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3rd Edition

Arthritis

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Explore the latest research
on total joint replacement

Learn about medications,
including the newest biologics

Manage arthritis pain with
non-invasive therapies

Nadine Taylor, MS, RD

Author of *Green Tea: The Natural
Secret to a Healthier Life*

Barry Fox

New York Times bestselling
co-author of *The Arthritis Cure*



Arthritis

3rd Edition

**by Barry Fox, PhD
Nadine Taylor, MS, RD**

**for
dummies[®]**
A Wiley Brand

Arthritis For Dummies®, 3rd Edition

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Introduction

Whether it appears as a little bit of creaky stiffness in the hip or knee or as a major case of inflammation that settles in several joints, arthritis is an unwelcome visitor that knocks on just about everybody's door sooner or later. Although we don't have an out-and-out cure for arthritis, there are many techniques for *managing* this disease — that is, controlling its symptoms so that you can get on with your life! Arthritis does *not* mean that you must spend your days relegated to a rocking chair or shuffling from your bed to an easy chair and back again. Most of the time, you can take charge of your disease, instead of letting it take charge of you. By following the simple techniques outlined in this book, you can do much to control your pain, exercise away your stiffness, keep yourself on the move, and slow down or prevent progression of your disease. All you need is a little know-how — and that's what we provide in these chapters.

About This Book

When writing this book, our goal was to provide you with the best and most up-to-date information on arthritis treatments in an easy-to-read format that you could simply thumb through. We have included the best-of-the-best of many different healing systems — ranging from standard Western medicine (including medications and surgery), to Eastern hands-on healing methods (including acupuncture, acupressure, and reiki), to alternative therapies (including homeopathy, herbs, DHEA, hydrotherapy) and such far-out approaches as bee venom therapy.

If you like, you can read this book straight through from cover to cover, but it's not absolutely necessary. We do suggest that you read the first chapter as an introduction, and then zero in on the description of your particular kind of arthritis, found in Chapters 2, 3, 4, or 5. After that, feel free to flip through the book and read whatever catches your fancy.

Because arthritis impacts your life in so many different ways, we have chapters that address the many complex issues that you may face, including the technical aspects of arthritis (tests, medicines, and surgeries), the practical aspects (diet, exercise, and day-to-day living), and the emotional aspects (depression and

anger). We also give tips on how to assemble your healthcare treatment team, how to talk to your doctor, and what to do about chronic pain.

Foolish Assumptions

In writing this book, we made certain educated guesses about you, the reader, so that we could figure out what might be most interesting and useful to you and write our book accordingly. We've assumed the following:

- » You either have arthritis yourself or you're close to someone who has it.
- » You're interested in finding out more about arthritis and its treatments.
- » You want to do something to ease arthritis pain and other symptoms.
- » You want to play an active part in managing the disease, rather than just going along with whatever your doctor tells you.
- » You're interested in finding out about some alternative ways to treat arthritis.
- » You'd like to find out how to handle the emotional issues that go hand-in-hand with the disease.

We also don't assume that you're a medical expert! Now and again, the abbreviated forms of several diseases pop up in various parts of this book so let's get a helpful list into the book for you right away. Here's a quick list of the common ones and what they stand for:

- » AS: Ankylosing spondylitis
- » DLE: Discoid lupus erythematosus
- » GCA: Giant cell arteritis
- » JIA: Juvenile idiopathic arthritis
- » OA: Osteoarthritis
- » PMR: Polymyalgia rheumatica
- » PsA: Psoriatic arthritis
- » RA: Rheumatoid arthritis
- » SLE: Systemic lupus erythematosus

And don't worry: We explain in this book what these words mean!

Icons Used in This Book

The icons tell you what you must know, what you should know, and what you may find interesting but can live without.



REMEMBER

When you see this icon, it means the information is essential, and you should be aware of it.



TIP

This icon marks important information that can save you time and energy.



TECHNICAL
STUFF

The Technical Stuff icon marks a more in-depth medical passage or gives you further information about confusing medical terms.



WARNING

The Warning icon cautions you against potential problems.

