

Managing Arthritis: Improving Lives

By Megan Foreman

Arthritis is the most common cause of disability.

Some 50 million adults in the United States live with arthritis, the most common cause of disability. In 21 million of those who have arthritis, it triggers joint inflammation, causes pain and stiffness, and limits activities essential to daily living, such as sitting, bending, standing, climbing stairs and walking. As the U.S. population ages and obesity rates increase, the number of people with the condition is expected to skyrocket. By 2030, an estimated 67 million adults will have doctor-diagnosed arthritis, according to the Centers for Disease Control and Prevention (CDC).

Arthritis is more common among women than men and often occurs with other chronic diseases. An estimated 47 percent of U.S. adults with arthritis have at least one other chronic condition. The most common conditions found with arthritis are heart disease, chronic lung conditions, diabetes and stroke—which all share obesity as a risk factor. Although the relationship between arthritis and other chronic conditions is not entirely clear, arthritis rates are substantially higher among those who are obese.

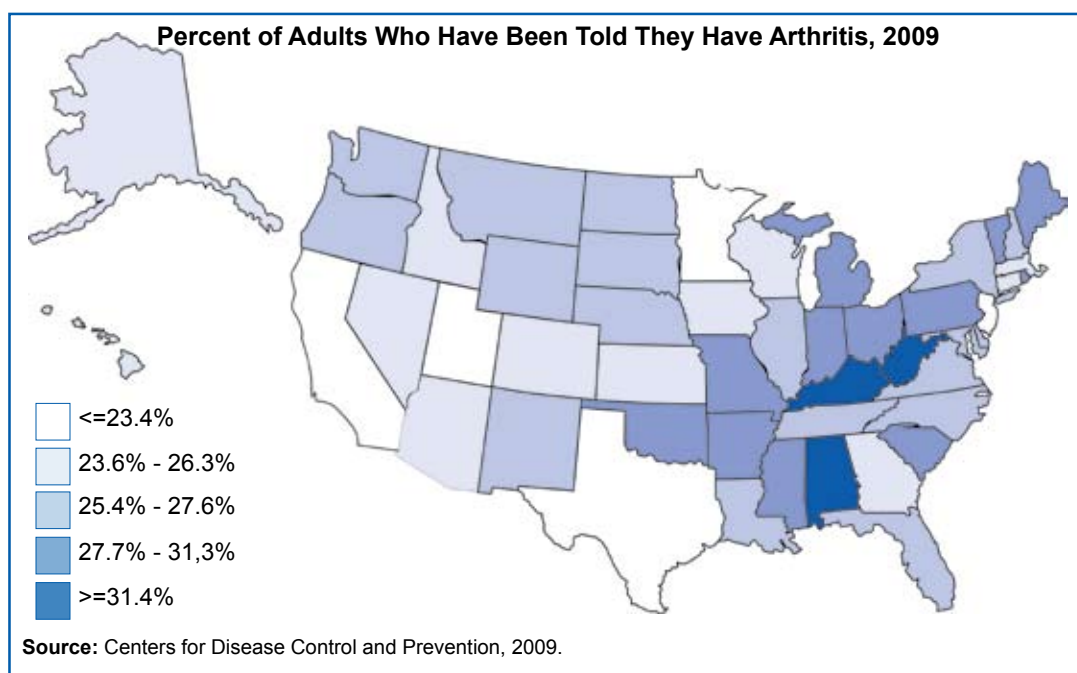
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The total costs attributable to arthritis and other rheumatic conditions in 2003 were \$128 billion. This includes \$81 billion in medical expenditures (direct costs) and \$47 billion in lost earnings (indirect costs). A major contributor to the medical costs are the more than 500,000 joint replacement surgeries—that reduce pain and improve physical function—performed annually for those who suffer disabling arthritis. Regardless of whether a person is or is not a good candidate for joint replacement, physical activity and self-management education are proven strategies for reducing pain and improving physical function of those with arthritis.

EnhancedFitness, a program for seniors, has been shown to help increase strength and boost activity levels. Developed in conjunction with the CDC, the program is offered through YMCAs and other community organizations. The CDC also supports campaigns in English and Spanish that promote physical activity as a way to reduce arthritis-associated pain and improve physical function.

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State Action Including Medicaid and state employee health and workers' compensation benefits, state governments typically are the largest payers of health care costs. Nationally, chronic diseases account for about 75 percent of the more than \$2 trillion spent on health care each year in the United States. Because chronic diseases in general drive many health care costs, state lawmakers may wish to consider ways to support prevention and wellness initiatives and chronic disease management programs.



Legislators in West Virginia passed the Arthritis Prevention and Education Act in 2006 that funds chronic disease management and arthritis-appropriate exercise programs. The West Virginia Osteoporosis and Arthritis Program receives an annual appropriation of approximately \$250,000. The program uses the money to produce educational materials and train instructors in appropriate physical activities, such as tai chi and water aerobics. The program also developed an exercise DVD that was distributed to more than 2,000 people.

A West Virginia law funds arthritis-appropriate exercise programs.

Chronic disease self-management programs teach people with chronic diseases, including arthritis, how to manage their symptoms, exercise, use medications properly, communicate effectively with family members and health care providers, and eat properly. Evaluations of the six-week course, given in community settings such as senior centers and hospitals, show participants not only increase aerobic exercise, but also demonstrate better psychological health; experience less depression, fatigue and disability; are more mobile; and have more energy. The New York Department of Health is working with health insurance plans to promote such programs to policyholders; as a result, more courses are being offered statewide.

Health departments in 12 states received funding to provide proven effective arthritis programs.

Federal Action A competitive CDC grant process provided health departments in California, Florida, Kansas, Michigan, Minnesota, Missouri, New Mexico, Oregon, South Carolina, Tennessee, Utah and Wisconsin with funding for five years to provide arthritis programs, based on evidence of effectiveness. The programs include Chronic Disease Self-Management Programs, EnhancedFitness, and arthritis-appropriate physical activity and self-management education from the Arthritis Foundation. Descriptions of currently funded state programs also are available. Announcements of funding opportunities are published as they become available, along with a description of eligibility criteria.

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Centers for Disease Control and Prevention
Arthritis Web site
www.cdc.gov/arthritis/index.htm