

ARTHRITIS *Action*



A PUBLICATION OF THE ARTHRITIS FOUNDATION

UTAH/IDAHO CHAPTER

Fall 2006

Exercise Reduces Arthritis Pain Active Individuals Experience Fewer Limitations

A poll conducted on behalf of the Arthritis Foundation by Harris Interactive suggests that people with arthritis who exercise regularly have less joint pain than those who exercise less often.

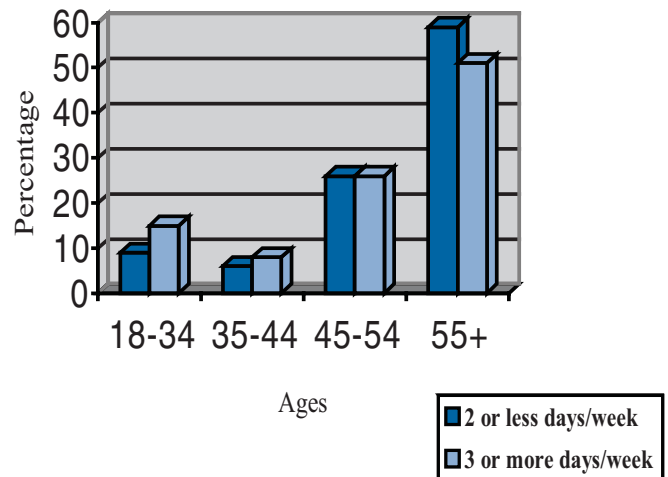
Eighty-one percent of people with arthritis who exercise three or more days per week reported they are virtually joint-pain free, compared to 66 percent who exercise two or less days per week, drawing a strong correlation between the amount of exercise and lack of joint pain.

“The recommended guideline for people with arthritis is to participate in physical activity three or more days per week, as studies have shown that amount of activity lessens pain and disability,” said Dr. Patience White, chief public health officer of the Arthritis Foundation. Unfortunately, 43 percent of people with arthritis exercise less than the recommended three or more days per week.

“Although the temptation may be to stay inactive in order to avoid aggravating the condition, by being physically active people with arthritis can actually improve their quality of life,” said White. “Simply walking can reduce joint pain and stiffness, build muscles around the joints and improve overall health – enabling people with arthritis to experience fewer limitations and lead a fuller life.”


“In addition to improving arthritis pain physical activity promotes weight loss,” said White. “For people above their ideal weight, losing as little as 11 pounds decreases the risk of painful knee osteoarthritis. Arthritis is the nation’s leading cause of disability, but the good news is that arthritis can be controlled or prevented by physical activity.”

Exercise Habits of People With Arthritis



The mission of the Arthritis Foundation is to improve lives through leadership in the prevention, control and cure of arthritis and related diseases.

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448 East 400 South, Suite #103
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www.arthritis.org

Painful Pickles?

Can the foods you eat cause or affect your arthritis? Because symptoms of arthritis can vary from day to day, it is natural to think that what you ate yesterday caused or reduced the pain you feel today.

Research has shown several connections between food, nutritional supplements (vitamins, minerals and omega-3 fatty acids) and certain forms of arthritis or related conditions, such as gout, osteoporosis, osteoarthritis, rheumatoid arthritis, and reactive arthritis. However, nutritional research is still in its infancy as far as understanding how plant chemicals and antioxidants work individually and in concert to prevent and treat diseases such as arthritis.

“It is known that phytonutrients and antioxidants have a role in minimizing inflammation,” explains Carol Henderson, PhD, a registered dietitian, “but we’re still in the discovery phase.” For example, researchers are still frequently discovering new phytochemicals and their potential impact on disease. In the meantime, Henderson advocates grounding yourself in good health with an overall nutritious diet rather than chasing food fads for an arthritis fix.

“Combine all of the diet recommendations - limit between-meal snacks (especially if you’re overweight); carefully select and use fats in moderation; limit your intake of animal proteins; and increase nuts, beans, legumes and fish,” she says. “By adhering to these recommendations, you can achieve quantifiable health benefits such as a more desirable weight, reduce high blood pressure, and lower your risk of cardiovascular disease, some cancers and osteoarthritis.”

Low Vitamin K Status Associated with Osteoarthritis

What problem was studied?

Poor intake of vitamin K, a fat-soluble vitamin present in leafy, green vegetables and some vegetable oils, is a common problem with potentially negative effects on a number of body systems and functions, including joint health. Insufficient vitamin K can result in abnormal cartilage and bone mineralization and thus possibly the formation of osteophytes (“bone spurs”) that are seen in osteoarthritis (OA). Arthritis Foundation postdoctoral fellow Tuhina Neogi, MD, and colleagues undertook a study to determine if poor vitamin K status is associated with the features of OA seen on X-ray.

What was done in the study?

The researchers conducted an analysis of 672 participants in the Framingham Offspring study, a study of the adult children (and their spouses) of the original Framingham Heart Study, which was designed to study the incidence and prevalence of cardiovascular disease and its risk factors over time. The study participants had already had blood tests to measure levels of phylloquinone (the primary form of vitamin K) between 1996 and 1998 as well as hand and knee X-rays between 2002 and 2004.

The investigators calculated the prevalence of OA, bone spurs and joint-space narrowing (an indication of cartilage destruction) in the participants’ joints in each of four ranges of blood phylloquinone levels. Results of those in the highest-level phylloquinone groups were compared with those in the lowest group. The researchers conducted the analyses in hands and knees separately, accounting for a number of factors – including age, sex, body mass index, total energy intake and bone mineral density.

What were the study results?

The prevalence of OA, bone spurs, and joint-space narrowing decreased significantly with increasing blood levels of phylloquinone. In other words, people who

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Advocacy Update: MAKE SURE YOUR VOICE IS HEARD!

