

TAKING CARE OF YOUR RHEUMATOID ARTHRITIS

USE THIS GUIDE for info on caring for rheumatoid arthritis, to organize your data and as a quick resource.

TABLE of CONTENTS

- **1** DEFINITIONS AND DIAGNOSIS
- **MY CONTACTS**
- RA MYTHBUSTING
- MY TREATMENT PLAN
- **13** MANAGING MEDICATIONS
- 15 DAILY MEDICINE SCHEDULE
- 17 WHEN SURGERY IS NEEDED
- 18 FIGHTING FATIGUE

- 19 STAYING ACTIVE
- **22** MY EXERCISE CHART
- **24** RA AND NUTRITION
- **26** MY HEALTHY SHOPPING LIST
- **27** COPING AND SUPPORT
- 29 DEALING WITH DEPRESSION
- 30 THE FUTURE OF RA RESEARCH
- 31 NOTES

RESOURCES

DEFINITIONS AND DIAGNOSIS

WHAT IS RHEUMATOID ARTHRITIS (RA)?

RA is a chronic (long lasting) health issue that affects the small joints in the hands and feet, causing pain and swelling. The disease can progress and cause deformity and stiffness in the hands, wrists, fingers, feet and ankles.

Anyone can get RA. It seems to affect women more than men, starting in middle age and is common in older adults. Cases of RA in children and young adults are rare but possible.

RA BY THE NUMBERS

0.5% - 1%

U.3% = 1%

Approximate percentage of adults with RA throughout the world

2-3

Number of times more likely a woman will develop RA over a man

45-65

Peak age of RA onset

RA Q&A

What causes RA?

Doctors don't really know the exact causes. With this type of arthritis, a person's body tissues are attacked by his or her immune system. Researchers don't quite know how and why this happens but are learning more all of the time. There is hope for a cure or prevention in the future.

Possible causes for RA:

Genes (passed to a child from a parent)

Environment

Hormones

RA DEFINED

RHEUMATOLOGIST A doctor who specializes in problems of the joints, bones and muscles.

RISK FACTORS

Sex

Women are more likely to develop RA.

Age

While RA can occur at any age, it commonly starts between the ages of 40 and 60.

Family history

If a member of your family has RA, your risk of the disease may be greater.

DIAGNOSIS

Your family doctor or rheumatologist can diagnose RA. This can often be hard to do because there isn't a standard test for RA. The symptoms may be similar to other joint diseases and may take time to develop in full. In order to diagnose the disease, your doctors will use:

- Your medical history
- A physical exam
- **─** X-rays
- Lab tests

Unlike other forms of arthritis, RA affects the lining of the joints. The result is painful swelling that can lead to worn down bones and deformed joints. In time, permanent damage to the joints may take place.

SIGNS AND SYMPTOMS

- **S** Fatigue
- **O** Joint redness
- **S** Fever

- Joint pain and tenderness
- Firm tissue bumps under the skin of the arms

Joint warmth

Joint stiffness, worse in the morning

Joint swelling

Weight loss

Early RA diagnosis and treatment can lessen the risk of permanent joint damage.

RA REVEALED



RA is a risk factor for heart attacks. Those with active RA, even those without high cholesterol, high blood pressure or diabetes are two to three times more at risk for heart attack.

WHAT TO WATCH FOR

RA increases your risk of developing:

Osteoporosis: Along with some meds used to treat it, RA can increase your risk of osteoporosis. This condition weakens bones and makes them more likely to fracture.

Carpal tunnel syndrome: If your RA affects the wrists, the swelling can squeeze the nerve that serves most of your hand and fingers.

Heart problems: RA can increase your risk of hardened and blocked arteries, as well as swelling of the sac that surrounds the heart.

Lung disease: Those with RA have a greater risk of swelling and scarring of the lung tissues. This can lead to shortness of breath and other breathing difficulties.

RA BY THE NUMBERS

2.5

Percentage of increase in RA cases in women between 1995 and 2007, according to Mayo Clinic research. Rates of RA cases among men during that time actually dropped.

