

TREATING OSTEOARTHRITIS AND RHEUMATOID ARTHRITIS

Osteoarthritis and rheumatoid arthritis can both cause swelling, stiffness and reduced range of motion. Yet their causes and treatments are different. They also vary in prevalence. Osteoarthritis is the most common form of arthritis, affecting approximately 30 million adults in the United States.¹ Rheumatoid arthritis is much less common, affecting only about 1.5 million people.²

Both conditions, however, can have severe quality-of-life, career and health impacts. They can both cause debilitating pain. And, even with a doctor's guidance, both conditions can be tricky for some patients to manage. Each patient has a different level of responsiveness to a given treatment. Each treatment option presents its own benefits and risks.

A balanced approach to managing the symptoms of osteoarthritis and rheumatoid arthritis allows patients and health care providers to tailor treatment to the unique needs of each patient.





Q: How are osteoarthritis and rheumatoid arthritis different?

Osteoarthritis is caused by wear and tear on the joints, so it develops slowly and typically occurs later in life. It's also known as "degenerative arthritis," which describes how it occurs: Cartilage between the bones deteriorates. A person with osteoarthritis may struggle to play recreational sports such as tennis or golf, or to go for a run with friends. While the damage is not reversible, symptoms of osteoarthritis are manageable.

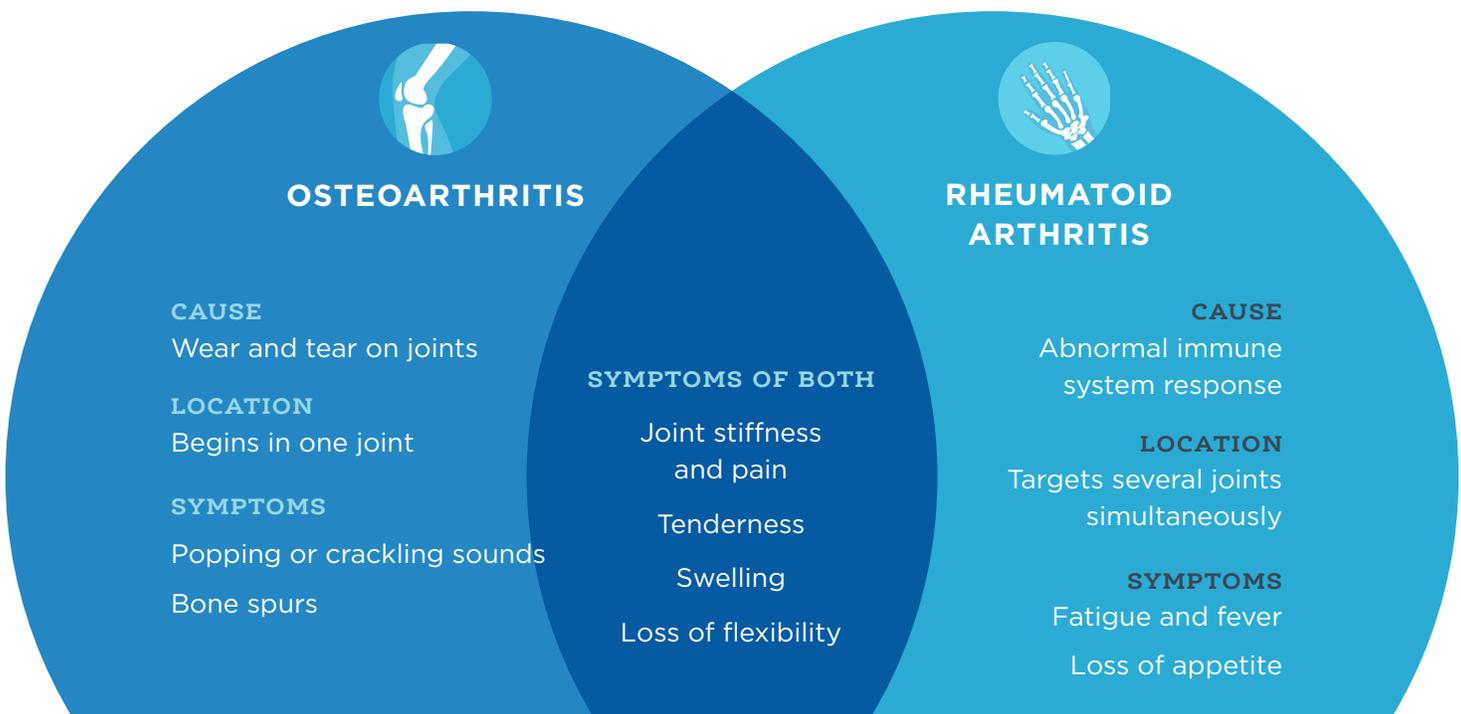
Rheumatoid arthritis, by comparison, can happen at any age and usually develops more quickly—within weeks or months. Rheumatoid arthritis occurs when the body's immune system attacks its own tissue. It can affect multiple organs, including the skin, heart and lungs, but it's best known for damaging the lining of joints. In severe cases, rheumatoid arthritis can result in deformity in the hands or feet, making it difficult to perform everyday tasks.

