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“25 VITAL FACTS *You Must Know* ABOUT ARTHRITIS!”

**TO LEARN HOW TO LIVE A LONGER,
HEALTHIER AND HAPPIER LIFE...VISIT:**

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1. A Common American Problem: Osteoarthritis

Osteoarthritis is a condition in which low-grade inflammation results in pain in the joints. It is the most common form of arthritis. Also known as degenerative joint disease or arthrosis, osteoarthritis is caused by the wearing of the cartilage that covers and cushions the inside of the joints. This “wear and tear” on the joints causes sufferers to experience pain when bearing weight or moving the joints, including when walking or standing.

Nearly 21 million people in the United States suffer from osteoarthritis. The main symptom of osteoarthritis is chronic pain, which causes the loss of mobility and stiffness. The pain is characterized by either a sharp ache or burning sensation in the muscles and tendons surrounding the worn out joint. Osteoarthritis has also been known to cause a crackling noise called crepitus when the affected joint is moved or touched. Patients may also experience muscle spasms and contractions in the tendons. Joints may occasionally fill with fluid and humid weather often increases the pain for many patients.

Osteoarthritis commonly affects the hands, feet, spine, hips, and knees. As it progresses, the affected joints appear larger, are stiff and painful, and usually feel worse the more that they are used throughout the day. In the fingers, hard bony enlargements called Heberden’s nodes and/or Bouchard’s nodes may form. They may or may not be painful and limit the movement of the fingers significantly. Bunions may form on toes affected by osteoarthritis.

Osteoarthritis may be divided into two types: primary and secondary osteoarthritis. Aging causes primary osteoarthritis. As a person ages, the water and content of the cartilage decreases and its protein composition degenerates. This causes the cartilage to degenerate through repetitive use or misuse. Inflammation can also occur and stimulate new bone outgrowths known as “spurs” to form around the joints.

Secondary osteoarthritis is caused by other conditions or diseases such as congenital disorders like congenital hip luxation or abnormally formed joints, diabetes, inflammatory diseases, joint injuries, hormonal disorders, ligamentous deterioration or instability, obesity, osteopetrosis, sports injuries, and joint surgery. It is usually diagnosed through x-rays. The wearing out of cartilage that causes osteoarthritis is irreversible, so the goal of treatment is to reduce joint pain while improving and maintaining joint function. Treatment can be a mild pain reliever for most cases. However, in more severe cases, sufferers are usually prescribed with high dosages of NSAIDs – Non-Steroidal-Anti-Inflammatory-Drugs. The downside of these treatments is symptoms such as an upset stomach, cramping, diarrhea, and peptic ulcers.

Other measures of controlling osteoarthritis include weight control, appropriate rest and exercise, and the use of mechanical support devices such as knee braces, a cane or a walker. Regular exercise like walking or swimming is also encouraged, as well as applying heat and cold packs after exercise and doing relaxation techniques. Talk to a medical professional to find out more about this disease and its treatments.

2. Arthritis and Your Doctor: Why Choosing a Professional is Important

If you have recently been experiencing acute pain or inflammation and redness in your joints, you may want to visit your doctor and voice these concerns, which are most commonly symptoms of arthritis. Although millions of Americans are affected by arthritis, there is no known

cure, only treatments that help stop its progression or help you deal with the pain caused by the degeneration of tissues and cartilage in the joints. As you are going through this difficult period of time in your life, your doctor will be one of the most important people in your life. Therefore, it is important to see someone you trust and someone who is most knowledgeable about arthritis. Your family doctor may be able to diagnose you and may look out for your care in this situation, but it might also be necessary to see a specialist. If this is the case, spend time researching the doctors in your insurance network to find the best one for your case.

First and foremost, it is important that your doctor be concerned 100% with your health. Some doctors at larger hospitals, although they make sound medical decisions, have hundreds of patients every day. They may not be able to see you without an appointment many months in advance and while you are there they may be distracted by other patients. If you choose to see a busy doctor, you do so at your own risk.

Also look at a doctor's credentials. You will probably feel more comfortable with older and more experienced doctors, and it is important to make sure that your doctor has the proper licensing. Your health insurance may not otherwise cover your treatment. Speaking of health insurance, check with the terms of your agreement to be sure the doctor you see and the treatments he suggests will be covered. Some agreements allow you only to see specialists as referred by your primary care physician. Others give you a list of doctors under whom you will be covered. Stick within the rules of your insurance to avoid large insurance bills.

Lastly, find a doctor who makes you feel comfortable. You need to trust his or her advice, because ultimately this will determine the treatment of your arthritis. Your privacy should be considered as well. Many types of arthritis may require personal examinations, so you may feel more comfortable with a doctor of the same sex. Whatever the case, choosing your doctor is very important, so don't overlook this bit of research when you are first diagnosed with arthritis.