Beyond the Book

In addition to the abundance of information and guidance related to arthritis that we provide in this book, you can find even more help and information online at *Dummies.com*. Check out this book's online Cheat Sheet. Just go to www.dummies.com and search for "Arthritis For Dummies Cheat Sheet."

Where to Go from Here

Someone once said, "Knowledge is power." You have the power to take charge of your arthritis; all you have to do is educate yourself and apply what you discover. This book is a good place to start, but you'll have to commit and recommit yourself to maintaining your health on a daily basis. Remember, it's the little things that you do every day that count. As you embark on your journey, we wish you luck, strength, and many active, pain-free years!

1

Making Sense of the Types of Arthritis

IN THIS PART . . .

Arthritis can really put a damper on your life . . . if you let it. But the good news is that most forms of arthritis and the pain they cause can be managed (if not completely done away with) through medical techniques and lifestyle changes.

Part 1 gives you an overview of arthritis in its many forms: the symptoms, diseases, processes, causes, and most likely victims. You also learn what doctors can do for each type of arthritis and what you can do for yourself. We give special attention to the most common forms of this disease: osteoarthritis and rheumatoid arthritis.

IN THIS CHAPTER

- » Discovering how arthritis affects your body
- » Becoming aware of the various types of arthritis
- » Recognizing the signs and symptoms of arthritis
- » Identifying the major causes of arthritis
- » Finding out who is most likely to get the various forms of the disease
- » Considering the treatment options

Chapter 1

What Is Arthritis?

Ouch! There it goes again! That grinding pain in your hip, those aching knees that make walking from the kitchen to the bedroom a chore, the stiff and swollen fingers that won't allow you to twist the lid off a sticky jar or even sew on a button. Arthritis seems to get to everybody sooner or later — slowing us down, forcing us to give up some of our favorite activities, and just generally being a pain in the neck (sometimes literally!). In more advanced cases, arthritis can seriously compromise quality of life as sufferers surrender their independence, mobility, and sense of usefulness while being relentlessly worn down by pain.

The good news is that you can manage your arthritis with a combination of medical care, simple lifestyle changes, and good old common sense. You don't have to spend your life gritting your teeth from pain, or hobbling around the backyard with a cane. Although you may not be able to run a marathon or do back-flips like you did when you were 13, if you follow the program outlined here, you should be able to do the things you really want to do — such as take a brisk walk in the park, carry a sleeping child upstairs to bed, or swing a golf club with the best of them.

Arthritis may affect a lot of people, but thanks to intensive research over the past several years, we now know a lot more about how to handle it.

Remember that arthritis affects the rich and famous just as much as the rest of us. For a look at how certain celebrities have handled their arthritis, see the sidebar “Stargazing: Famous Arthritis Sufferers” at the end of the chapter.

Understanding How Arthritis Affects Your Joints

So what exactly is arthritis, this disease that brings us so much misery and pain? Unfortunately, we can’t provide one easy answer to that question, because arthritis involves a group of diseases — each with its own cause, set of symptoms, and treatments. However, these diseases do have the following in common:

- » They affect some part of the joint.
- » They cause pain and (possibly) loss of movement.
- » They often bring about some kind of inflammation.

As for the causes of these different kinds of arthritis, they run the gamut from inheriting an unlucky gene to physical trauma to getting bitten by the wrong mosquito.



The word *arthritis*, which literally means joint inflammation, comes from the Greek words *arthros* (joint) and *itis* (inflammation), and its major symptom is joint pain. Although the same group of ailments can be called *rheumatism*, it’s usually referred to as arthritis, so that’s what we call it in this book. The word *arthralgia*, a term used much less frequently, refers to joint pain alone. According to the CDC, arthritis affects some 58.5 million American adults (one out of every four people) and 300,000 children. That’s a big chunk of the population. For a look at how many people are affected by some of the most common forms of arthritis, see “Arthritis by the Numbers” later in the chapter.

