

“ For me, physical activity is an important part of my arthritis management. I couldn’t walk for a while, and now I walk, and the walking has allowed me to keep walking. With walking, my heart is stronger, my muscles and bones are stronger, my lungs are stronger, and most importantly, I am stronger! Walking is my pain reliever!

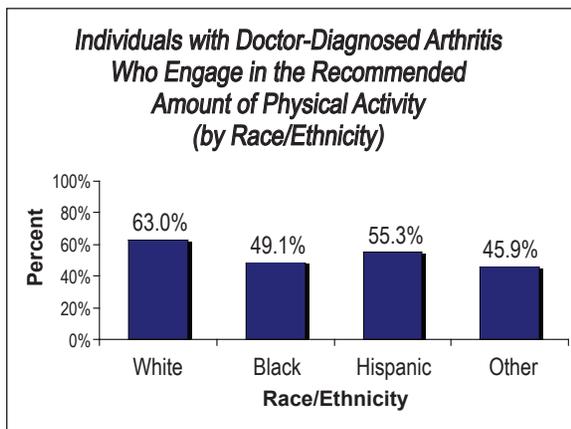
—JR, Age 37, Venice

Public Health Message

Regular, moderate physical activity for people with arthritis is safe, improves function, and reduces pain.

Arthritis and Physical Activity

Arthritis affects over 5.6 million California adults (22%).¹ Fifty-seven percent of adult Californians over the age of 65 have been diagnosed with some form of arthritis.¹ People with arthritis not only *can* exercise, but are *encouraged* to exercise. Low-impact aerobic exercise decreases fatigue, pain, and depression, and increases aerobic capacity, muscle strength, and joint mobility, with no detrimental effects on disease activity or pain.² People with arthritis are encouraged to seek out exercise programs and workshops that are designed for them. Workshops that help people learn specific techniques, and get people started with and continue their interest in exercise.³ Most people who engage in regular physical activity begin to feel better within four to six weeks.⁴



Source: State of California, Department of Public Health, Behavioral Risk Factor Surveillance System (BRFSS), 2005.

Rates of physical activity vary among ethnic/racial groups. In California, White individuals with arthritis are more likely to engage in the recommended amount of physical activity than individuals of other race/ethnicities.¹

Physical Activity Recommendation

- Frequency: 3 or more days a week
- Intensity: moderate
- Time: 30 minutes a day (or 10-minute intervals, 3 times a day)

The Problem

- Almost half of the Californians with arthritis (41%) don’t get the recommended amount of exercise.¹
- Low physical activity levels place people with arthritis at added risk of inactivity-associated conditions such as cardiovascular disease, diabetes, obesity, and functional limitations.⁵
- Persons with arthritis report more physically and/or mentally unhealthy days than those without arthritis, regardless of sex, age, or educational level.⁶
- Rates of physical activity vary among ethnic/racial groups.¹
- Recent evidence indicates that less than half of all adults with arthritis have received advice to exercise from their health care provider.⁷

Benefits of Physical Activity

In California, women (61%) are slightly more likely than men (56%) to engage in the recommended amount of physical activity for people with arthritis.¹ Increasing physical activity levels among people with arthritis may help their long-term, health-related quality of life, an important motivator to becoming more physically active.⁸

- Regular aerobic and strengthening exercise can improve physical health by decreasing arthritis-related pain, improving function, and delaying disease progression and its subsequent disability.^{7,9}
- Physical activity can lead to improvements in body composition, diminished falls, increased strength, improved longevity, reduced depression, and reduced risk for diabetes and coronary artery disease.¹⁰
- Regular physical activity is a key component of weight management. Maintaining a healthy weight reduces the risk of developing arthritis and may decrease disease progression.¹¹

Getting Started with Moderate Exercise

- Choose low-intensity activities, accumulate exercise in several sessions throughout the day rather than a single session, and set time goals rather than distance goals.¹⁰
- Start slowly. Activities should be performed at a slow, steady pace and not put excessive force on the joints. Include flexibility and joint range of motion exercises, but avoid overstretching.¹⁰
- Walking, swimming, and biking are ideal exercise choices because these activities use large muscle groups and will help strengthen the heart and promote weight control.¹⁰
- Following exercise, people with arthritis may experience discomfort; however, any increased joint pain or discomfort lasting more than an hour or two after exercise should be discussed with your physician and/or exercise professional.¹³

Healthy People 2010 Objective

“ Increase the proportion of adults with doctor-diagnosed arthritis who receive health care provider counseling for physical activity or exercise. ”

Public Health Strategies

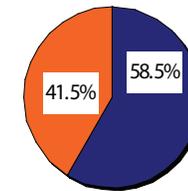
- Arthritis-specific exercise programs and knowledgeable instructors have been shown to improve exercise behaviors, particularly among non-exercisers and insufficiently active individuals.³
- For people with arthritis, a health care provider's advice to exercise is important. Increasing physicians' knowledge and self-efficacy for exercise counseling may be an important strategy for increasing exercise participation.³
- To further benefit the lives of people with arthritis, future physical activity intervention programs may be focused on choosing the appropriate type of physical activity, helping people learn joint-protection strategies, and encouraging the value of incorporating physical activity into daily activities.³

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People with Doctor-Diagnosed Arthritis Who Engage in the Recommended Amount of Physical Activity



■ Engage in the recommended amount of physical activity
 ■ Don't engage in the recommended amount of physical activity

Source: State of California, Department of Public Health, Behavioral Risk Factor Surveillance System BRFSS, 2005.

Despite the many known benefits of physical activity, people with arthritis are not as physically active as those without arthritis.¹² Forty-one percent of Californians with doctor-diagnosed arthritis do not engage in the recommend amount of physical activity for people with arthritis.¹ People with arthritis can achieve the national recommendations of physical activity by engaging in moderate types of "joint-friendly" activities such as walking, gardening, bicycling, and swimming.¹²

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