3. A Typist's Worst Fear: Carpal Tunnel Syndrome

Carpal tunnel syndrome is a medical condition in which the nerve that runs down the forearm, called the median nerve, is compressed at the wrist. This causes tingling, numbness, nighttime waking, pain, coldness and sometimes weakness in parts of the hand. Carpal tunnel syndrome is more common in women than it is in men and although it can occur at any age, it has a peak incidence for those around age 50.

Carpal tunnel syndrome may first present symptoms when the sufferer is trying to sleep. Symptoms of the condition may include paresthesia, which is a burning and tingling in the fingers particularly by the thumb and index and middle fingers, numbness, difficulty gripping and making a fist, dropping objects and weakness. The symptoms may progress if they are left untreated, causing an increase in pain and weakness, which can further restrict hand function. Many carpal tunnel sufferers often mistakenly blame the tingling and numbness that they are feeling on their sleeping position, believing that they are simply experiencing restricted circulation that has caused the hand to "fall asleep."

Most cases of Carpal tunnel syndrome are idiopathic, meaning that they do not have a designated cause and many who have the condition have symptoms that gradually increase over time. One common factor among those who develop it is increased hand use or activity, particularly repetitive activities though the correlation is often unclear. Physiology and family history may play a role in developing the condition.

There are several different ways to treat a patient with Carpal tunnel syndrome. One way is using a brace or splint to keep the wrist straight. During this time, patients are told to modify their activities for the two to six weeks recommended for wearing the brace. In addition to the brace or splint, they are given non-steroidal anti-inflammatory drugs. The downside of the reduced use of the wrist or hand is muscle atrophy, which can develop. They can also be limiting and uncomfortable to wear.

Another way to treat Carpal tunnel syndrome is through physiotherapy. This treatment includes a deep friction massage to help the swelling that is causing the nerve compression or ultrasonic therapy, which is most effective when used with other physiotherapy treatments. Localized steroid injections have also proven to be effective in providing temporary relief, though surgery is usually required to give most patients a long-term relief. Sufferers are also urged to avoid activities that can put repetitive stress on their hands. They are not encouraged to give up activity completely, however, but rather to frequently rest the hand to avoid aggravating it. Dietary changes and medication can also provide the body with necessary nutrients and supplements that are needed to repair the damaged nerves and help reduce inflammation. Vitamins and nutrients such as vitamin B complex, amino acids and hypercium are recommended. Over-the-counter anti-inflammatory medications such as aspirin, ibuprofen or Naproxen can be useful in controlling symptoms while pain relievers such as Tylenol will only help with the pain.

4. Arthritis and Surgery: What You Should Know Before Going Into the Operating Room

Arthritis is a condition that largely affects the joints of your body. There are many different types of arthritis and a number of diseases, such as lupus, can cause arthritic reactions. Some of the different kinds of arthritis can affect your life so drastically that you and your doctor feel the need for surgery. Surgery can be very helpful in relieving pain and stress on your joints, but there are a number of risks as well. To reduce the risk and have a better peace of mind when going into surgery, ask your doctor and surgeon a number of questions. You can have a much better chance of successful recovery from surgery if you are calm going into the procedure.

First, learn all you can about the surgeon that will be operating on you. What are his credentials? How many times has he successfully preformed this operation in the past? Who will be on his team in the operating room? If possible, meet with your surgeon before hand. Remember, the things that happen to your body are your choices, so if you feel uncomfortable with a surgeon, you do not have to go through with the procedure or you can request a different doctor.

When you meet with your surgeon, have him walk you through the procedure exactly as it will be done in the operating room. Although you probably will not be awake for the surgery, it is helpful to understand exactly what will happen in every step of the operation. If there are things you don't understand, your doctor should be willing to re-explain the procedure. Again, it is your body, so you have the right to understand what the doctors will be doing and why.

Also ask about alternative options. What will happen if you decide not to go through with the operation? Are there other treatment options? Understand every choice so that you can be sure that surgery is the right decision for you. You probably also want to know about the anticipated outcome of the procedure. For example, it is helpful to learn how your body will feel immediately after surgery. What is the recovery time for most patients? How will you continue to treat the arthritis after surgery? Will you need surgery again at a later time?

Lastly, take care of your finances. Insurance covers most kinds of arthritic surgery for most people, but be sure to read the fine print of your health insurance agreement—operations are expensive and it is difficult to cope with large medical bills as you are recovering. Also ask your doctor if all parts of your treatment are covered by insurance. Sometimes certain things, like anesthesiology (which can be extremely expensive), are not covered and a large bill surprises you.

Overall, it is simply important to be comfortable before you enter the operating room. By having a calm and positive outlook, you have a better chance of surviving surgery as well as more quickly recovering afterwards. Surgery is a good choice for some types of arthritis, so ask many questions to see if it is right for you.

