

ARTHRITIS NEW ZEALAND

ENABLING A BETTER QUALITY OF LIFE

KAIPONAPONA AOTEAROA

Te whakapiki i te kounga ora

PSORIATIC ARTHRITIS



www.arthritis.org.nz



We understand that prior to and after the diagnosis of Psoriatic arthritis you may be feeling fearful and uncertain of the future. This is normal reaction to your altered state of health. Understanding your condition, its treatment and management will give you back a sense of control over your life.

WHAT IS PSORIATIC ARTHRITIS?

Psoriatic arthritis (PsA) is an inflammatory arthritis that may cause joint pain and swelling, scaly patches on areas of skin and thickening or pitting of the fingernails and toenails. PsA is an inflammatory disorder that occurs when your body's immune system, which normally fights harmful organisms such as viruses and bacteria, begins to attack healthy cells and tissue. The abnormal immune response causes inflammation in your joints as well as the overproduction of skin cells.

PsA usually starts slowly; some people develop skin symptoms first while others see joint inflammation first. Joint tissue becomes inflamed leading to pain, swelling and stiffness. Over time, the muscles and ligaments around the bone, the cartilage and the bones themselves, can become inflamed and damaged, often leading to joint deformities.

WHO GETS PSORIATIC ARTHRITIS?

Men and women are equally affected by symptoms of PsA, which usually appear during adulthood.

WHAT CAUSES PSORIATIC ARTHRITIS?

It's not entirely clear why the immune system turns on the body's own tissues, but it seems likely that both genetic and environmental factors play a role. Many people with PsA have a close relative, such as a parent or sibling, with the disease, and researchers have discovered certain gene mutations that appear to be associated with PsA.

HOW IS PSORIATIC ARTHRITIS DIAGNOSED?

PsA may take some time to diagnose. Doctors will ask about medical history and conduct a physical examination, assessing skin and joint symptoms. There will be a variety of blood tests and X-rays

SKIN SYMPTOMS – PSORIASIS

The skin symptoms of PsA usually appear before the joint symptoms – often years earlier. However, it is possible for both skin and joint symptoms to appear at the same time, or for the joint symptoms to appear first. A diagnosis of PsA will be made when both skin and joint symptoms are present and is confirmed by relevant tests.

The most common skin symptoms are scaly, silver-grey skin patches, particularly on the elbows, knees, lower back and scalp, as well as pitted, ridged, split or discoloured fingernails and toenails.

Most people with PsA do NOT have severe skin symptoms. If you have severe skin symptoms it does not mean you will have severe joint symptoms.



JOINT SYMPTOMS

Any joint can be affected by PsA; sometimes it is just one or two joints, but it can be more. Pain, swelling and stiffness of the joints are the most common problems, often affecting mobility. Swelling of the fingers and toes can give a 'sausage-like' appearance.

In some cases PsA can cause deformity, enlarging the joints so that walking is painful, and making shoes difficult to fit.

MANAGEMENT OF PSORIATIC ARTHRITIS

You are the ultimate manager of your healthcare. People who become active self-managers of their disease tend to be better informed and may experience less pain and disability, often having a better long-term outcome.



A range of health practitioners can provide support and advice:

- General Practitioner (GP) – helps coordinate the care and arranges referrals to other associated medical professionals
- Rheumatologist – specialise in diagnosing and treating bone, joint and muscle disorders
- Physiotherapist – helps with mobility techniques, stretches and exercises that are appropriate to PsA, including ways to help manage pain and daily activities
- Occupational Therapist – evaluates and designs programmes to accomplish basic daily tasks
- Podiatrist or Orthotist – provides professional assessment and management of feet, including supply of such things as shock absorbing soles for shoes



PsA support groups are also a valuable resource. People who have similar difficulties can provide empathy and share daily experiences and challenges. Talk to your local Arthritis Educator for a support group in your area.

GET TO KNOW YOUR MEDICINES AND TREATMENTS

It is very important to take medications to decrease inflammation and prevent joint damage. PsA can be managed with



a combination of medicines, topical creams and treatments to relieve skin symptoms and joint pain to help you maintain wellbeing. Although there is no cure, medicine and treatment options have substantially improved in recent years. Those used for PsA fall into the following categories:

- Analgesics – pain relievers, such as paracetamol, can help to ease the pain; sometimes used in conjunction with other drugs
- Non Steroidal Anti-Inflammatory Drugs (NSAIDs) – such as ibuprofen, are usually the first medicines prescribed in the treatment of psoriatic arthritis. COX-2 inhibitors, which include celecoxib, meloxicam and lumiracoxib fall into this category. NSAIDs can improve pain and stiffness by reducing inflammation
- Disease-Modifying Anti-Rheumatic Medicines (DMARDs) – these are medicines commonly used for rheumatoid arthritis, but may also improve some symptoms of PsA, especially inflammation of arm and leg joints. For all DMARDs, routine monitoring of blood counts and liver tests are mandatory and it is very important to immediately report any infection, eg; Methotrexate, Sulfasalazine
- Biologic Medicines – these are the latest disease modifying medicines available for treating severe PsA. A number of these medicines target molecules that cause inflammation, called tumour necrosis factor (TNF), reducing symptoms. The biologics that can be used for PsA include etanercept, infliximab and adalimumab
- Corticosteroids (usually prednisone) are powerful anti-inflammatory medicines. These medicines have possible side effects and require careful monitoring of blood pressure, cholesterol, glucose levels and bone density. These drugs can also be injected directly into inflamed joints (“cortisone” injections), which reduces the risk of generalised side effects.





Therapies available to treat your skin can be used alone or in combination. This can include creams, tablets or light therapy.