Q: How does arthritis impact patients' lives?

Arthritis pain and functional disability can lead to anxiety and can impact psychological wellbeing. People with rheumatoid arthritis, for example, experience high levels of depression.³

Meanwhile, arthritis-induced stiffness in particular impacts workplace productivity, costing tens of thousands of dollars per person.⁴ The condition can also increase absenteeism and force people into early retirement. In 2013, arthritis-attributable wage losses topped \$163 million.⁵

While arthritis impacts patients' ability to earn an income, it's also among the most expensive conditions to treat.⁶ Arthritis-attributable medical expenses totaled nearly \$140 billion in 2013, costing the average patient more than \$2,100 per year in medical expenses.⁵





Q: How do patients manage the symptoms of osteoarthritis and rheumatoid arthritis?

Some patients have used prescription opioids to address their osteoarthritis or rheumatoid arthritis symptoms.⁷ Opioids are typically affordable, covered by insurance and effective at masking discomfort. But they are also highly addictive and not well tolerated by some people. And they do not reduce arthritis patients' inflammation.

NSAIDs—non-steroidal anti-inflammatory drugs—familiar as ibuprofen or naproxen, are also used by arthritis patients. They are available over the counter and, in addition to addressing pain, they effectively reduce inflammation. They are also

available in topical creams that work well for knee pain, for example.

Many patients take NSAIDs without complication. For some patients, however, the medications can pose additional health concerns. **NSAIDs, when taken regularly in very high doses, can sometimes cause gastrointestinal issues. In certain cases, complications can arise quickly, in as few as 6.5 days.**⁸ As many as one in four regular NSAIDs users can develop a GI ulcer.⁹ To mitigate GI complications, NSAIDs are also available with a built-in GI protectant.

For rheumatoid arthritis patients, doctors may consider prescribing other medications, including steroids to slow joint damage or innovative biologics to slow disease progression.¹⁰

✓ BENEFITS AND DRAWBACKS ✗ OF NSAIDs FOR ARTHRITIS SYMPTOMS

BENEFITS

- ✓ Reduces inflammation
- ✓ Safe and effective for most patients
- ✓ Can come with a GI protectant



DRAWBACKS

- ✗ Present GI risks for some patients when taken in very high doses
- ✗ Can decrease kidney function
- ✗ Pain relief is short term

Q: How can people with arthritis achieve balanced pain management?

