



Osteoarthritis and Rheumatoid Arthritis - November 2009

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Osteoarthritis

Osteoarthritis is the most common form of arthritis. It usually develops gradually, over time. The disease occurs due to the gradual degeneration of the cartilage, which lines the joints. Several different joints can be affected, but osteoarthritis is most frequently seen in the hands, knees, hips, feet and spine.

What causes it?

There is no known cause for osteoarthritis, and women are twice as likely as men to be affected. Osteoarthritis can develop at any age, although it occurs more frequently in older people. Injury to a joint can also trigger osteoarthritis, even many years later.

What happens to our joints?

- A joint is where one bone moves on another. Ligaments hold the two bones together. Ligaments are like elastic bands; they keep the bones in place while muscles lengthen and shorten to make the joint move.
- A coating of cartilage covering the bone surface stops the bones from rubbing directly against each other. This helps the joint to work smoothly.
- A capsule surrounds the joint, and the space within the joint (joint cavity) contains

synovial fluid. This fluid, which provides nutrients to the joint and cartilage, is produced by the synovial membrane (or synovium), which lines the joint cavity.

- What goes wrong with joints varies from one kind of arthritis to another.
- Osteoarthritis develops when changes in cartilage (soft tissue that protects the bone surface) occur that affect the joints.
- Cartilage becomes pitted, rough and brittle
- Underlying bone thickens and broadens to reduce load on cartilage
- Bony outgrowths form at the outer edges of the joint, making it look nobly
- Synovial membrane and joint capsule thicken, and space inside the joint narrows
- Stiff joint which is painful to move and sometimes inflamed
- Sometimes part of the cartilage can break away from the bone leaving the bone ends exposed. These may then rub against each other and the ligaments become strained and weakened. This causes a lot of pain and changes the shape of the joint.

How will it affect me?

Osteoarthritis is a condition that develops over time. Changes will be slow and subtle in some people, whereas in others, the pain and stiffness will gradually worsen until the disease process finishes. At this point, the joints will look rather nobly, but are usually far less painful. In some cases they become pain free. You should be able to carry out most everyday tasks.

Rheumatoid Arthritis

Rheumatoid arthritis is an inflammatory disease, mainly affecting joints and tendons. An inflamed joint looks swollen and red, and appears warm to the touch. The disease usually starts in the wrists, hands or feet, and can spread to other joints and other parts of the body. There is no cure only treatment to relieve the symptoms.

What causes it?

It is not known why rheumatoid arthritis occurs. People of any age can develop it, but it is most common between the ages of 30 and 50 years, and among women. Certain genes may trigger its development.

How is it different from Osteoarthritis?

In rheumatoid arthritis, the immune system starts to attack the body (autoimmune) instead of defending it, resulting in inflammation, which affects:

- The thin synovial membrane that lines the joint capsule
- Tendon sheaths (tubes in which the tendons move)
- Bursae (sacs of fluid that allow the muscles and tendons to move smoothly over each other)
- The joints and inflamed tissues then become stiff, painful and swollen.

How will it affect me?

Rheumatoid arthritis affects everyone differently and is, therefore, hard to diagnose. The disease may be active (a flare-up) or other times inactive but during a flare-up you may experience the following:

- You feel generally unwell and tired. You experience pain and loss of strength and movement in the inflamed joints. The joints feel stiff especially in the morning or after sitting still for a long time.
- Most people should be able to carry on as normal, with some adjustments to their lifestyle.

How are they treated?

Osteoarthritis

Your doctor may prescribe analgesics (painkillers) which relieve pain, non-steroidal anti-inflammatory drugs (NSAIDs) which reduce inflammation and, in turn, pain steroids, which also reduce inflammation, and can be directly injected into a joint for fast relief.

Surgery may be required in severe cases and a joint replacement can last up to 10-15 years.

Rheumatoid Arthritis

The main aim of treatment is to reduce the inflammation, disease modifying drugs:

- Anti-rheumatic drugs (DMARDs) are given soon after diagnosis to slow down the disease process and Non-steroidal anti-inflammatory drugs (NSAIDs) to tackle the general inflammation and pain.
- Steroids are used to quickly reduce severe inflammation
- Joint replacement surgery will only be considered if the joint is very painful or if there is a risk that you will lose overall function.

Improve your diet

- Buy organic where possible and eat Foods high in calcium (major component of bone) and vitamin D (allows you to absorb calcium) - they work together.
- Foods rich in calcium include milk, yogurt, cheese, tofu, sardines, salmon, turnips, and some green and leafy vegetables, such as spinach, broccoli and kale. The main food sources of vitamin D are cold saltwater fish (e.g., salmon, halibut, herring, tuna), fortified milk, egg yolks, liver, and especially fish oils.
- Also remember sunlight absorbed through the skin produces Vitamin D.
- Eat plenty of fruit and vegetables rich in antioxidants, which help to reduce inflammation. Eat lots of wholegrain, brown rice, oats, wholemeal, nuts and seeds.
- Avoid sugars and hidden sugars in food - anti-nutrients
- Reduce caffeine & alcohol
- Drink enough fluids
- Exercise regularly

Supplements

- Glucosamine & Chondroitin - enhance joint health
- Omega 3 - anti-inflammatory
- Vitamins A, C, E, D & B complex
- Herbs
- Alfalfa - contains all the minerals essential for bone formation
- Cat's claw for relieving pain, also Feverfew,
- Ginger - antioxidant has an anti-inflammatory effect.

Is it time to have your bone density checked?