FIND-OUT-MORE

Healthline:

What Do You Want to Know About Rheumatoid Arthritis? healthline.com/health/rheumatoid-arthritis

YOUR-FIRST-DOCTOR-VISIT

If you think you may be suffering from RA, schedule an appointment with your doctor. Fill out this form and take it with you to the visit.

Detailed description of symptoms:
Past medical problems:
Medical problems of parents or siblings:

Medications and dietary supplements taken:
Questions to ask the doctor:

Be ready to answer these questions your doctor may ask you:

- When did your symptoms begin?
- Have your symptoms changed over time?
- Which joints are affected?
- Does any activity make your symptoms better or worse?
- Are your symptoms interfering with daily tasks?

During the exam, your doctor will check:

- Joints for swelling, redness and warmth
- Your reflexes
- **─** Your muscle strength

X-rays

X-rays can help track the progression of RA in your joints over time.

Blood tests

A blood test may show the presence of an inflammatory process in the body, as well as look for certain antibodies. Antibody tests show up negative in 20 percent of cases.

FIND_OUT_MORE

WebMD: Diagnosing Rheumatoid Arthritis webmd.com/rheumatoid-arthritis/guide/diagnosing-ra

IMY CONTACTS

Emergency Contacts Emergency response: 911 Relationship: Cell Phone: () Home Phone: () Relationship: ____ Cell Phone: () Medical My General or Family Doctor: Phone: (___)_____ Rheumatologist: Phone: () Other specialist: Phone: **(**___**)**_____ Hospital: ______ Health Insurance Provider: Phone: () Case Manager: _____ Phone: ()

IMY CONTACTS

Other Professional Conta	cts
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RA MYTHBUSTING

RAMYTH

BUSTED!

Rheumatoid arthritis is the same as regular arthritis.

RA is a chronic, progressive autoimmune disorder. Osteoarthritis—what we consider "regular arthritis"—is caused by injury to aging joints. With RA, the body makes antibodies that attack its own tissues. These attacks are known as flare-ups.

Only old people get RA.

The disease begins between the ages of 30 and 55 for most people with RA. It's the peak group, but anyone can get RA.

Most people with RA end up in a wheelchair or nursing home due to the disease.

RA can be different for different people. Most will go on to live independently. The disease can progress and cause disability, but most people with RA these days do well with staying mobile and on their own.

RA isn't that serious of a disease.

If it's not treated in the right way, RA can be a threat to your health and mobility. When diagnosed quickly, a regular treatment plan can protect the joints from further injury. Long-term function and mobility for years to come is more likely for those who don't wait to get treatment.

Having RA means you can't work.

You may need to change or adapt some work tasks, but an RA diagnosis doesn't equal lifetime disability. You may have to limit activities during flare-ups but most people with RA continue to work

Most people with RA get cancer, too.

Those with RA are at slightly higher risk for developing lymphoma, but the overall risk is low.

Rest is best for painful, stiff joints for those with RA.

Joints feeling the pain and tightness of RA need stretching and exercise. Doctors encourage physical activity to keep joints mobile. While rest is necessary, people with RA should be moving more, not less.

MY TREATMENT PLAN!

TREATMENT BASICS

When it comes to treatment plans for RA, doctors have many options. Educating yourself is the first step in taking care of your RA. With your health care team you'll be able to learn about:

- Treatment options
- Types of exercises to do
- Relaxation and stress relief techniques
- Problem-solving
- Support groups

Education programs will help you learn about RA, lessen the pain, cope with the physical demands and the emotions, feel more in control and become more confident.

The goals of treatment are to:

- Reduce the pain
- Bring down swelling

- Help people feel better
- → Help people stay active
- Stop or slow down damage to the joints

The overall goal is of course to lead a full and active life. Know your disease. Know your treatment plans. Know yourself. It all adds up to a better life.

TREATIMENT OPTIONS LIFESTYLE CHANGES

A harsh reality of living with RA is the fact that you're going to have to make some changes to everyday routines in order to cope with the demands of the disease.

- Work exercise into your daily routine
- Get enough rest
- Take care of your joints
- Find ways to lower stress
 - Focus on eating a healthy diet

If these things have not been part of your lifestyle, it will be necessary to change your routine and make them a priority each day.