5. Bamboo Spine: An Introduction to Ankylosing Spondylitis

Ankylosing spondylitis is a chronic, painful, progressive inflammatory arthritis that primarily affects the spine and sacroiliac joints. It is suspected that those who suffer from it are of a genetic predisposition. It causes the complete fusion of the spine, resulting in rigidity known as bamboo spine. Ankylosing spondylitis typically affects young men between the ages of 15-30 who show signs of chronic pain and stiffness in the lower part of the spine. Other affected body parts are the hips, heart, lungs, heels and other peripheral areas. Males are affected three times more than women. Recurring mouth ulcers may also be experienced and fatigue is also a very common symptom.

Ankylosing spondylitis is diagnosed by x-ray studies of the spine. Unfortunately, by the time the signs and symptoms show in an x-ray, a patient has already had ankylosing spondylitis for about 8-10 years. Tomography and magnetic resonance of the sacroiliac joints are now also used for a more accurate and earlier diagnosis.

There is no known cure for ankylosing spondylitis. However, treatments and medications are available to help reduce pain and symptoms in patients. Physical therapy and exercise, along with medication, are the main forms of therapy. Physiotherapy and physical exercises are usually preceded by medical treatment in order to reduce the inflammation and pain, and then this is followed by a check up with a physician.

There are three main types of medications used to treat ankylosing spondylitis. One type is Non-steroidal Anti-Inflammatory Drugs such as aspirin, ibuprofen, indometacin, naproxen and COX-2 inhibitors. These medications help reduce inflammation and pain. Another type of medication used to treat the disease is Disease-Modifying Antirheumatic Drugs. These drugs are used to reduce the immune system response through immunosuppression. The last type of medication is Tumor Necrosis Factor (or TNF) receptors. TNF blockers have been shown to be the most promising treatment in the disease, as they have been found to slow the process in most clinical cases and are highly effective in treating not only the arthritis of the joints but also the spinal arthritis associated with ankylosing spondylitis.

Surgery is an option in severe cases of ankylosing spondylitis, particularly in the form of joint replacements in the knees and hips. Surgical correction is also possible for those with severe flexion deformities (or a downward curvature of the spine), but is considered risky. A rheumatologist must approve physical therapy in advance since certain movements may have a detrimental effect on a patient. Physical therapy should be practiced with a professional. Exercises that have helped patients include swimming, stretching, yoga, tai chi, jogging and Pilates. If you have a family history of this disease, talk to your doctor to find out more information.

6. Be Proactive About Reactive Arthritis

Reactive arthritis, more commonly known as Reiter's Syndrome, is a type of arthritis categorized by swelling, redness, and heat in the joints, especially spine, and inflammation of other joints, the urinary tract, and the eyes. Reiter's Syndrome belongs to a family of arthritic conditions known as spondylarthropathies, which commonly affect the spine. Patients who suffer from Reiter's Syndrome experience fever, swelling, ulcers around the mouth, weight loss, sores on the skin, and pain in the joints. Like many other forms of arthritis, this condition often affects a person terribly for a period of time and then seems to disappear. Reiter's Syndrome patients often have a series of attacks, which is followed by a period of symptom-free time. Unfortunately, this condition almost always returns after a few months.

As with many of today's debilitating diseases, Reiter's Syndrome has no known cause and can affect anyone of any age, gender, or race. However, researchers do believe that Reiter's Syndrome is due in part at least to genetics, as tendencies seem to run in families. About 75% of people who suffer from Reiter's Syndrome have a specific gene that is shown to help contribute to the condition. Most commonly, this painful disease affects young men who are white and between the ages of 20 and 40. Reiter's Syndrome also has been known to develop after certain infections in the small intestines, genitals, or urinary tract. It is commonly linked to salmonella contamination, so you can take measures to avoid this condition by being sure your foods are thoroughly and properly cooked.

Because this disease affects a number of parts of the body, a variety of treatments must be used to help patients live more normal lives. Medications such as NSAIDs, which block pain and stop inflammation in joints, may be used. Antibiotics and skin medications are also useful to clear up the painful sores that form on the body. Those who suffer from Reiter's Syndrome also may see urologists to deal with urinary tract infections, occupational therapists to learn how to best help their joints in everyday life, dermatologists to clear up skin problems, and physical therapists to teach exercises that can be done to reduce pain and swelling in the joints. Patients may also wish to see doctors specializing in eyes, since this condition commonly causes inflammation in this area of the body as well. If you or someone you love has recently been diagnosed with Reiter's Syndrome, also called Reactive Arthritis, learn as much as you can about its symptoms and treatment options so that you can learn how to best live your life while dealing with this painful disorder.

7. Childhood Joint Pain: An Introduction to Juvenile Arthritis

Juvenile arthritis, also known as juvenile idiopathic arthritis, is the most common form of arthritis in children. Juvenile arthritis can occur in both boys and girls at any age, but symptoms most commonly begin during the toddler or early teen years. The cause of juvenile arthritis is still unknown, although theories suspect that it can have both genetic and environmental factors.

