RHEUMATOID ARTHRITIS & EXERCISE

PUBLIC

WHAT IS RHEUMATOID ARTHRITIS?

Rheumatoid arthritis (RA) is an autoimmune disorder that can impact different body systems and structures including the skin, eyes, lungs, heart and blood vessels. Unlike, osteoarthritis RA is usually symmetrical in clinical presentation affecting joints on both sides of your body at the same time.

HOW CAN EXERCISE HELP?

Exercise is one of the most effective and potent treatments for addressing these issues, as recommended by the American College of Sports Medicine guidelines (10). Physical activity provides numerous benefits by improving your joint health, mobility, psychological well-being and fatigue through improvements in muscle strength and oxygen capacity leading, to reductions in inflammatory mediators. When undertaking physical activity, it is important to consider and discuss what will work best for you in a time-efficient, goal-orientated, self-efficacious and individualised exercise prescription.

Physiotherapists and Accredited Exercise Physiologists are integral to help you manage your rheumatoid arthritis, whilst also considering your quality of life, activities of daily living, physical function and lifestyle management. Your GP and health professionals will also discuss a range of comorbidities that you may present, and work with you to consider exercise as another form of medicine. The current Australian physical activity recommendations suggest that you should aim to complete 150 min/week of moderate intensity exercise or 75 min of vigorous exercise with 2 days of resistance-based activities per week.

WHAT EXERCISE IS APPROPRIATE?

Resistance Exercise

Resistance based exercise is a safe and effective way to improve your muscle strength and physical function (11). Resistance training has been shown to reduce disability, inflammation and cardiovascular risk factors (12). Exercises should target large muscle groups to improve overall body function and can be undertaken using bands, body weight or weights/machines. Starting at a light intensity is important for the body to become accustomed to exercise and will assist in technique proficiency.

Aerobic Exercise

Aerobic exercise when undertaken at a sufficient dosage to achieve health-enhancing effects may elicit beneficial adaptations to your cardiovascular and metabolic systems. Aerobic exercise may also offer protection against common comorbidities such as hypertension and obesity (13). Aerobic exercise in the forms of cycling, walking, cross-trainer, and rowing are excellent ways to reduce cardiovascular risk factors. Aerobic exercise is safe and can improve measures of disability when undertaken on a frequent and consistent basis, e.g. 30 minutes on most days of the week (14).

OTHER TYPES OF EXERCISE

Hydrotherapy

Hydrotherapy when undertaken as adjunctive therapy to medication, has been shown to reduce inflammatory markers compared to medication alone (15). Hydrotherapy at a moderate intensity can provide cardiovascular improvements with the weightlessness minimising load on the joints. Hydrotherapy should be undertaken in conjunction with a resistance training program to improve muscle and bone health.

Tai Chi

Tai Chi is commonly discussed within the arthritis community for balance, strength, and relaxation benefits. For RA there is very low-quality evidence that can neither exclude or confirm positive changes in clinical outcomes, pain or disability (16).

EXERCISE AND MEDICATION

Depending on your medication and RA history there may be times that are more suitable to undertake physical activity compared to others. For example, if you are taking a disease modifying antirheumatic drug such as methotrexate or a monoclonal antibody such as Simponi there may be optimum times to exercise. If you are on these medications, you may find by the end of your treatment cycle that it is be slightly more difficult to move or your joints might appear more inflamed. Rest assured exercise will not increase your inflammation or cause damage to your joints when prescribed appropriately. Make your accredited exercise physiologist or physiotherapist aware of your treatment plan so they can modify your exercises accordingly.

WHAT IF I HAVE A 'FLARE-UP'?

During a 'flare-up' it is typically recommended to rest or alter/modify physical activity in the affected area(s). During the period of a 'flare-up' take things a little easier and be mindful of activities that may aggravate the affected area(s). For example, if you find your wrist or fingers affected then it may be recommended to either rest completely or alter your exercise program, e.g., reduced intensity, weight or changing from dumbbells to bands. In this example, if your wrist or fingers are affected it does not mean you can't exercise lower extremity joints by completing walking, cycling or lower limb weights. A physiotherapist or an accredited exercise physiologist will be able to guide you through a 'flare-up' to ensure you stay mobile and active. Still completing some modified physical activity will assist in lowering inflammation and keep you mobile.

RELATED INFORMATION AND REFERENCES

Exercise is Medicine Australia www.exerciseismedicine.org.au

Exercise Right www.exerciseright.com.au

Find a Physiotherapist www.choose.physio

Find an Accredited Exercise Physiologist www.essa.org.au

Endometriosis Australia https://www.endometriosisaustralia.org/

If you have any concerns about the safety of your patient in commencing an exercise program, please consider referral to a Sport and Exercise Physician.

Find a Sport and Exercise Physician www.acsep.org.au/

Prepared by Justin Holland

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