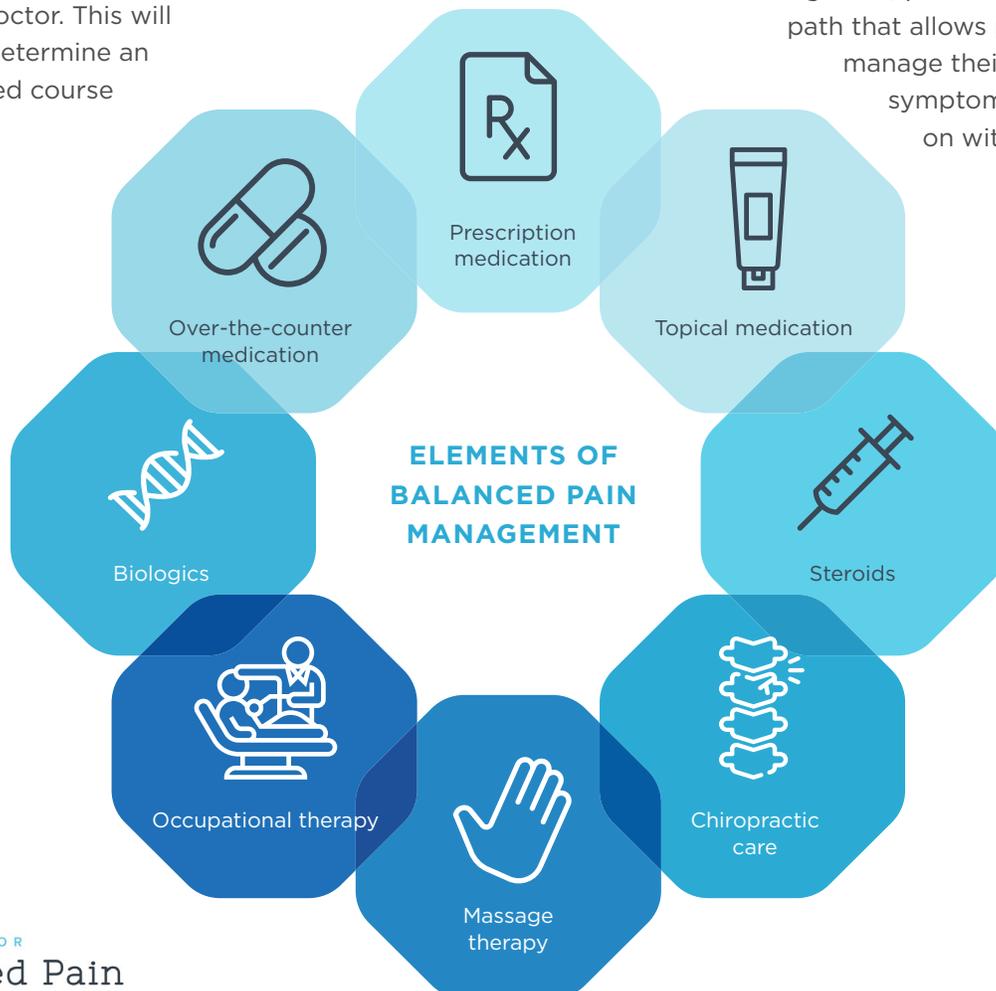
Combatting arthritis symptoms takes different forms depending on patients' individual needs. This is the crux of balanced pain management. For someone with osteoarthritis, a topical medication in combination with physical therapy may mitigate symptoms. A combination therapy of NSAID with a GI protectant, however, may yield better results for a different osteoarthritis patient or someone with rheumatoid arthritis.

Other treatments include medications like steroids and biologics. Non-pharmacologic approaches such as chiropractic care or occupational therapy often complement medications in a balanced pain management approach. It's important for patients to discuss the risks and benefits of each approach, as well as their treatment goals, with their doctor. This will help them determine an individualized course of care.

Q: What prevents some people from taking a balanced approach to pain management?

Several barriers prevent arthritis patients from addressing their arthritis in a safe, balanced way. Patients who regularly take high doses of NSAIDs may not be aware of the GI risk they could face, leaving them ill equipped to consider other treatment options.

Meanwhile, insurers' one-size-fits-all policies may drive patients to treatment options that financially benefit the insurer rather than those that best meet patients' needs. To achieve balanced pain management, patients need their insurers to adequately cover a range of medications and treatments, allowing each patient and his or her physician to develop the integrative, personalized care path that allows patients to manage their arthritis symptoms and carry on with their lives.





CONCLUSION

Osteoarthritis and rheumatoid arthritis patients have to accept that there is no cure for their condition, but they shouldn't have to accept one-size-fits-all treatment options that could cause other health issues. Just as their condition affects each patient's life in a unique way, each patient deserves a balanced, individualized approach to managing his or her symptoms.

Policymakers have an opportunity to support osteoarthritis and rheumatoid arthritis patients by ensuring access to a wide variety of treatment modalities. Comprehensive coverage will ensure people living with these conditions have the opportunity to undertake a personalized plan that can improve their health—and their lives—using a balanced approach to pain management.

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