Symptoms of juvenile arthritis can be joint inflammation, joint contracture (which is a stiff, bent joint), joint damage and/or a change in growth. Other symptoms are joint stiffness or decreased activity level. The degree with which juvenile arthritis affects children varies by the symptom. The first signs are often joint pain or swelling and reddened or warmed joints.

Juvenile arthritis affects approximately 300,000 children in the United States. There are three types of juvenile arthritis: pauciarticular juvenile arthritis, polyarticular juvenile arthritis, and systemic onset juvenile arthritis. Of the 300,000 juvenile arthritis sufferers, half of these patients have pauciarticular, 40% will have polyarticular and 10% will suffer from systemic onset.

Polyarticular juvenile arthritis affects five or more joints. It tends to affect girls more than boys. In this type, the small joints of the hands are affected along with the weight-bearing joints, like the knees, hips, ankles, feet and neck. It may also be characterized by a low-grade fever or bumps and nodules on the body.

In pauciarticular juvenile arthritis, four or less joints are affected. Symptoms for this type include pain, stiffness or swelling in the joints. The most common joints affected are the knee and wrist joints. A sufferer's iris may also experience inflammation called iridocyclitis or iritis.

Systemic juvenile arthritis is the most serious, as it affects the entire body. It is characterized by arthritis, fever and a pink rash. Both the rash and fever may have sudden onset then suddenly just disappear. Systemic juvenile arthritis may have internal organ involvement and can lead to serositis. The spleen and lymph nodes may also become enlarged.

Juvenile arthritis may be treated with a combination of medication, physical therapy and exercise. Corticosteroids have also been injected into the joint in some situations. Surgery is occasionally an option, as well. Since there is no cure, the goals of treating juvenile arthritis are to relieve pain and inflammation, slow down or prevent the destruction of joints and restore use and function of the joints so that the child can have optimal growth, physical activity, and social and emotional development.

8. Ensure You're Insured: Insurance for the Arthritic

Insurance is very important for arthritis patients for many reasons. Without insurance, you could be denied treatment or go into debt due to many large medical bills. It is crucial for you to have insurance at all times, because arthritis is an expensive condition that affects millions of Americans of many different ages. If you do not currently have health insurance, speak with an insurance professional to find out what your options may be. By buying health insurance, you protect yourself and your family by ensuring that you all receive the best care possible for arthritis as well as the countless other diseases and emergencies that may arise.

When buying insurance, there are a number of things to consider. First, determine what companies are willing to insure you. Sometimes companies deny certain people with existing medical conditions or will only insure you at extremely high rates. Older Americans especially have problems finding affordable health coverage. However, there are government programs in place to help these people, as well as other options for those suffering from arthritis already.

Look at the guidelines of your terms before you purchase any type of health insurance. If you are lucky enough to be employed full-time, you may be able to get insurance at a group rate through your employer. This, however, is not possible for many arthritis patients. When considering other health care coverage options, ask about deductibles. This is the amount you have to pay before your health insurance company will pay the rest. Sometimes this is a flat fee, other times you are required to pay a percentage of the entire bill. Also check which services are covered. Make sure that your needs will all be met and watch for loopholes.

Another common thing that you need to look at is the health insurance's network. Some

programs allow you only to see specific doctors and pharmacists. Others have a higher deductible but allow you to see whatever doctor you'd like. This is a payoff you will have to consider, since there are advantages to both types of health insurance.

Regardless of what kind of health insurance you ultimately decide to purchase for you and your family, it is very important for you to have this type of coverage. If you have arthritis, you will be faced with medical bills including prescription drugs and doctor's fees. You may also need to see specialists. Talk with a professional to find out more about each of these options.

9. Collagen Build-up: Scleroderma

Scleroderma is a rare, chronic disease characterized by excessive deposits of collagen. It affects approximately 300,000 people in the United States. Scleroderma is four times as common in women as it is in men. Progressive systemic scleroderma, also known as systemic sclerosis, is the generalized type of the disease and can be fatal.

Scleroderma tends to affect the skin. The most evident symptom is the hardening of the skin and associated scarring, giving off a reddish or scaly appearance. Blood vessels may also tend to be more visible. Fat and muscle wastage will weaken the limbs and affect their appearance when larger areas are affected. In more serious cases, scleroderma can affect the blood vessels.

The seriousness of scleroderma varies between cases. The two most important factors to consider are the level of internal involvement that occurs beneath the skin and the total area covered by the disease. A patient may have only one or two affected areas or lesions or they may have many larger ones. Most patients of scleroderma have Raynaud's phenomenon, which is an arthritic vascular symptom that can affect the fingers and toes. In fact, the hands and feet may have a discoloration in response to cold. Raynaud's phenomenon and systemic scleroderma can cause painful ulcers on the fingers or toes. Calcinosis, or the deposit of calcium around the joints, is also common for sufferers of systemic scleroderma and can often be found near the elbows, knees or other joints.

