

Are there exercises I should avoid?

Impact exercises (e.g., running or jumping) put stress on the joints and may cause damage to the remaining cartilage. Some weight lifting exercises may be harmful. Please speak with your surgeon for advice.

Should I use a cane or crutches?

If you are walking with a limp, your surgeon may recommend an assistive device. You can damage other joints with an abnormal gait (walking) pattern. A cane helps distribute some force away from the involved leg and reduce pain.

Use a cane on the opposite hand of your affected joint. For example, if your left knee hurts, the cane goes on the right. The handle of the cane should reach your wrist when your arm is hanging at your side.

Sitting hurts my back. What is the proper way to sit?

Position yourself as follows:

- Head balanced above shoulders.
- Shoulders relaxed, not elevated.
- Upper back straight, not rounded.
- Lower back supported; a small towel roll often works well.
- Knees even with hips.
- Buttocks flat on the seat.
- Feet flat on floor or footrest.

Select a chair that has a firm seat and fairly straight back. Beware of deep, soft chairs or sofas. Change positions frequently.

Where can I find more information on how to manage my arthritis?

- The Arthritis Foundation — National chapter phone 1-800-568-4045
- *The Arthritis Helpbook*, by Katie Lorig, R.N., and James Fries, M.D.
- The Arthritis Foundation's *Guide to Living with Osteoarthritis*
- *The Arthritis Sourcebook*, by Earl Brewer, Jr., M.D., and Kathy Angel
- www.arthritis.org — Web site for the Arthritis Foundation
- www.rheumatology.org/public — Web site for the American College of Rheumatology

Frequently Asked Questions Managing Arthritis



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frequently asked questions

Managing Arthritis

What is arthritis?

Arthritis is a general term meaning “inflammation of the joint.” There are more than 100 different kinds of arthritic conditions that can affect the human body. To help provide smooth, pain-free motion to the joint, the bones in a joint are covered with a tough, lubricating tissue called cartilage. Osteoarthritis, the most common form of arthritis, is a degenerative joint disease that causes the layers of cartilage to gradually wear away until bone begins to rub against bone. This causes the irritation, swelling, stiffness, and discomfort commonly associated with arthritis. While surgery to replace joint surfaces has been one of the most successful innovations in the last century, there are other treatments that can be tried, either before surgery or in conjunction with surgery. Below are some of the most frequently asked questions from arthritis patients.

Will arthritis spread to other parts of my body?

There are many types of arthritis. Some types of arthritis, such as rheumatoid arthritis, almost always affect multiple joints, so it is not unusual for these types of arthritis to spread from one joint to another. Some patients may have osteoarthritis in both knees and hips, but this is unusual. Osteoarthritis does not “spread,” however, other joints may be affected, especially if you change your gait (walking pattern) to compensate for pain and lack of motion.

What causes fluid build-up in joints?

Cartilage can break off into the joint, causing the fluid-filled capsule surrounding the joint to become irritated and swell—similar to an irritated eye that sheds tears.

Why am I so stiff in the morning or when I get up from a chair?

Arthritis causes the muscles and tendons to become tight with inactivity, which causes stiffness. Moving the joint back and forth before rising will help.

How long will it be until I need a joint replacement?

In most cases, you can wait as long as you want. Your pain and change of lifestyle usually dictates when you are ready. However, there is some information that suggests that waiting too long may compromise the result. If you have increasing deformity or bone loss, waiting may make the surgery more complicated. Only an orthopedic surgeon can help you decide when surgery may be right for you. While you are waiting, you should maintain your health, strength, and flexibility.

Does it matter what I eat?

Consuming too much food can cause weight gain, which increases stress on the joints. For every pound that you are overweight, you add an additional three pounds of pressure across your joints. Likewise, every pound you lose removes three pounds of pressure from your weight-bearing joints.

Do vitamins help?

Studies have shown that people low in vitamins C and D may have a higher incidence of arthritis.