Saying hello to your joints

Before you can understand what’s wrong with your joints, you need to understand what a joint is and how it works. Any place in the body where two bones meet is called a *joint* such as the ball and socket hip joint, or the hinge joint at the elbow or knee. Sometimes the bones actually fuse together; your skull is an example of

an area with fused bones. But in the joints that can develop arthritis, the bones don't actually touch. As you can see in Figure 1-1, a small amount of space exists between the two bone ends. The space between the ends of the bones keeps them from grinding against each other and wearing each other down.

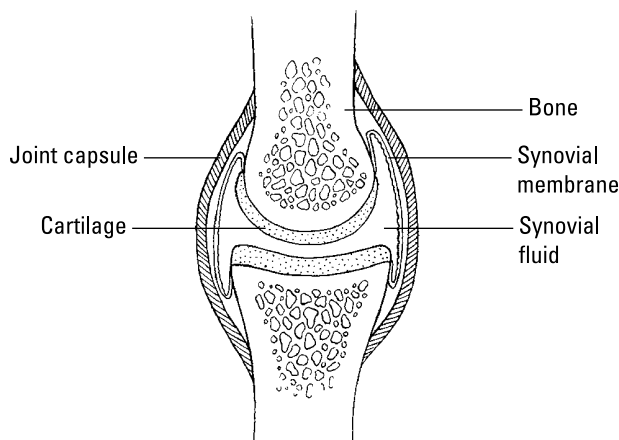


FIGURE 1-1:
Anatomy of
a healthy
synovial joint.

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Bones are living tissue — hard, porous structures with a blood supply and nerves — that constantly rebuild themselves. Bones protect our vital organs and provide the supporting framework for the body. Without bones, we would be nothing more than blobs of tissue — like tents without supporting poles!

But bones are more than broomsticks that prop us up; fortunately, they don't leave us rigid and awkward. The 200-plus bones that reside in our bodies are connected together in some 150 joints, giving us remarkable flexibility and range of motion. If you don't believe it, just watch a gymnast, ballet dancer, or figure skater execute a handspring, arabesque, or triple axel. But you don't have to be an athlete or contortionist to enjoy the benefits of joint flexibility. Just think about some of the things you do regularly — such as bending a knee or an elbow. Now imagine how limiting it would be if you had fewer joints, or if they didn't move the way they do! (For a few fascinating facts about your joints, see the sidebar “Strange-but-true joint points” on the next page.)



Other structures surrounding the joint, such as the muscles, tendons, and *bursae* — small sacs of fluid that cushion the tendons like pillows — support the joint and provide the power that makes the bones move. The joint capsule wraps itself around the joint, and its special lining, the *synovial membrane* or *synovium*, makes a slick, slippery liquid called the *synovial fluid*. You can think of the joint capsule as a sealed bag full of WD-40 encasing the joint and filling the little space

between the bone ends. Finally, the bone ends are capped by *cartilage* — a slick, tough, rubbery material that is eight times more slippery than ice and a better shock absorber than the tires and springs on your car! Together, these parts make up the joint, one of the most fascinating bits of machinery found in the body.

Cartilage: The human shock absorber

Cartilage is extremely important for the healthy functioning of a joint, especially if that joint bears weight, like your knee. Imagine for a moment that you're looking into the inner workings of your left knee as you walk down the street. When you shift your weight from your left leg to your right, the pressure on your left knee is released. The cartilage in your left knee then “drinks in” synovial fluid, in much the same way that a sponge soaks up liquid when immersed in water. When you take another step and transfer the weight back onto your left leg, much of the fluid squeezes out of the cartilage. This squeezing of joint fluid into and out of the cartilage helps it respond to the off-and-on pressure of walking without shattering under the strain.

Can you imagine the results if we didn't have this watery cushion within our joints? With the rough, porous surfaces of the bone ends pitted against each other, bones would grind each other down in no time. One thing is certain: Nobody would be getting around too easily without joint fluid and cartilage.