There are three major types of scleroderma. They are diffuse, limited and morphea, or linear. The first type, diffuse scleroderma, is a systemic disease. It is the most severe form. It is characterized by a rapid onset and involves more widespread skin hardening. Diffuse scleroderma will generally cause severe internal organ damage, specifically to the lungs and gastrointestinal tract. It is more life threatening.

The second kind, limited scleroderma, is also known as CREST syndrome. CREST is an acronym that stands for "Calcinosis, Raynaud's syndrome, Esophageal dysmotility, Sclerodactyly, and Telangiectasia," which are the five major symptoms of limited scleroderma. CREST is also a systemic disease, but is much milder. It has a slow onset and progression. Skin hardening is usually just in the face and the hands and internal organ involvement is less severe. The prognosis is much better for limited scleroderma.

The last kind of scleroderma is Morphea, or linear scleroderma. This type generally does not have any internal organs affected. It just involves isolated patches of hardened skin. It is the least severe type of scleroderma.

There is no cure for this disease. However, there is treatment for some of its symptoms. These treatments include drugs that soften the skin lesions and reduce inflammation. Heat exposure has been known to help some patients. Ask your doctor for more information.

10. Gout: A Disease of the Big Toe that can Cause Big Problems

Gout is a form of arthritis caused by the accumulation of uric acid in the joints. It is an extremely painful disease. In most cases, it affects only one joint, most commonly the big toe. Gout is characterized by sudden, excruciating pain, swelling, redness, warmth and stiffness in the joint. Low-grade fever may also be a symptom. Gout sufferers will often experience intense pain whenever the affected area is moved. In addition, the inflammation of the swollen tissues around the joint also causes the skin to be swollen, tender, and sore even if it is slightly touched. The act of draping a blanket over the area, for example, would be very painful.

Gout usually affects the big toe, but can also attack other joints. These joints include the ankle, heel, instep, knee, wrist, elbow, fingers, and spine. A diagnosis is generally made on a clinical basis, although tests are often required to confirm the diagnosis of the disease. Blood tests commonly performed are full blood count, electrolytes, renal function, and erythrocyte sedimentation rate. They are used mainly to exclude other forms of arthritis.

There are four distinct stages of gout. They are asymptomatic, acute, intercritical, and chronic. The first stage is asymptomatic hyperuricemia. In this stage, the only symptom a person shows is elevated levels of uric acid in their blood. This stage does not usually require treatment. Acute gout, or acute gouty arthritis, is the second stage. In this stage, hyperuricemia has caused the deposit of uric acid crystals in joint spaces. This leads to a sudden onset of intense pain and swelling in the joints. Attacks commonly occur at night and can be triggered by stressful events, alcohol, drugs, or the presence of another illness. In the beginning, they may last between three to 10 days and can be months or years apart. As the disease progresses, the attacks can last longer and occur more frequently. The third stage is interval or intercritical gout and is the period between acute attacks. During this period, the sufferer does not have any symptoms and experiences normal joint function. The final stage of gout is chronic tophaceous gout. It is the most disabling stage and usually develops over a long period of time. In this stage, the disease has caused permanent damage to the affected joints and sometimes to the kidneys. This stage can be avoided with proper treatment.

The first line of treatment for gout is pain relief. Doctors often recommend drugs such as indometacin or other nonsteroidal anti-inflammatory drugs (or NSAIDs) such as ibuprofen or Preparation H, or intra-articular glucocorticoids, which are administered by a joint injection. If you want to learn more about gout and how it can be treated, speak to your doctor.

11. Healthy Living: Common Arthritic Mistakes

If you are at risk for arthritis or have recently been diagnosed, there are a number of things you can do to help battle this condition. However, many people who later more severely suffer from the disease have found that their condition has worsened because they did not follow their doctor's advice at onset. Arthritis, contrary to popular belief, is a very serious medical condition and you must learn to do all that you can to combat it in its early stages. This can ultimately lead to a healthier life in your later years. The following are some common mistakes that people make when they are first experiencing joint pain.

Seeing your doctor regularly is important. If you are experiencing joint stiffness, pain, or swelling, you should suspect arthritis. Of course, this is not always the case, but many people tend to brush off what could be signs of a very serious condition. By catching arthritis before much damage has been done to your joints, you can begin a new exercise program and take medications that will stop the onset of arthritis. This can add years to your life and prevent horrible pain in your joints later down the road. Arthritis is a disease that affects a person for many months and then suddenly may go into remission. Don't just let your pain go away. It will always come back, and it will be a little worse every time. It is important to see your doctor now.

A second mistake people make is not taking the medications or herbal supplements as suggested by their doctor. It is a good idea to get a second opinion if you believe your doctor has not suggested the best course of action. However, you should ultimately trust medical professionals in most cases. By not taking your medications, you could hurt your chances of a pain-free future. Taking the wrong dosages is a common mistake as well. Ask your pharmacist to cut your pills if needed and get help from a relative with filling a pillbox every week. Certain drugs interact with the body and with one another in ways that could be deadly if taken in the wrong doses.

