work or look after people who require your care is reduced.

If you can't manage your symptoms with other treatments, talk to your doctor about whether a referral to an orthopaedic surgeon (a doctor who operates on joints) would be beneficial. The surgeon will assess whether joint replacement is likely to work for you, including how fit you are and any other medical conditions that might rule out surgery.



Your orthopaedic care team will also talk to you about possible risks associated with joint replacement surgery, as well as what you can do to give your new joint the best chance of long-term success.

After recovery from the surgery, which usually takes a few months, the new joint should result in a less painful and more mobile joint for at least 10 years.

For people with osteoarthritis of the knee, arthroscopy (keyhole surgery) is not an effective treatment for pain and is not recommended unless your knee locks.

Further information about joint replacement surgery can be found at www.MyJointPain.org.au/ treatments or Arthritis Australia's Joint replacement booklet at www.arthritisaustralia.com.au

Seeking support

Why me?

It's perfectly normal to wonder why you have developed osteoarthritis, and to feel angry, sad, frightened or confused about it. By taking control of your osteoarthritis and working with your healthcare team, you can approach the condition with a positive attitude. However, sometimes the condition can get you down, especially if pain, stiffness or disability are affecting your everyday life.

It may also feel as though people around you — even close friends or family — don't understand what you're going through.

Who can help?

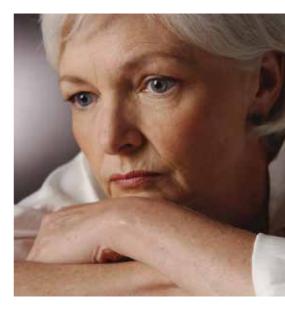
There are many people who can help you deal with the emotional side of osteoarthritis. Your first step is to try to talk honestly with your partner, parents or children about how you feel. Give them a chance to talk too — they might have worries or feel that they don't know enough about your osteoarthritis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

If you are worried about negative or strong feelings, counselling or other

psychological therapies might help. A therapist, such as a psychologist, can talk to you about your worries, feelings and moods, then suggest practical ways to work through them.

Your GP may also be able to suggest ways of coping, or may prescribe medicines if you are especially worried or depressed.

Visit www.MyJointPain.org.au/ treatments for more information or to find a therapist who can help.



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 22 4636.

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

What other assistance is available?

There are many resources available to help people with osteoarthritis. Your doctor may put you in touch with a social worker, who can help explain the financial and health services that are available to you. These can include any pensions or allowances that you might be entitled to, plus any financial assistance such as Health Care Concession Cards or low-cost treatment programs.

Your local council, community

health centre, community group or religious organisation may also offer programs that include practical advice, activities, social networks or just someone to talk to.

There are also Independent Living Centres in each state that provide advice on products and services, including aids and devices, that can help with day-to-day activities. Visit www.ilcaustralia.org.au or call 1300 885 886 for your nearest centre or more information.

Contact your State/Territory Arthritis Office to find out about their wide range of resources, management programs and support groups: call 1800 011 041 or visit www.arthritisaustralia.com.au

> There are many resources available to help people withosteoarthritis

Arthritis Australia in partnership with Bupa Health Foundation has developed an interactive website - MyJointPain.org.au - to help people with osteoarthritis better manage their symptoms. It provides information and advice from experts as well as links to healthcare providers in your local area who can assist with care. www.MyJointPain.org.au

What about information from other 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 Health Direct www.healthdirect.gov.au can be a good starting point for web searches, as every site that Health Direct links to has been checked for quality and accuracy of information.



Always check information from the web with a trusted member of your healthcare team

Glossary of terms

Applancia	an al ion -ili	A madicing that halps relieve rain such as
Analgesic	an-al-jee-zik	A medicine that helps relieve pain, such as paracetamol.
Cartilage	car-ta-lij	The spongy tissue inside your joints that helps stop the bones rubbing against each other.
Corticosteroid	core-tick-o-ster-oyd	A type of medicine that is very effective in reducing symptoms in the joints.
COX-2 inhibitor	cox-too	A group of medicines which reduce pain and inflammation, and may be suitable for some people as an alternative to NSAIDs.
Dietitian	die-et-ish-un	A health professional who can recommend what foods you should and shouldn't eat.
Exercise physiologist	fizz-ee-o-lo-jist	A health professional who can suggest an exercise program tailored to your health and ability.
NSAID	en-sayd	A group of medicines known as non-steroidal anti-inflammatory drugs. These can reduce inflammation, swelling and joint stiffness.
Occupational therapist	ОТ	A health professional who looks at your activities at home or work, then suggests changes or devices to make everyday life easier on your joints.
Opioids	O-pee-oyds	A type of medicine used for severe pain.
Osteoarthritis	os-tee-o-are-thry- tiss	A condition that causes pain and reduced function in affected joints.
Osteoporosis	os-tee-o-pore-o-siss	A condition where the bones become thinner or weaker, which may cause them to break more easily.
Physiotherapist	fizz-ee-o-ther-a-pist	A health professional who uses treatments to keep your joints mobile, and can suggest exercises and devices for you to use at home.
Podiatrist	po-die-a-trist	A health professional who can suggest changes to the way you walk or provide special shoe inserts, to take the strain off your joints and reduce pain.
Rheumatologist	roo-ma-tol-o-jist	A doctor who is a specialist in treating problems of the joints such as osteoarthritis.

Useful resources

Australian resources

For more on osteoarthritis and help in managing and choosing the best treatment options for you www.MyJointPain.org.au

For access to quality online information about osteoarthritis, start at Health Direct www.healthdirect.gov.au

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

For advice on quitting smoking, contact the Quitline www.quitnow.gov.au Ph: 13 78 48

To find a specialist, in arthritis and other joint conditions, contact the Australian Rheumatology Association www.rheumatology.org.au Ph: (02) 9252 2356

To find a physiotherapist, contact the Australian Physiotherapy Association www.physiotherapy.asn.au Ph: 1300 306 622

To find an occupational therapist, contact Occupational Therapy Australia www.otaus.com.au Ph: 1300 682 878 To find a podiatrist, contact the Australasian Podiatry Council www.apodc.com.au

To find an exercise physiologist, contact Exercise and Sports Science Australia www.essa.org.au Ph: (07) 3171 3335

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 Patient Resources 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 be aware 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 Infoline: 1800 011 041 www.arthritisaustralia.com.au

Arthritis ACT

Building 18 170 Haydon Drive Bruce ACT 2617 PO Box 908 Belconnen ACT 2616

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 Chermside, Level 2 Westfield Chermside, Chermside 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 Western Australia

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

Arthritis

Arthritis Australia Level 2, 255 Broadway Glebe NSW 2037 Mail: PO Box 550 Broadway NSW 2007 Phone: 02 9518 4441 Email: info@arthritisaustralia.com.au Web: www.arthritisaustralia.com.au Arthritis Infoline: 1800 011 041

ISBN: 978-0-9805024-4-2