

Questions and Answers About Arthritis and Exercise

This article answers general questions about arthritis and exercise. The amount and form of exercise recommended for each individual will vary depending on which joints are involved, the amount of inflammation, how stable the joints are, and whether a joint replacement procedure has been done. A skilled physician who is knowledgeable about the medical and rehabilitation needs of people with arthritis, working with a physical therapist also familiar with the needs of people with arthritis, can design an exercise plan for each patient.

What Is Arthritis?

Arthritis is a general term that refers to many rheumatic diseases that can cause pain, stiffness, and swelling in joints and other connective tissues. These diseases can affect supporting structures such as muscles, tendons, and ligaments and may also affect other parts of the body. Some common types of arthritis are osteoarthritis, rheumatoid arthritis, systemic lupus erythematosus, gout, juvenile rheumatoid arthritis, ankylosing spondylitis, and psoriatic arthritis. Osteoarthritis is the most common.

Should People With Arthritis Exercise? Yes. Studies have shown that exercise helps people with arthritis in many ways. Exercise reduces joint pain and stiffness and increases flexibility, muscle strength, and endurance. It also helps with weight reduction and contributes to an improved sense of well-being.

How Does Exercise Fit Into a Treatment Plan for People With Arthritis?

Exercise is one part of a comprehensive arthritis treatment plan. Treatment plans also may include rest and relaxation, proper diet, medication, and instruction about proper use of joints and ways to conserve energy (that is, not waste motion) as well as the use of pain relief methods.

What Types of Exercise Are Most Suitable for Someone With Arthritis?

Three types of exercise are best for people with arthritis:

- **Range-of-motion** exercises help maintain normal joint movement and relieve stiffness. This type of exercise helps maintain or increase flexibility.
- **Strengthening** exercises help keep or increase muscle strength. Strong muscles help support and protect joints affected by arthritis.
- **Aerobic or endurance** exercises improve cardiovascular fitness, help control weight, and improve overall function. Weight control can be important to people who have arthritis because extra weight puts extra pressure on many joints. Some studies show that aerobic exercise can reduce inflammation in some joints.

How Does a Person With Arthritis Start an Exercise Program?

People with arthritis should discuss exercise options with their doctors. Most doctors recommend exercise for their patients. Many people with arthritis begin with easy, range-of-motion exercises and low-impact aerobics. People with arthritis can

participate in a variety of, but not all, sports and exercise programs. The doctor will know which, if any, sports are off-limits.

The doctor may have suggestions about how to get started or may refer the patient to a physical therapist. It is best to find a physical therapist who has experience working with people who have arthritis. The therapist will design an appropriate home exercise program and teach clients about pain-relief methods, proper body mechanics (placement of the body for a given task, such as lifting a heavy box), joint protection, and conserving energy.

Step Up to Exercise: How To Get Started

- Discuss exercise plans with your doctor.
- Start with supervision from a physical therapist or qualified athletic trainer.
- Apply heat to sore joints (optional; many people with arthritis start their exercise program this way).
- Stretch and warm up with range-of-motion exercises.
- Start strengthening exercises slowly with small weights (a 1- or 2-pound weight can make a big difference).
- Progress slowly.
- Use cold packs after exercising (optional; many people with arthritis complete their exercise routine this way).
- Add aerobic exercise.
- Consider appropriate recreational exercise (after doing range-of-motion, strengthening, and aerobic exercise). Fewer injuries to arthritic joints occur during recreational exercise if it is preceded by range-of-motion, strengthening, and aerobic exercise that gets your body in the best condition possible.
- Ease off if joints become painful, inflamed, or red and work with your doctor to find the cause and eliminate it.
- Choose the exercise program you enjoy most and make it a habit.

What Are Some Pain Relief Methods?

There are known methods to stop pain for short periods of time. This temporary relief can make it easier for people who have arthritis to exercise. The doctor or physical therapist can suggest a method that is best for each patient. The following methods have worked for many people:

- **Moist heat** supplied by warm towels, hot packs, a bath, or a shower can be used at home for 15 to 20 minutes three times a day to relieve symptoms. A health professional can use short waves, microwaves, and ultrasound to deliver deep heat to noninflamed joint areas. Deep heat is not recommended for patients with acutely inflamed joints. Deep heat is often used around the shoulder to relax tight tendons prior to stretching exercises.
- **Cold** supplied by a bag of ice or frozen vegetables wrapped in a towel helps to stop pain and reduce swelling when used for 10 to 15 minutes at a time. It is often used for acutely inflamed joints. People who have Raynaud's phenomenon should not use this method.