MEDICINE

There is no cure for RA. Medications can ease the swelling in your joints. This will lessen pain and stop or slow down any damage to the joints. A lot of drugs that treat RA can have serious side effects. Doctors will most often first prescribe meds with the fewest side effects. You may need stronger drugs or a mixture if your condition gets worse. See the MANAGING MEDICATIONS SECTION for more details.

SURGERY

People suffering from severe joint damage may seek out one of many kinds of surgeries. Surgery is used to:

- Lessen the pain
- Help an affected joint work better
- Make daily activities possible again

Know that surgery is not always the best treatment method. You may or may not be a candidate for surgery. Only your doctor can make that determination. Talk with him or her about surgery options.

REGULAR DOCTOR VISITS

Seeing your doctor on a regular basis will help track the progress of the disease. Doctors can also watch for side effects and change treatment when it's needed. Your visits may include x-rays, blood, urine and other lab tests to fully diagnose and assign proper care for the disease.



Smoking may trigger RA. Research has shown that smoking can play a part in as many as a third of all severe RA cases.

EXPLORING THE ALTERNATIVES

Some people use special diets, vitamins and supplements or other alternatives to treat their RA.

Medication prescribed by your doctors is the best way to battle RA. While alternative therapies to augment regular RA treatment may not be well tested or proven to be affective, many of these natural ways help people ease stress. Always talk with your doctor before starting an alternative treatment program.

These other therapies may benefit you.

EXERCISE

RA causes you to use your joints in ways that add stress to other body parts. Therefore, it is important to stay flexible and strong with regular exercise.

PHYSICAL THERAPY

Physical therapy may help heal and strengthen a body part weakened by RA, or an area that's causing you problems. To ease swelling and get people back in shape, physical therapists use:

→ Heat **→** Electrical stimulation

→ Ice → Range-of-motion exercises

Strengthening moves

This short-term plan might have you going for treatment a few times a week for a few weeks until you feel better.

OCCUPATIONAL THERAPY

Occupational therapists help patients figure out problem areas during daily activities. They then come up with plans of action to deal with these problems. These therapists can modify your work area and habits in order to deal with pain and discomfort and to avoid injuries.

MIND-BODY Therapies

These therapies help you use your mind to make your body feel better. Meditation, biofeedback, breathing exercises, and guided relaxation, as well as exercises such as yoga and tai chi can help you focus your mind. This is often helpful when coping with pain, and can make strength and flexibility better.

COUNSELING

Behavioral psychotherapy can help people identify problems in the way they think and act. It encourages them to change their behavior and can be helpful for those with RA who suffer from depression. Counseling can also help you cope with the daily stresses of chronic illness.

EXPLOR	ING THE ALTERNATIVES
HOT AND COLD TREATMENTS	Heat is one of the best and most basic home cures for RA relief. A hot bath or shower can help relax you and soothe joint and muscle pain. Alternating hot packs with cold packs can give you quick and lasting relief. A member of your health team can teach you how to use heat and cold safely.
ACUPUNCTURE	This is the ancient Eastern healing art of stimulating points in the body by sticking in thin needles and leaving them in place for a while. Only a few studies have shown that acupuncture can help with RA symptoms. Many people swear by it. Unless the thought of needles piercing your skin bothers you, it might be worth a try.
REST	If you have RA, it's crucial that you don't do too much. Take a rest whenever you need it. Pushing yourself too hard will make the fatigue even worse.

MY TREATMENT PLAN WILL INCLUDE:

FIND-OUT-MORE

NIH: Rheumatoid Arthritis and Complementary Health Approaches nccih.nih.gov/health/RA/getthefacts.htm

MANAGING-MEDICATIONS

Most people with RA take some form of medication to treat the disease. These drugs are used to:

> Take away pain

Lessen the swelling

Stop the disease from getting worse

RA MEDICATIONS CHART

WHAT THEY ARE WHAT THEY DO SIDE EFFECTS **NSAIDs** Take away pain Ringing in the ears Nonsteroidal Ease swelling Stomach irritation anti-inflammatory drugs (ibuprofen, Heart problems naproxen sodium) Liver and kidney damage Steroids Thinning of bones Reduce inflammation and Corticosteroid Weight gain pain medications such Diabetes as prednisone Slow joint damage Liver damage Slow the **DMARDs** progress of RA Disease-modifying Bone marrow anti-rheumatic Save joints and suppression drugs (methotrexate other tissues and others) from permanent damage **Biologic agents** (A newer class of Liver damage Target parts of the immune Bone marrow DMARDs) system that trigger suppression inflammation that

cause joint and tissue damage

Your doctor will determine what drugs to prescribe based on:

Your general health

How serious your RA is

How serious your RA may become

How long you'll have to take the drug

How well the drug works

The drug's possible side effects

SIP WITH SAFETY

Since some drugs that treat RA can be harmful to the liver, drinking alcohol is not advisable for people with RA. But research shows that people who drink alcohol run a lower risk of developing RA than those who don't. Some medical experts suggest that one drink a day for women and one to two for men may lessen the risk for developing RA.

CAUTION: Make sure the alcohol doesn't interact with other drugs. With some RA drugs, there is no safe amount of alcohol. Ask your doctor first.

FIND_OUT_MORE

Drugs.com: Rheumatoid Arthritis Medicinesdrugs.com/condition/rheumatoid-arthritis.html



DAILY MISDICINIS SCHISDULE

medicine in the first column and put a check mark in the boxes for the time(s) you take that medicine each day. Keep this chart with you when you travel and go to doctor appointments Use this page to keep track of your medicines and when you take them. Enter the name of the

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					BEFORE BEDTIME Enter time:
					AT BEDTIME Enter time:
					AT DURING BEDTIME NIGHT Enter time: Enter time:

ROTATE ME!

DAIILY MISDICINIS SCHISDUILE

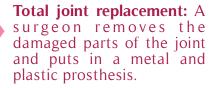
Use this page to keep track of your medicines and when you take them. Enter the name of the medicine in the first column and put a check mark in the boxes for the time(s) you take that medicine each day. Keep this chart with you when you travel and go to doctor appointments.

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MEDICINE					

WHEN SURGERY IS NEEDED

Sometimes medicine alone can't slow the damage to joints caused by RA. If that's true of your condition, you and your doctor may think about surgery to fix the damage. Surgery may restore the use of the joint, as well as easing pain and fixing deformities.

RA surgery types:



Tendon repair: A surgeon may be able to repair the loose or ruptured tendons around the joint.

Joint fusion: When a joint replacement isn't an option, a joint may be surgically fused in order to stabilize or realign a joint and to relieve pain.

Surgery is not without risk. Bleeding, infection and pain can accompany the procedure. Talk to your doctor about the benefits and risks of surgery.



Geography may play a role in RA risk.

Studies have shown the risk of RA grows higher the farther from the equator you live. In the US, people living in the Midwestern and Northeast states run a higher risk than those living west of the Rockies. Living in higher latitudes during ages 15-30 produces a greater risk later in life.

FIND OUT MORE

Everyday HealthTM:

Deciding on Rheumatoid Arthritis Surgery everydayhealth.com/rheumatoid-arthritis/rheumatoid-arthritis-surgery-decision.aspx

FIGHTING FATIGUES

RELAX, REST, RESTORE, REPEAT

Because RA affects your whole body and not just your joints, it can leave you feeling worn out and unwell. Sufferers describe the feeling as draggy, tired or like they're dealing with the flu. Fatigue, pain and depression are traveling companions of RA. Sometimes calling a timeout to relax, rest and regain control are all you really need. For people with RA, this is mandatory.

PERMISSION GRANTED

Give yourself permission to take time off. Rest and feel better. "I need to rest now," is all you need to tell family and friends who might not understand your need for a break. If you get mad or frustrated about it or try to ignore the fatigue, there's a good chance you'll make it worse.

DO THIS: Get enough physical activity.

You normally don't feel like exercising when you're tired. But exercise can give you more energy. When you have RA, aerobic exercise can lessen your fatigue greatly. It also helps strengthen your muscles, bones and joints, and makes your mood better.

DO THIS: Take regular rest breaks every day.



