Caring for the Arthritic Patient: Keeping it Real

Satellite Conference and Live Webcast Tuesday, December 7, 2010 2:00 - 4:00 p.m. Central Time

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Faculty

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Cardiovascular Health Branch Mission

- To provide leadership in the state of Alabama
- To prevent death and disability from heart disease and stroke
- Eliminate disparities in health and health care

Mission

- Work with its many partners to fully implement a plan focusing on policy and systems changes
 - -Worksite
 - -Healthcare
 - -Community settings

Caring for the Arthritic Patient

- What is ARTHRITIS?
 - -Inflammation of a joint

People Living with Arthritis

- How many in the United States?
- How many in Alabama?
 - -1,262,000
 - -3 times more women than men

- Myth #1
- Myth #2
- Myth #3

Caring for the Arthritic Patient

 66 million adults in America have been diagnosed by a doctor with one or more forms of arthritis



What is Arthritis

- Osteoarthritis
- Lupus
- Osteoporosis
- Gout
- Fibromyalgia
- Gout
- Ankylosing
- Rheumatoid Arthritis
- Spondylitis
- Juvenile Arthritis
- Lyme Disease
- Bursitis and Tendonitis

Warning Signs

- Recurring pain and tenderness in one or more joints
- Inflammation, redness, and/or warmth in one or more joints
- · Inability to move a joint normally
 - -Range of motion
- · Early morning stiffness

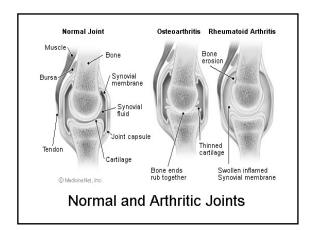
Warning Signs

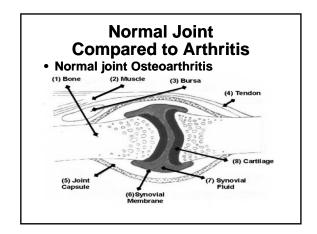
- Unexplained weight loss, fever, weakness, combined with joint pain
- If symptoms last more than two weeks consult a rheumatologist

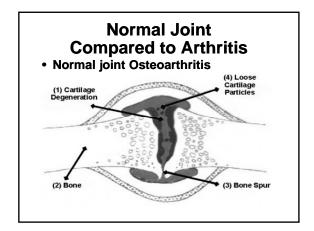
- Osteoarthritis
 - -A degenerative joint disease
 - -Affects 27 million
 - African Americans are not affected more than Caucasians
 - Cartilage covering ends of bones in the joint deteriorates causing pain and loss of movement

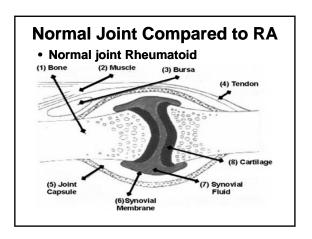
- -Most prevalent form of arthritis
- -The larger symptoms last about an hour in the morning

- Rheumatoid Arthritis
 - -An autoimmune disease
 - Joint lining becomes inflamed as part of the immune system activity
 - One of the most serious and disabling types
 - -Symptoms can last all day long
 - -Affects mostly women









Normal Joint Compared to RA Normal joint Rheumatoid (1) Inflamed Synovial Membrane (2) Bone Loss/Erosion (3) Cartilage Loss (4) Swollen Joint Capsule

Osteoarthritis vs. Rheumatoid Arthritis

- Osteoarthritis
 - -Usually begins after age 40
 - Often affects joints on only ONE side of the body at first
 - Usually doesn't cause redness, warmth, swelling (inflammation) of a joint

Osteoarthritis vs. Rheumatoid Arthritis

- Affects only certain joints
 - Rarely affects elbows or shoulders
- Doesn't cause a general feeling of sickness