Members of Congress

Rob Bishop – Utah, 1st District

*Jim Matheson – Utah, 2nd District

Chris Cannon – Utah, 3rd District

*C.L. Otter – Idaho, 1st District

*Mike Simpson – Idaho, 2nd District

Senators

*Orrin Hatch – Utah

*Robert Bennett – Utah

*Larry Craig – Idaho

Mike Crapo – Idaho

*Current co-sponsor of the Arthritis Prevention, Control and Cure Act

Tell your Senators and U.S. Representatives how arthritis affects your life and ask them to co-sponsor the Arthritis Prevention, Control and Cure Act.

The Arthritis Prevention, Control, and Cure Act will:

- Strengthen arthritis public health initiatives which would ensure that more people are diagnosed early
- Ensure that limited federal funding for arthritis research is used in the most strategic manner possible
- Authorize a juvenile arthritis prevalence study and patient registry
- Establish incentives so more medical students pursue a career in pediatric rheumatology
- Authorize more juvenile arthritis research center grants

www.arthritis.org/advocacy

Good News for Knees

The results of the two-year Glucosamine-chondroitin Arthritis Intervention Trial (GAIT) are in. GAIT measured the effects of taking glucosamine alone, chondroitin alone, a glucosamine-chondroitin combination, and celecoxib alone against placebo in 1,583 people with either mild or moderate-to-severe pain from knee OA. Results show that the combination of glucosamine and chondroitin is better than placebo, but the benefits appear to depend on pain severity.

Mild pain. The glucosamine and chondroitin combination did not show effectiveness for people with mild pain. Sixty-three percent of those with mild pain responded to the glucosamine and chondroitin combo, and 62 percent responded to the placebo.

Moderate-to-severe pain. Of the people with moderate-to-severe knee OA pain, 79 percent who took the glucosamine-chondroitin combo experienced pain relief, compared with 66 percent who took glucosamine alone, 61 percent who took chondroitin alone, and 54 percent who took placebo. "The people with moderate-to-severe pain who took glucosamine and chondroitin sulfate together showed significant improvement in their knee pain," says lead author Daniel O. Clegg, MD, professor of medicine and chief of the division of rheumatology at the University of Utah School of Medicine in Salt Lake City, one of 16 rheumatology centers involved in the NIH-sponsored GAIT.

"Glucosamine and chondroitin may be another effective therapeutic option for managing pain in select OA patients but recent positive study results do not change the cornerstones of OA management: education, exercise, physical therapy, weight reduction (if appropriate) and simple analgesics," he says.

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had the highest vitamin K levels had the least severe OA as evidenced by the number of joints affected and the severity of affected joints.

These observational data support the hypothesis of an association between low plasma levels of vitamin K and increased prevalence of OA manifestations in the hand and knee.

What is the relevance to people with osteoarthritis?

Although research has yet to prove that consuming a diet rich in vitamin K will actually prevent osteoarthritis or repair damage that has occurred, it does suggest that vitamin K may help slow or stop the progression of OA. Foods that are good sources of vitamin K include spinach, leaf lettuce, broccoli, kale, asparagus and olive, soy bean and canola oils. The same research group has been awarded another Arthritis Foundation award to further study vitamin K and OA in a clinical trial.

Young Adults with Arthritis Meet, Cook and Eat!

November 2, 2006
6 - 9 PM

The Orthopedic Specialty Hospital
5848 S. Fashion Blvd
Murray, Utah

\$25 – includes instruction and food

Contact Natalie to register:
801-538-9340 nsmith@utah.gov

Sponsored by UDOH Arthritis Program
and TOSH

TEAM UP to walk

October 7 – Salt Lake City
October 14 – Boise

Register today for the annual
ARTHRITIS WALK

www.arthritis.org



GEAR UP to walk

- ✓ **flexible, supportive athletic shoes designed for walking**
- ✓ **snug-fitting socks that have minimal seams and absorb moisture**
- ✓ **loose-fitting clothing that can be layered to adjust to changes in weather and body temperature**
- ✓ **water bottle**
- ✓ **walking stick**

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Dinner Gala
Evening of
Honors

November 8, 2006
Little America Hotel

Honorees:

Larry H. Miller

Marc Mariani, M.D.

Fashion Show Provided by Macy's

To participate, contact Lisa or Emily.
801-536-0990



To learn how to donate to the
Arthritis Foundation through
payroll deduction, visit

www.healthcharitiesut.com

Take Control of Your Health
through the Arthritis Foundation
Life Improvement Series



This six-week program developed at Stanford University gives you the skills needed to better manage arthritis. Classes cover ways to reduce pain and stress, cope with fatigue, use medications wisely and benefit from exercise.

West Jordan Senior Center

8025 South 2200 West
West Jordan, Utah
Mondays, Oct. 16 – Nov. 20
1:00 – 3:00 PM

Call the Chapter office at 800-444-4993 for upcoming classes.



The exercises taught in this class were developed by physical therapists specifically for people with arthritis. This low-impact class can be taken either sitting or standing, whichever is most comfortable.

Facility locations are available online at www.arthritis.org.



The aquatic program combines the buoyancy of water and the soothing warmth of a heated pool to make a safe, ideal environment for relieving arthritis pain and stiffness. You do not need to know how to swim to participate.

Facility locations are available online at www.arthritis.org.

JUVENILE ARTHRITIS
FAMILY DAY

BOISE

Saturday, October 14, 2006

1 pm – 3 pm

Ann Morrison Park – 1000 Americana Boulevard

Call Chapter office 800-444-4993 for more information.

800-444-4993 • www.arthritis.org

Use the zip code locator to go directly to the Utah/Idaho Chapter site.