Staying in bed longer in the morning can just make you more tired. Instead, take regular breaks throughout the day. Look for some balance in your schedule. If you're more productive in the morning, fit in an afternoon nap. Two or three brief breaks could restore the energy you need to get through the day.

DO THIS: Don't eat heavy meals.

Choose a light lunch instead. A healthy morning and afternoon snack will sate your appetite and keep you going.

DO THIS: Get a good night's sleep each night.



A busy schedule, stress, not enough time for sleep, pain, depression, caffeine, drugs and alcohol are all culprits getting in your way of quality sleep. RA pain may keep you awake or awaken you in the night. Minimize these elements and explore some sleep therapy techniques. Good nightly sleep can fight fatigue.

FIND-OUT-MORE

Healthline: Tips and Cures for fatigue healthline.com/health-slideshow/rheumatoid-arthritis-fatigue

IIISTAYING ACTIVE

THE BENEFITS OF EXERCISE

During an RA flare-up, exercise can be hard or even impossible. But keeping active is helpful and doesn't have to hurt. Good exercise releases endorphins, the hormones that make you feel good. It also focuses your mind on the exercise and not your problems.



Exercise:

- Makes your mood better
- Helps you sleep better
- **Reduces stress**
- Eases joint pain, stiffness and swelling
- Boosts energy levels
- Makes muscle strength and flexibility better
- Strengthens bones to help prevent osteoporosis
- Controls weight
- Protects against heart disease

RAREVIEALED



All women are prone to weaker bones after menopause, but it's more common for those taking steroids to treat RA.

GETTING STARTED / GETTING MOTIVATED

Everyone with RA can perform some form of exercise. If you're not used to a regular exercise routine, there are small steps to start reaping the benefits.

RA FITNESS TIPS

- **Start slowly.**
- Learn some stretching exercises. This will keep joints flexible with little effort.
- Stay away from high-impact, intense exercising.
- Set a goal. Figure out something to shoot for: Losing a few pounds, getting in shape for a certain event, walking a 5K event.
- Set small targets along the way to your big goal to track your progress.
- Reward yourself when you reach your goals.

STEP 1

Talk to your doctor. Ask him or her what kinds of exercise would be best for you. The extent of your RA, your flexibility and other conditions

will inform the decision. If you're worried about shoulder joint inflammation for example, you may want to bike or walk instead of swim.

STEP 2

Keep it real. If you don't know where to begin or feel you don't have much time to exercise, start with five minutes. The next day, try to do a minute

more, and so on. On the other hand, if you're raring to go, be careful not to overdo it in the beginning. It's less important where you start than where you end up.

STEP 3

Make it easy. If getting to a gym is a hassle, work out at home or in your neighborhood. But if you like the energy of a gym, try to find one that's not

off your beaten path. You're more likely to stop in if you pass it every day.

STEP 4

Get help to get going. If you can, start off with the help from a physical or occupational therapist, or a trainer who has experience with arthritis

-- don't dive in on your own. They can teach you how to gauge your body's response so that you don't overdo it, end up in pain, and get discouraged.

STEP 5

Listen to your body. Stay with your walking pace from the week before instead of ramping it up if you don't feel well enough. Feel free to change

up the activity if you're not feeling your best. Don't be afraid to take a day off from exercising if you don't feel well or your joints are sore or swollen. Choose some moves you can manage and keep moving.

RAQ&A

What is the best exercise for RA?

The best exercise is the one you'll actually do. Pick something you're interested in trying. Make sure it won't hurt your joints.

THE IDEAL FITNESS PROGRAM USES THESE WORKOUTTYPES:

Low- to medium-impact aerobics

Swimming, biking, walking, aerobic dance, warm-water exercise elliptical machines

Strength training

Light weightlifting (1-2 pounds), resistance bands

Flexibility exercises

Stretching, yoga, tai chi, range-of-motion exercise:

Incorporate all three to get the most bang for your exercise buck. Always warm up and stretch before every workout.

WALKING 101

It's one of the simplest exercises you can do. The only gear you need is a decent pair of shoes. Look into the **Arthritis Foundation's 12-Week Walking Plan**:

arthritistoday.org/what-you-can-do/staying-active/walking/walking-plan.php

This plan features weekly timelines for beginning, intermediate and advanced walkers. Starting slowly and building up to greater distances and speeds is the best way to master a regular walking plan.