- **Hydrotherapy** (water therapy) can decrease pain and stiffness. Exercising in a large pool may be easier because water takes some weight off painful joints. Community centers, YMCAs, and YWCAs have water exercise classes developed for people with arthritis. Some patients also find relief from the heat and movement provided by a whirlpool.
- **Mobilization therapies** include traction (gentle, steady pulling), massage, and manipulation (using the hands to restore normal movement to stiff joints). When done by a trained professional, these methods can help control pain and increase joint motion and muscle and tendon flexibility.
- **TENS** (transcutaneous electrical nerve stimulation) and biofeedback are two additional methods that may provide some pain relief, but many patients find that they cost too much money and take too much time. TENS machines cost between \$80 and \$800. The inexpensive units are fine. Patients can wear them during the day and turn them off and on as needed for pain control.
- **Relaxation therapy** also helps reduce pain. Patients can learn to release the tension in their muscles to relieve pain. Physical therapists may be able to teach relaxation techniques. The Arthritis Foundation has a self-help course that includes relaxation therapy and also sells relaxation tapes. Health spas and vacation resorts sometimes have special relaxation courses.
- **Acupuncture** is a traditional Chinese method of pain relief. A medically qualified acupuncturist places needles in certain sites. Researchers believe that the needles stimulate deep sensory nerves that tell the brain to release natural painkillers (endorphins). Acupressure is similar to acupuncture, but pressure is applied to the acupuncture sites instead of using needles.

How Often Should People With Arthritis Exercise?

- **Range-of-motion** exercises can be done daily and should be done at least every other day.
- **Strengthening** exercises also can be done daily and should be done at least every other day unless you have severe pain or swelling in your joints.
- **Endurance** exercises should be done for 20 minutes to 30 minutes three times a week unless you have severe pain or swelling in your joints.

What Type of Strengthening Program Is Best?

This varies depending on personal preference, the type of arthritis involved, and how active the inflammation is. Strengthening one's muscles can help take the burden off painful joints. Strength training can be done with small free weights, exercise machines, isometrics, elastic bands, and resistive water exercises. Correct positioning is critical, because if done incorrectly, strengthening exercises can cause muscle tears, more pain, and more joint swelling.

Are There Different Exercises for People With Different Types of Arthritis?

There are many types of arthritis. Experienced doctors, physical therapists, and occupational therapists can recommend exercises that are particularly helpful for a specific type of arthritis. Doctors and therapists also know specific exercises for particularly painful joints. There may be exercises that are off-limits for people with a particular type of arthritis or when joints are swollen and inflamed. People with arthritis should discuss their exercise plans with a doctor. Doctors who treat people

with arthritis include rheumatologists, general practitioners, family doctors, internists, and rehabilitation specialists (physiatrists).

How Much Exercise Is Too Much?

Most experts agree that if exercise causes pain that lasts for more than one hour, it is too much. People with arthritis should work with their physical therapist or doctor to adjust their exercise program when they notice any of the following signs of too much exercise:

- Unusual or persistent fatigue
- Increased weakness
- Decreased range of motion
- Increased joint swelling
- Continuing pain (pain that lasts more than one hour after exercising)

Should Someone With Rheumatoid Arthritis Continue To Exercise During a General Flare? How About During a Local Joint Flare?

It is appropriate to put joints gently through their full range of motion once a day, with periods of rest, during acute systemic flares or local joint flares. Patients can talk to their doctor about how much rest is best during general or joint flares.

Are Researchers Studying Exercise and Arthritis?

Researchers are comparing the development of musculoskeletal disabilities, including arthritis, in long-distance runners and nonrunners. Preliminary results show that running does not increase the likelihood of developing osteoarthritis. Researchers also are looking at the effects of muscle strength on the development of osteoarthritis. Other researchers continue to look for and find benefits from exercise to patients with rheumatoid arthritis, spondyloarthropathies, systemic lupus erythematosus, and polymyositis.

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