Osteoarthritis vs. Rheumatoid Arthritis

- RA
 - -Usually begins between ages 25-50
 - Usually affects same joint of BOTH sides of the body
 - Symmetry
 - Causes redness, warmth, and swelling of joints

Osteoarthritis vs. Rheumatoid Arthritis

- -Affects many joints
 - Including elbows and shoulders

Caring for the Arthritic Patient

 Arthritis is second only to heart disease as a cause of work disability

 Arthritis is the #1 cause of DISABILITY



Arthritis Limits Everyday Activities

- Walking
- Dressing
- Bathing
- Stooping
- Working
- · Caring for family
- * More than 7 million Americans affected

Caring for the Arthritic Patient

- Arthritis costs the U.S. economy over \$128 billion each year
- Greater than 39 million physician visits yearly
- More than half million hospitalizations

Economic Impact

- Arthritis and musculoskeletal conditions account for 13% of all health care spending
 - -#1 most common reason for doctor visits
 - -#2 most common reason for hospitalization
 - -#4 most common reason for surgery

Obesity and Arthritis

- According to CDC
 - Obesity is a known risk factor for the development and progression of knee osteoarthritis and possibly osteoarthritis of other joints
 - Obese adults are up to four times more likely to develop knee osteoarthritis

- · Losing weight can help arthritic pain
- 10 pounds of weight loss will:
 - -Take 100 pounds of pressure off the spine
 - -Cut the arthritic pain in half

Chronic Disease Connection

- 66% OBESITY also have ARTHRITIS
- 52% DIABETES also have ARTHRITIS
- 58% HEART DISEASE also have ARTHRITIS
- 48% HYPERTENSION also have ARTHRITIS

Caring for the Arthritic Patient

- What is the one thing that would help all of these chronic conditions?
 - -Exercise
 - -Exercise
 - -Exercise

Yet Only . . .

- 29% of people with doctor diagnosed arthritis actually participate in physical activity
- · What is the number one reason why?

Caring for the Arthritic Patient

- Arthritis pain
 - -Additional symptoms include:
 - Stiffness
 - Joint swelling
 - Deformity of joints
 - Weakness in nearby muscles
 - Abnormal posture
 - Fatigue

Barriers to Increased Physical Activity

- Persons with arthritis:
 - -Concerned about joint pain
 - Major barrier
 - -Fear of increased pain with activity
 - -Fear of additional joint damage
 - -Don't know which activities are "safe"

Treatment for the Arthritic Patient

- Drug therapy
- Exercise
- Heat
- Control fatigue
- · Use of assistive devices
- · Watch for signs of depression

- Drug therapy
 - -What you can do?
 - Help them increase their compliance with taking the medications
 - -Do they run out of medications?
 - Are there refills available?

Caring for the Arthritic Patient

- Identify barriers of why the patients are not taking their medications and report this
- Prescription bottle tops request pharmacist place easy to access non-child resistant

Caring for the Arthritic Patient

- Exercise
 - Assist them with Range of Motion exercises
 - Assist them in exercising on a regular basis
 - Help them identify barriers to exercising
 - -Help them create an Action Plan to exercising

Caring for the Arthritic Patient

- Walking is good exercise
 - Check for potential to fall due to throw rugs
 - -Do they have a small animal with toys that they can trip over?
 - -Small children around with small items to trip over?

Caring for the Arthritic Patient

- -What type of shoes are they wearing?
- -Poor lighting?
 - What about eyesight?
- -Uneven surfaces?
- -Loss of sensation?