Living a healthy life is always important, so another mistake that is commonly made is resisting this new mindset for a better lifestyle. Stop cheating on your diet. Quit Smoking. Drink alcohol only in a moderate amount. Get plenty of sleep. Exercise regularly. All of these life changes help you lose weight, breathe more easily, and reduce stress levels. Overall, you will be living a healthier lifestyle, and by doing these things you can also help reduce the pressure on your joints and help your body be more receptive to medications.

Overall, listen to your doctor, family, and friends. Stay healthy and avoid mistakes in order to reduce your joint pain and deal with your diagnosis of arthritis in a more productive way.

12. How Diet Affects Arthritis

Arthritis sufferers can help reduce their pain by changing their diets. There is no solid proof that any particular food helps or hurts. Sufferers are advised to have a healthy diet, keep their weight down, avoid eating excessive amounts of carbohydrates, keep a low-fat diet, and avoid soda and acidic foods. Most physicians recommend the oral intake of glucosamine, which is a natural substance found in almost all tissues in the body and involved in the biosynthesis of glycosaminoglycans, the main ingredient of the fluid that fills the space between joints and cartilage. Glucosamine is not found in food sources; rather the body produces it naturally. If for some reason the body does not produce enough of it, the deficiency can lead to the development of arthritis.

There are several foods and dietary supplements that may be useful for treating arthritis. Antioxidants, including vitamins C and E have been known to provide relief. Research has suggested that drinking a glass of orange juice daily may lower the risk of developing some inflammatory forms of arthritis, as carotenoids including beta-cryptoxanthin and zeaxanthin have been found to have a protective effect. Beta-cryptoxanthin is an active form of Vitamin A. Vitamin A is recognized as being important for skin and bone health, as well as immune function. Some fruits and vegetables that are rich in this vitamin are yellow apples, apricots, cantaloupes, grapefruit, lemons, mangos, oranges, peaches, pineapples, carrots, sweet corn, and sweet potatoes.

Some doctors and sufferers believe that particular foods act as allergens and trigger arthritis flares. Suspected foods include caffeine, dairy products, nightshade vegetables (for example,

tomatoes and peppers), sugar, additives and preservatives, chocolate, red meats, and salt. Doctors also recommend weight loss for some sufferers since it can help serve in the relief of the pressure on the joints. A healthy diet, as everyone knows, is essential in weight loss.

Other helpful dietary supplements include ginger, which has been known to moderately alleviate knee symptoms, and Omega-3 fatty acids in the form of fish oil. Vitamins B9 and B12 have been found to significantly reduce hand pain by presumably reducing systemic inflammation, but only when taken in large doses. Patients with arthritis may have a vitamin D deficiency, so supplementation with vitamin D3 is recommended for pain relief. Often times a person's diet depends on the type of arthritis they suffer from. Those suffering from osteoarthritis are told to increase their saturated fat intake while those suffering from rheumatoid arthritis are urged to maintain a diet high in protein and calcium but avoid too much weight gain. However, there is no one effective dietary plan to totally alleviate arthritis pain.

13. Immune Attack: Rheumatoid Arthritis

Rheumatoid arthritis is a chronic, inflammatory, multi-system, autoimmune disorder that causes the immune system to attack the joints. It is a disabling and extremely painful condition and can lead to a substantial loss of mobility due to pain and joint destruction. Rheumatoid arthritis is systemic and also often affects different tissues throughout the body, including the skin, blood vessels, heart, lungs and muscles. Rheumatoid arthritis most frequently affects those between ages 20-40, but can start at any age. Family history is an important risk factor. It is three times more common in women than men and up to four times more common in smokers than in non-smokers.

The symptoms that distinguish rheumatoid arthritis from other forms of arthritis are the inflammation and soft-tissue swelling of many joints at the same time. This is known as polyarthritis. The joints are usually affected asymmetrically and then progress in a symmetrical fashion as the disease progresses. Unlike other forms of arthritis, such as osteoarthritis, the pain generally improves with the use of the affected joints.

As the disease progresses, the inflammatory activity leads to erosion and destruction of the joint surface, impairing their range of movement and therefore leading to deformity. In the fingers, the bones typically deviate outwards, towards the pinky finger and assume unnatural shapes. Deformities in those suffering from rheumatoid arthritis include the Boutonniere deformity, the swan neck deformity, and the "Z-Thumb" deformity.

Since rheumatoid arthritis is a multisystem disease, other diseases and conditions may form as a result of it. Many patients with rheumatoid arthritis also have anemia. Anemia is a deficiency of red blood cells and/or hemoglobin and results in the reduced ability of oxygen to be carried to the tissues. It is a chronic disease. Sufferers may also experience splenomegaly (the enlargement of the spleen), Felty's syndrome, and Sjögren's syndrome (an autoimmune disorder in which immune cells attack and destroy exocrine glands that produce saliva and tears). Dermatological affects include nodules on exterior surfaces. Fibrosis may occur in the lungs either spontaneously or as a result of treatments.