Types of joints

To accommodate the bends, twists, and turns that we all perform without even thinking, the skeletal system is made up of different shapes and sizes of bones, which connect to form different kinds of joints. The joints are categorized according to how much motion they allow:

- » **Synarthrodial joints** allow no movement at all. You can find these in the skull, where the bones meet to form tough, fibrous joints called *sutures*. Because they don't move, arthritis doesn't affect them.
- » **Amphiarthrodial joints**, such as those in the spine or the pelvis, allow limited movement. Generally, these joints aren't attacked by arthritic conditions as often as others. (A slipped disc is not arthritis.)
- » **Synovial joints** allow a wide range of movement; most of our joints fall into this class. Synovial joints come in all kinds of interesting variations including those that glide, hinge, pivot, look like saddles, or have a ball-and-socket type structure. (For more on these joints, take a look at the section “Looking at the types of synovial joints” later in this chapter.) Because of the synovial joints, you can bend over and pick a flower, kick up your heels while swing dancing, reach for a glass on a high shelf, and turn around to see what's going on behind you. Unfortunately, these joints are also the ones most likely to be hit with arthritis, precisely because they do move!

STRANGE-BUT-TRUE JOINT POINTS

Here are a couple of things you may not know about your joints:

- By the time a fetus is four months old, its joints and limbs are in working order and ready to move.
- A newborn baby has 350 bones, many of which fuse to form the 206 bones of the adult body.
- Cartilage is 65 percent to 85 percent water. (The amount of water in your cartilage generally decreases as you get older.)
- When you run, the pressure on your knees can increase to ten times that of your body weight.
- Not a single man-made substance is more resilient, a better shock absorber, or lower in friction than cartilage.

Looking at the types of synovial joints



REMEMBER

Because of their tendency to become arthritic, synovial joints are the ones that we discuss the most throughout this book. Synovial joints come in a wide variety of shapes and sizes to accommodate a wide variety of movements.

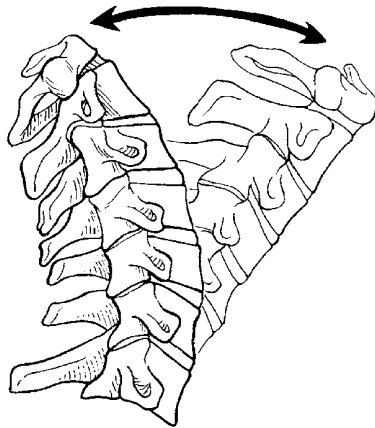
Gliding joints

A gliding joint contains two bones with somewhat flat surfaces that can slide over each other. The vertebrae in your spine are connected by gliding joints, allowing you to bend forward to touch your toes and backward to do a backbend (well, maybe!). See Figure 1-2 for an example of a gliding joint.

Hinge joints

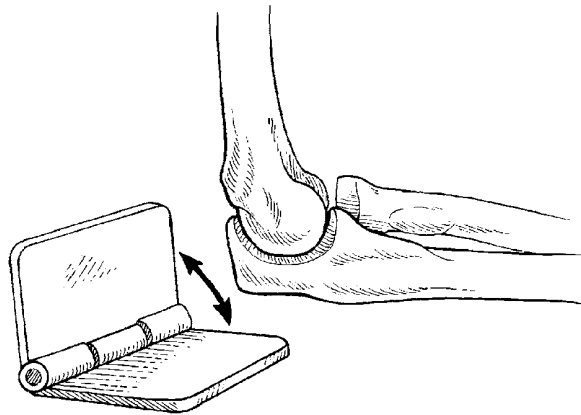
You can find hinge joints in your elbows, knees, and fingers. These joints open and close like a door. But just like a door, hinge joints only go one way — you can't bend your knee up toward your face, only back toward your rear. See Figure 1-3 for an example of a hinge joint.

FIGURE 1-2:
A gliding joint.
The gliding joint
helps keep your
vertebrae aligned
when you bend
and stretch.



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FIGURE 1-3:
A hinge joint.
Hinge joints bend
only one way.



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Saddle joints

This joint looks like a horse's back with a saddle resting on it. One bone is rounded (*convex*) and fits neatly into the other bone, which is *concave*. The saddle joint moves up and down and side to side, but it doesn't rotate. Your wrist and your thumb have this kind of joint. See Figure 1-4 for an example of a saddle joint.