- Heat
 - -Reduces stiffness
 - -Makes movement easier
 - -Heat associated with rest is very soothing
 - -Cooling does not increase mobility

- · Control fatigue
 - -Rest between activities
 - -Restful sleep at night important
 - -Identify barriers to sleep
 - -Foam beds, water beds use
 - Mild sedative physician approved for sleep

Caring for the Arthritic Patient

- Assistive devices
 - Ambulation devices, canes, walkers, wheelchairs
 - -Aides for getting dressed
 - -Aides for eating

Caring for the Arthritic Patient

- Depression signs and symptoms
 - -Change in appetite
 - -Change in sleep patterns
 - -Increased worry
 - -Crying
 - -Lack interest in ADLs

Caring for the Arthritic Patient

- Most important is to recognize the change and get help
 - Arthritis is a chronic disease which can discourage the patient

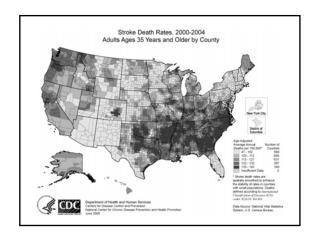
Heart Disease and Arthritis

- 58% with Heart Disease also have Arthritis
- Heart Disease is the leading cause of death in the U.S. since 1921
- Stroke has been the third leading cause of death since 1938
- Together they account for 40% of all deaths

Cardiovascular Death

- Every 26 seconds
 - Someone in America someone has a coronary event
- Every MINUTE
 - -Someone dies from one

- Leading cause of death in Alabama and in the NATION
- Most CVD and Strokes are PREVENTABLE
- Winnable battles



But Why Are Some Areas "Too Low?" • Huge variations, many theories, few data CDC: Atlas of Stroke Mortality, 2003 http://www.cdc.gov/cvh/maps/strokeatlas/atlas.htm



What is a Stroke? It's All in the Plumbing!

- A stroke occurs when blood flow to the brain is interrupted by a blocked or burst blood vessel
- There are two main types of strokes
 - -Ischemic
 - Blocked blood vessel
 - Most common

What is a Stroke? It's All in the Plumbing!

- Hemorrhagic
 - · Burst blood vessel or leaking

Be FAST . . . Prevent Strokes

- F = Face
 - -Ask can the person smile?
 - -Is the smile uneven?
 - -Do their eyes or mouth droop?
 - -Sudden weakness of the face

Be FAST . . . Prevent Strokes

- A = Arm
 - -Can the person raise both arms?
 - -Is one arm slightly lower?
 - Show sudden weakness of the arm, especially on one side of the body

Be FAST . . . Prevent Strokes

- S = Speech or sight
 - -Can the person speak or see clearly?
 - -Can they understand what you are saying?
 - -Is there trouble seeing with one or both eyes?

Be FAST . . . Prevent Strokes

- T = Time
 - -Time lost is brain lost
 - There is a 3 hour window to receive tPA for those who are eligible

Be FAST . . . Prevent Strokes

- Be FAST
 - -F = Face
 - -A = Arm
 - -S = Speech or Sight
 - -T = Time

- Community Resources
- Arthritis Foundation
 - -http://www.arthritis.org
- Arthritis Today Magazine

Cardiovascular Health Branch

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Show Me The Money CDSMP Study #1 (1999)

- 1,140 participants
 - -664 intervention; 476 control
- 952 completed 6 month follow-up survey
- 7% fewer hospitalizations
- 80% fewer nights in the hospital

Show Me The Money CDSMP Study #1 (1999)

- Healthcare expenditure savings \$750 per participant
- Saved more than 10 times the cost of intervention
- Improvements in exercise, fatigue, cognitive symptoms, communication with physician

Show Me The Money CDSMP Study #2 (Year 1)

- 831 participants 40+ years old
- 69% fewer visits to physician and ER
- 11% fewer days in hospital
- 1% fewer hospitalizations
- Improvements in cognitive symptom management, exercise, communication with physician, fatigue, reduced disability

Show Me The Money CDSMP Study #2 (Year 2)

- 56% fewer visits to physician and FRs
- 2.5 visits per participant = overall total reduction of visits to physician and ERs
- Savings between \$390 and \$520 per participant

Show Me The Money CDSMP Study #3

- Saved \$990 per participant in first year
- Kaiser Permanente saved \$400,000 for the 489 participants
- 1:4 cost-to-savings ratio