There are several criteria for diagnosing rheumatoid arthritis. Stiffness in the morning that persists for longer than one hour is an example, as is arthritis and soft-tissue swelling of more than three out of 14 joints or joint groups. Arthritis of hand joints, symmetric arthritis, subcutaneous nodules in specific places, a rheumatoid factor at a level above the 95th percentile and radiological changes suggested of joint erosion are also a part of the criteria. At least four of these criteria have to be met in order to establish a diagnosis.

Treatments for rheumatoid arthritis are divided into disease-modifying antirheumatic drugs (DMARDs), anti-inflammatory agents and analgesics. DMARDs are known to produce durable remissions and delay or halt disease progression, preventing bone and joint damage in particular. Anti-inflammatory agents and analgesics improve pain and stiffness but do not prevent joint damage or slow down the disease progression.

14. Learn to Live Differently: How you can Benefit from Medical Professionals

If you have been recently diagnosed with arthritis or another condition that causes discomfort in the form of pain or inflammation at the joints, you may want to consider visiting an occupational therapist to better learn how to live your life or paying for home care so that you can have the help you need during this time in your life when living independently may otherwise be difficult. Occupational therapy is an important type of care that can help you better learn to adjust your daily living to take arthritis into account. Home care professionals also make daily life easier, often times by doing some of the work for you. In both cases, you can live a more fulfilling life with the help of these professionals in the medical field, and by the help of your friends and family.

Occupational therapy is something that your primary care doctor may recommend. Check before your appointment to see if your occupational therapy is covered by your health care insurance plan. Occupational therapists have a professional license and are trained to teach those suffering from different diseases and illnesses how to do things in everyday life. When you first start experiencing arthritic pain, you may find that the most difficult thing with which you must deal is not the pain itself but the loss of independence. Arthritis can lead to hand deformities, making many tasks difficult and may even confine you to a wheel chair. Occupational therapists, either at their office or at your own home, will teach you different techniques for personal grooming, dressing, getting in and out of bed, and even driving. With their help you can maintain a certain level of independence that would not otherwise be possible.

Other home care professionals can also be used to your advantage to avoid having to inhabit nursing homes or move in with relatives. Some communities have meals on wheels programs that can help you cook for example. This service, and many other services, is especially designed for senior citizens who are striving to remain independent. There are also services that send nurses to your home daily to help check your vital signs, administer medication, and other care for you. When you are diagnosed with arthritis, some of these things may not be possible on your own with the help of such services. Arthritis doesn't have to be the end of your life. Even when your condition is severe, occupational therapists and other home care professional can help you continue to enjoy your normal lifestyle.

15. Lupus and Arthritic Tendencies

Systemic Lupus Erythematosus, also known as lupus, is a chronic, potentially debilitating or fatal autoimmune disease in which the immune system attacks the body's cells and tissue. This results in inflammation and tissue damage. Lupus can affect any part of the body but tends to harm the heart, joints, skin, lungs, blood vessels and the brain and nervous system. Although people with the disease may have many different symptoms, some of the most common ones include extreme fatigue, painful or swollen joints (arthritis), unexplained fever, skin rashes, and kidney problems. While the disease is treatable, there is currently no known cure for it.

Prognosis is generally worse for men and children than it is for women. However, more women have the disease. It is also three times more common in African American, Hispanic, Asian, and Native American women than in Caucasian women. Lupus does run in families, but the risk factor is usually low. If symptoms are developed after age 60, the disease has been known to run a more benign course.

Advances in diagnosis and treatment have improved the survival rate of sufferers in recent years. In the 1950s, most patients diagnosed with the disease had a survival expectancy of five years. Although there is no cure for lupus, it can effectively be treated with drugs, which allows most people with the disease to be able to lead active, healthy lives. Lupus is characterized by periods of illness and periods of wellness. These periods are referred to as flares and remission, respectively.

The exact cause of lupus is unknown. Doctors and researchers have not reached a consensus on whether it is a single condition or group of related diseases. There are three ways that lupus is thought to develop. They are genetic predisposition, environmental causes, and drug reaction. The first cause, genetics, is not certain but only indicated by research. Several genes need to be affected for lupus to occur, in particular the ones on chromosome 6. However, these mutations may occur either randomly or be inherited.

Lupus may also be brought on by environmental factors. These factors may include medications such as antidepressants and antibiotics, extreme stress, exposure to sunlight, hormones and infections. Drug-induced lupus is a form of the disease that is caused by medications. Symptoms of this form are similar to those of systemic lupus erythematosus, such as arthritis, rash, fever and chest pain. However, they typically stop when the drug is done being taken.

Overall, patients do not need to let lupus run their lives. Ask your doctors about more information about this disease—with optimism and a devotion to treatment you can overcome this disease.

