

Oregon's Arthritis Program

Arthritis Fact Sheet



800 NE Oregon St., Suite 730
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<http://public.health.oregon.gov/DiseasesConditions/ChronicDisease/Arthritis/Pages/index.aspx>

What is Arthritis?

The term “arthritis” covers more than 100 diseases and conditions affecting joints, the surrounding tissues, and other connective tissues. Arthritis and other rheumatic conditions include osteoarthritis, rheumatoid arthritis, systemic lupus erythematosus, juvenile rheumatoid arthritis, gout, bursitis, rheumatic fever, Lyme arthritis, carpal tunnel disease and other disorders.¹ Defining arthritis in adults has evolved over time. Currently, *arthritis* is defined as doctor-diagnosed arthritis. *Possible arthritis* is characterized by pain, aching or stiffness in or around a joint within the past 30 days that has been present for 3 or more months.² If *possible arthritis* is suspected, a medical diagnosis should be sought.

Who is Affected by Arthritis?

- 52.5 million U.S. adults age 18 and older self reported doctor-diagnosed arthritis. This represents 22.7% of all adults.³
- 22.7 million adults with doctor-diagnosed arthritis (9.8% of all adults) have arthritis-attributable activity limitations.
- Over two thirds of people with arthritis are younger than 65 years of age.⁴
- Arthritis is expected to increase as the population ages. Currently, 21 million adults age 65 and older have arthritis. This number is expected to climb to 41.1 million by 2030.⁵
- Nationally, approximately 294,000 or 0.5% of young people under the age of 16 are affected by arthritis.⁶
- Arthritis is the leading cause of disability in the United States.⁷
- Arthritis limits daily activities such as stooping, bending or kneeling in nearly 8 million adults.⁸
- Over 10 million adults with chronic joint symptoms had never seen a health-care provider for their condition.⁹
- Systemic Lupus Erythematosus (SLE) is a serious form of rheumatic disease that can affect several organs. Death rates from SLE are 3 times more likely in African American women aged 45-64 years than White women.¹⁰

Cost of Arthritis

- Each year in the United States, arthritis results in 44 million physician visits, 750,000 hospitalizations and 36 million ambulatory care visits. Women accounted for 63% of these visits; 68% of these visits were by persons under 65 years of age.¹¹
- Estimated medical care costs for arthritis total \$51 billion and \$86 billion in total costs (medical care and lost productivity).¹²

Oregon's Data

- Approximately 827,500 residents or 27% of Oregon's adult population reported they had doctor-diagnosed arthritis in 2013.¹³
- In 2011, 21% of adult Oregonians had arthritis joint symptoms (possible arthritis), but had not been diagnosed by a health care provider as having arthritis.¹³
- About 53% of Oregon adults with arthritis have limitations in their daily activities.¹³
- Approximately 28% of women and 21% of men have arthritis.¹³
- About 36% of non-Latino American Indians and Alaska Natives reported they had doctor-diagnosed arthritis.²³
- In 2010, the total direct and indirect costs of arthritis care was \$1.6 billion.¹⁴

Risk Factors for Arthritis

- **Women** make up nearly 60% of arthritis cases.⁴
- **Older age:** Nearly 60% of the elderly population have arthritis. Risk increases with age.⁴
- **Genetic predisposition:** Certain genes are known to be associated with a higher risk of some types of arthritis.¹
- **Lyme disease:** Approximately 60% of patients with untreated Lyme disease will develop Lyme arthritis.¹⁵
- **Obesity:** Obesity is associated with gout in men¹⁶ and osteoarthritis of the knee, hip and hand in women.¹⁷
- **Joint injuries:** Sports injuries, occupation-related injuries and repetitive use joint injuries can increase the risk of arthritis.¹ Occupations such as farming, heavy industry, and

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occupations with repetitive motion are associated with arthritis.¹⁸

Effective Treatments for Arthritis

- Physical activity in the form of regular, moderate exercise maintains joint health, relieves symptoms, improves functions, reduces joint swelling, increases pain threshold, and improves energy levels.¹ Several effective physical activity programs are available for people with arthritis. These programs include the Arthritis Foundation Exercise Program (formerly PACE) which has been proven to improve self efficacy in participants²⁰, and the Arthritis Foundation Walk With Ease Program.
- A 10% reduction of body weight has been shown to improve symptoms such as pain, stiffness and function by 28%.²¹ Physical activity and a low fat diet are key to weight management.¹
- Physical and occupational therapy can help impairments and activity limitations.¹
- Medications for some types of arthritis can limit disease progression, control symptoms and prevent serious complications.¹
- Joint replacement therapy often reduces pain and improves activity.¹

The Oregon Arthritis Program

- In response to the recommendations of the *National Arthritis Action Plan (NAAP)*, the Center for Disease Control and Prevention's (CDC) National Center for Chronic Disease Prevention and Health Promotion established cooperative agreements with state health departments to develop and enhance state-based programs that aim to decrease the burden of arthritis and improve the quality of life among people with arthritis.
- Since 1999, the Oregon Arthritis Program has received funding from the Centers for Disease Control and Prevention to expand self-management programs, including Walk With Ease and Living Well with Chronic Conditions programs.

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This publication was supported by Grant/Cooperative Agreement from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.