Should I use heat or cold treatments for sore joints?

Heat treatments increase local circulation, bringing more blood to the area, which makes the muscles and other joint structures stretch more easily. Cold treatments do the opposite by decreasing local circulation and reducing swelling. The chart below should help you decide what to do.¹

HEAT

Use **prior** to activity
Increases local circulation
Improves motion
Decreases joint ache
Helps you relax

ICE

Use **after** activity
Decreases local circulation
Decreases swelling
May reduce pain
Reduces inflammation

Is exercise good or bad for my joints?

Although exercise may cause some discomfort, proper exercise can help nourish the cartilage, strengthen the muscles, and prolong the life of your joints.

What types of exercise are best?

Swimming is good exercise for arthritis. Water’s buoyancy protects the joints from impact injury. Water also resists movement, which is helpful for strengthening. Water pressure can also assist with the reduction of swelling in joints and edema in the legs. There are several forms of water exercises, including swimming, participating in an exercise class, or walking in water.

Walking and yoga are also good exercises for arthritis. Check with your surgeon first to obtain any exercise precautions or guidelines. Walking is an excellent form of endurance exercise for almost anyone. You will need a good pair of shoes. While walking, you should be able to pass the talk test, meaning you should be able to carry on a conversation while exercising without feeling out of breath. If you are unable to speak easily, slow down to a more comfortable pace.

The following suggested walking program could help you get started. When you can walk 10 continuous minutes (including warm-up and cool down), follow this progression to gradually build your program.²

WEEK	DURATION	TIMES/WEEK
1	10 min.	3–5
2	15 min.	3–5
3	20 min.	3–5

Continue adding five minutes to each session until you reach 30–40 minutes in duration. Always warm up and cool down by walking slowly.

For an in-depth guide on starting and maintaining a walking program, look for the Arthritis Foundation book, *Walk With Ease*, at bookstores.

What about stretching?

Stretching helps maintain or restore normal joint motion. Flexibility is necessary for comfortable movement during exercise and daily activities. Joint motion also helps lubricate your joints and nourish your cartilage. Flexibility exercises should be done gently. If stretching hurts, you are pushing too hard. Flexibility exercises should be done before any more vigorous types of exercise. Generally, stretching is tolerated on a daily basis and is an excellent form of relaxation. However, all forms of stretching should be cleared with your surgeon.

What about strengthening exercises?

Strengthening exercises are important for everyone, especially for a person with arthritis. Joint swelling and pain can make muscles weak. Weak muscles are a problem with arthritis because strong muscles help absorb shock, support joints, and protect you from injuries. In addition, weak leg muscles are linked with increased disability from osteoarthritis. Fortunately, research has shown that strengthening exercises in the hip, knee, and ankle lead to improved balance and independence.³ You will need a supervised program to show you how to safely participate in a strengthening program.

How much exercise is too much?

If you note increased joint swelling, decreased joint motion, unusual or persistent fatigue, or continuous pain, you may be doing too much. You should expect some muscle soreness, especially if you are just beginning your program or have changed exercises.

How do I stay consistent with exercising?

- Seek help from a healthcare professional to assist you in setting up an individualized program.
- Make a plan. Write it down. Set goals.
- Exercise at the same time each day so it becomes part of your routine.
- Find an exercise buddy.
- Look for an appropriate exercise class.
- Stay in the habit of doing some exercise each day. On days when you have more pain, make an effort, even if you just do gentle stretching.
- Vary your exercise routine and rotate your exercises.
- Evaluate your progress and enjoy your success.

1. Mayo Clinic: “What’s best for sore muscles, heat or cold?” Mayo Clinic Health Letter, August, 2005.

2. Arthritis Foundation: “Walk with Ease: Your Guide to Walking for Better Health,” Atlanta: Arthritis Foundation, 1999.

3. American Geriatrics Society, *et al.*, Guideline for the prevention of falls in older persons. *Journal of the American Geriatrics Society*, 49:664–672, 2001.