- Topical Therapies – these are creams and lotions that you apply directly to your skin and are usually the first treatment used for psoriasis. Some topical therapies require a prescription, but many can be bought over the counter at your pharmacy. Topical therapies can make your skin look better and feel more comfortable.
- Phototherapy – sometimes also called light therapy; it involves exposure to different types of high-intensity ultraviolet (UVA) light to help improve psoriasis.
- Photochemotherapies – this is when medicines are used in conjunction with phototherapy when the psoriasis is severe. These medicines can have serious side effects and will be closely monitored.

Some people find that as skin symptoms get better or worse, joint symptoms do the same at the same time. While not common, surgery is occasionally needed if joint damage has occurred. Operations may vary from minor ones to major surgery, such as hand surgery or joint replacement of the knee or hip. Splints can also be used to support weakened joints to protect them from injury and rest an inflamed joint by stopping it from moving. They may also improve the function of a damaged joint.



TIPS FOR LIVING WITH PSORIATIC ARTHRITIS

By managing PsA carefully, most activities should be achievable. For the best part, PsA is not a barrier to employment, raising a family, or keeping physically active. However, PsA affects people differently, so learning about the condition and what can be done is vital for self-management.

GOOD POSTURE IS VITAL

It is very important to pay attention to how you stand and sit at all times. It is also important to be



aware of posture as you move about. When standing, keep bodyweight balanced and even on both feet with shoulders relaxed (back and down). Keep the back of the neck long, allowing the chin to drop slightly forwards. Do not stand still for too long and when moving, try to maintain this tall, relaxed posture.

Have a good supportive chair when sitting; it should be firm, upright and allow the feet to touch the floor with knees and hips at right angles. Avoid neck strain if working at a desk or computer by having the screen at eye-level.

SLEEP

A good night's sleep is essential for rest and repair of the body. Use a mattress that gives support, but is not too hard, and a pillow which fits snugly under the neck supporting the head. Sleep in a position that is most comfortable, but if on the side, avoid a lot of bending at the hips and knees.

PSORIATIC ARTHRITIS AND EXERCISE

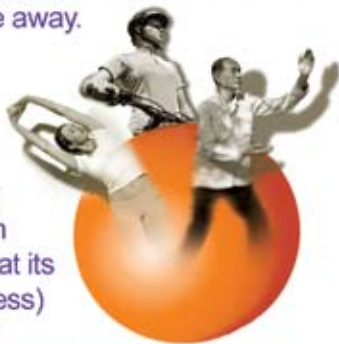
Any physical activity needs to be tailored to fitness level and severity of arthritis. It is important to stretch before and after any exercise and begin with light exercise, building up to more strenuous activity.

Exercise helps slow down the stiffening of the joints and soft tissues around the joints, and can help to manage pain. Regular exercise strengthens muscles, relieves tension and generally improves overall health. This can mean feeling more in control, along with the ability to do more in daily life.

It is important to achieve a balance between rest and exercise. Joints and muscles are designed for movement and without movement joints can stiffen and muscles may waste away.

TIPS TO KEEP YOU EXERCISING:

- Plan physical activity for times of least pain (when medication is at its maximum effectiveness)
- Do activities that are enjoyable and vary them to lessen boredom
- Increase the fun by exercising with a friend or group
- Be aware of joint pain and swelling – some stretching and discomfort is normal, but stop the activity if it causes pain
- Temporarily reduce or modify exercises during flares, but do not stop
- Set short-term goals and celebrate successes
- Keep an exercise diary to see the progress being made
- Work with a professional (physiotherapist) to ensure the exercise plan is best for you.





HEALTHY EATING

There is very little scientific evidence that diet has an effect on PsA. However, a good balanced diet is important for maintaining your general health, because it will positively affect your total wellbeing. Remember, your body relies on you to feed it the nutrients it needs to fight disease and resist deterioration.

Achieving and maintaining a healthy weight is important for everyone. However, for people with PsA, being overweight is especially unwanted. The extra weight puts unnecessary stress on joints such as hips, knees and the spine.

On the other hand, people with PsA often lose their appetite. If this happens to you, try to eat more meals in smaller portions throughout the day. This will help to provide the sustenance you need. For more information on healthy eating talk to an Arthritis Educator.

WORK CHOICES

Most people are able to continue in their choice of occupation but during flares what and how things are done might need to be adapted. Some time off work may be necessary. If choosing or changing jobs, it is helpful to select one where a range of postures, positions and tasks is possible. An active job, although physically hard at times with PsA, is better than sitting in a chair all day. If a job prevents much movement, compensate by moving more at other times. In some work settings an ergonomic assessment of the physical environment can be done.

RELAXATION

Relaxation can help to prevent and reduce excessive levels of tension and anxiety that often accompany PsA. If sleeping is a problem, then it is important to include a dedicated period of relaxation just before bedtime.



TIPS FOR EFFECTIVE RELAXATION:

- Find a place free from interruptions and loud noises
- Relaxation techniques are least effective after exercising or a big meal
- Support painful joints in a comfortable position
- A positive attitude is needed to allow the mind and body to relax
- Relaxing is a skill that gets better over time, so practice regularly
- Take in several slow, deep, controlled breaths
- Avoid distracting thoughts (perhaps repeating a word while breathing out)
- Look at a calming visual image to help focus
- Tense and relax muscles in a progressing order
- Meditation (focus on breathing, clear your mind and concentrate on an object)
- Massage – there are several types of massage. Swedish (therapeutic) massage promotes relaxation, Shiatsu (trigger point) therapy relieves pain and Deep Tissue massage relieves tension.



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WHERE CAN I LEARN MORE ABOUT PSORIATIC ARTHRITIS ?

- Contact your local Arthritis New Zealand Centre
- Ring our toll free number 0800 663 463
- Visit the Arthritis New Zealand website

www.arthritis.org.nz

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