Finding a friend or friends to walk with can help you stay driven. Start a group and keep each other on track.

MY FITNESS/ACTIVITY GOALS:

MY EXERCISE CHART Use this chart to keep on track with your exercise routine.

Date	Exercise	Repetitions/ Time Spent	Finished
			/

Date	Exercise	Repetitions/ Time Spent	Finished

FIND OUT MORE

WebMD: Joint-Friendly Fitness Routines webmd.com/rheumatoid-arthritis/patient-support-12/slideshow-ra-exercises

RA AND NUTRITION

DIETARY GUIDELINES

To promote health and keep disease away, nutrition experts suggest these general guidelines:

- Eat a variety of foods
 - Balance food with physical activity
 - Keep your weight at a healthy level
 - > Pack your diet with grains, veggies and fruits
 - > Stay away from foods high in fat, saturated fat and cholesterol
 - Limit sugars
 - > If you drink alcohol, limit it

THE RA DIET

Ongoing studies seek to figure out a link between RA and diet. In the meantime, doctors urge RA patients to follow a healthy and balanced diet that leads to a healthy weight.

FOODS THAT CAN HELP FIGHT RA

Doctors and nutritionists recommend a diet with fish such as herring, mackerel, trout, salmon and tuna. The omega-3 fatty acids in these fish may prove to be the best anti-inflammatory in foods. Talk to your doctor about the right dosage if you choose to take a fish oil supplement.

Another way to possibly reduce inflammation is by getting more fiber from fruits, vegetables and whole grains. Fresh or frozen strawberries have been shown to benefit people with RA.

Extra-virgin olive oil may also help to lessen the inflammation that goes with RA. Use this oil as a low-fat alternative to higher fat cooking oils and butter.

RAREVEALED



While extra-virgin olive oil doesn't contain omega-3 fats, it does have some anti-inflammatory properties.

Many diets and fitness programs suggest a healthy diet based on plenty of plant foods, healthy fats and having fish a few times a week. This food plan has been known to help fight the risk of heart disease, high blood pressure, diabetes and weight gain. Try it for your RA. It just might help ease your symptoms.

RA Q&A

- I heard that fasting was a good treatment for RA. Is it true?
- Fasting is highrisk and not an acceptable method of treating RA. The effects, if any, are short-term, with symptoms coming back within a week of resuming a normal diet.

BEWARE OF...

- Fad diets
- Fast fat burning claims
- Miracle cures

MY HEALTHY SHOPPING LIST

GRAINS				
VEGGIES				
FRUITS				
DAIRY	PROTEIN			
	PROTEIN			

FIND OUT MORE

Healthline:

Anti-Inflammatory Diet for Rheumatoid Arthritis healthline.com/health-slideshow/anti-inflammatory-ra-diet

COPING AND SUPPORT

Coping with the effects of RA is rarely easy. But working with your doctors and health care team will help you come up with a strategy for coping. Give it time and learn the strategies that work best for you.

COPING TIPS

- **Take control:** Create a plan for managing your RA with your doctor and nurse. Mastering a plan will help you feel in charge of your disease.
- **Know your limits:** RA can bring on fatigue and muscle weakness. Rest when you're tired. Short naps can refresh you but make sure they don't keep you from sleeping well at night.
- Make time for yourself: Block out time to do what you like. Go for a walk, read, write in a journal, listen to music. Quietly think about your feelings and unwind from stress during this time.
 - Connect with others. Let your family know how you're feeling. They care, even if they don't know how to talk to you about your pain. Find a trusted family member or friend you can talk to when you feel overwhelmed. You can also connect with other people who have RA, through a support group nearby or online.

SUPPORT GROUPS

Support groups can be helpful for people living with RA. They can make your mood better, teach coping skills and pain relief methods, ease fears and provide a forum for people with the same condition. Seek out teaching groups led by professionals and run in a more formal way. These support sessions will work to empower you and teach you useful coping skills.

TYPES OF SUPPORT GROUPS:

Closed: Participants must be registered and have to be at all sessions.

Group therapy: Sessions are led by a mental health professional with a set purpose and time limit to reach a certain goal. Coping and relaxation skills may be taught.

Peer: Informal sessions led by fellow patients, with a focus on shared experiences.

Educational: Formal sessions that use presentations and question-and-answer periods.

Online: Internet chat sites attended by peers.

Your local Arthritis Foundation office, area hospitals and your health care team can direct you to RA support groups.

RA BY THE NUMBERS UP TO 75

Percentage of people with RA whose condition goes into remission during pregnancy. After delivery, flare-ups usually come back.

FIND OUT MORE

WebMD: Rheumatoid Arthritis Community exchanges.webmd.com/rheumatoid-arthritis-exchange

DEALING-WITH-DEPRESSION

RAREVEALED



RA and depression go together. The pain and stress of living with a chronic illness can plainly cause depression. But high levels of an inflammatory protein linked to depression is found in RA sufferers. The good news: RA meds often block the depression-causing protein.

BATTLING THE BLUES

Depression often goes along with RA, due to the pain, discomfort, fatigue and lifestyle changes one is forced to make. People with the disease are often twice as likely to feel the effects of depression as those without it. Talk with your health care team if you think you might be depressed. Your doctors may suggest antidepressants. These can sometimes fight the depression and the fatigue. Other nondrug options—like talk therapy or counseling—can present alternative methods for battling the condition and teach you ways for dealing with the pain.

THE BAD NEWS: Depression can double the risk of death for those with RA. More than just a bad mood, depression can be downright dangerous. Your doctor may realize that treating the depression is as important as treating the RA.

If you're feeling sad or hopeless, tell your doctor. He or she can't treat your depression if you don't share the info. Your depression may be related to your level of pain. Taking away the pain may also get rid of the depression.

Counseling and antidepressants are effective in treating depression. Talk to your doctor.

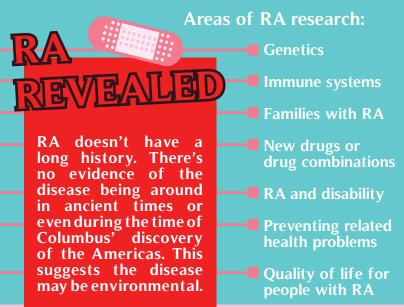
FIND OUT MORE

Healthline:

How Do I Cope with Rheumatoid Arthritis and Depression? healthline.com/health-slideshow/rheumatoid-arthritis-depression

THE FUTURE OF RA RESEARCH

While there is no cure for rheumatoid arthritis, and doctors don't know exactly what causes it, each day researchers keep looking for answers.



Researchers keep building on what they know about the disease. They look to find cures and better treatment plans that address the pain and swelling of joints and tissues. They hope that someday the pain and suffering of RA is a thing of the past. For you and countless others.

FIND-OUT-MORE

MedShadow: The Future of RA Treatments? medshadow.org/medshadow_blog/looking-future-ra-treaments/

NOTES

NOTES

RESOURCES

National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS)

877-22-NIAMS (877-226-4267) niams.nih.gov

Arthritis Foundation®

404-872-7100 arthritis.org

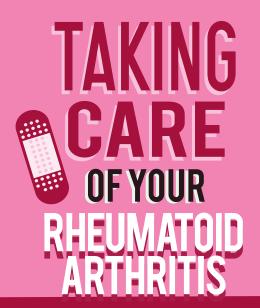
U.S. Food and Drug Administration 888-INFO-FDA (888-463-6332) www.fda.gov

NIH: National Center for Complementary and Integrative Health nccih.nih.gov

American Academy of Orthopaedic Surgeons (AAOS) aaos.org

Johns Hopkins Arthritis Center hopkins-arthritis.org

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RA. Rheumatoid arthritis. It just sounds painful.

The good news is that it doesn't have to be. This pocket guide will give you some background on the disease and prepare you with proven ways of dealing with RA. From diagnosis to treatment options and coping skills, use this guide to teach yourself and find relief.

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- © CONTACTS
- TREATMENT OPTIONS
- MANAGING MEDICATIONS

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