16. Myths and Misconceptions about Arthritis

Arthritis is a medical condition that affects millions of Americans and many more people worldwide, and yet a number of people still cannot separate the myths and misconceptions from the truths about arthritis. If you or someone you know suffers from arthritis, do everyone a favor and learn to separate the facts from the fiction. Arthritis is a varied disease, with over 100 different types of disorders, but with a little research, you can learn what is true about arthritis and what is simply folklore.

Arthritis, most importantly, is not simply a minor inconvenience, like many people believe. Although it may not affect everyone with the same intensity, arthritis can be potentially life changing and cause severe pain. It can also ultimately cause death. Some of the more severe forms of arthritis cause people to be confined to a wheelchair, result in vision and hearing loss, or other difficult disabilities.

It is also a common myth that arthritis affects only older people. This is entirely untrue. In fact, one of the more common forms of arthritis is, unfortunately, juvenile arthritis, which starts between the ages of six months and 16 years. Anyone of any age can experience pain in the joints and other types of arthritic symptoms. Arthritis also affects both genders and all races and ethnicities, although some types of arthritis are more or less common for certain groups of people.

Arthritis is a disease that many associate with cold and wet. This also is largely untrue, or there would be no one with arthritis living in Los Angeles. It is proven that you have a better chance of relief from arthritic symptoms if you live in a sunny climate that is less humid, and heat has been proven to help with pain caused by swelling and redness in the joints, but nothing indicates that cold weather itself causes arthritis to start.

Sadly, the last arthritis misconception that is common among Americans is that the condition can be cured. Although science is taking leaps and bounds in joint pain research, arthritis and the many diseases and illness caused by it or associated with it are incurable, so those who are diagnosed with arthritis will more than likely need to deal with the condition for the rest of their lives. The symptoms can be treated, but they very rarely ever go away. Arthritis is a much more serious condition than many realize, and by busting these myths you can create a better understanding between those who do and do not have this disease.

17. No Pain, No Gain? Dealing with Your Arthritic Pain

Pain is your body's way of alerting you that something is wrong with the body. For body-builders, who often say "No pain, no gain," pain is a sign that they have worked their muscles to the point of destruction, and that the body will rebuild them to be even larger. However, most pain is not that productive. If you suffer from arthritis you probably experience acute pain in your joints, and this pain can keep you from enjoying life. Therefore, it is important to have a pain management plan so you can deal with your arthritis but still live from day to day with little intrusion.

Like a red flashing light, pain is your body's signal that you need to stop what you are doing and take action about your body's health. Although pain is very natural, it does not have to be unbearable. There are a number of things that cause your arthritic pain. First, pain can be caused by inflammation in the joint. This type of pain is usually accompanied by redness and swelling and is common in younger arthritis patients or those just developing the condition. A second cause of pain is damage to the joint tissue. We commonly feel as though we've pulled a muscle when this type of pain occurs and it can be a condition due to stress on a joint or injury.

Next, pain can be caused by fatigue. Although you may simply have a small amount of lingering pain, being tired can make you experience this in a more profound way. Think of it in terms of a headache—at the end of the day, when you are tired, the headache seems much worse even though in actuality it is probably no different than it was in the morning. Joint pain works in the same way. Lastly, depression and stress can cause pain or make your pain seem worse than it really is. This is a vicious cycle to fall into—you get depressed because you have pain, which causes the pain to heighten, which causes you to become more depressed, which causes you to feel even worse, and so on.

Because arthritic patients are likely to feel a lot of different kinds of pain, it is important to have a pain management system. This includes eating a healthy diet and exercising regularly in ways that will help your condition, as well as taking medication, having your doctor's phone number on hand for any questions, partaking in alternative medical procedures like massage or acupuncture, relaxing as much as possible, and continually educating yourself about arthritis and the research being done on this condition. Stay optimistic about your outlook on life and deal with pain as it comes—arthritis is difficult, but you can overcome it to live a normal life.

18. Other Treatment Options: Alternative Arthritis Therapies

When you suffer from arthritis, there are a number of treatment options available to help you live the most comfortable life possible. Doctors may recommend certain exercises, a diet change, medications, and even surgery. However, there is a whole other realm of pain relief that you should consider when thinking about and discussing the many treatment options with your doctor and other medical professionals—alternative medicine has helped many types of arthritis patients. Alternative choices include dietary herbal supplements, acupuncture, massage, meditation, and prayer, among other things. While most doctors don't consider these methods "medicine" in the traditional sense, more and more studies are proving that these things really do work. Is it the placebo effect? Maybe. But no matter what the case may be, if these types of treatments can help you with your arthritis, they are worth considering.

Herbal supplements are often readily available over the counter and provide you with a generally safe and healthy way to control pain and the other symptoms of arthritis. *Arthritis Today* annually publishes a guide to the different herbal pills you can take to help your condition. It is important to remember that, while these pills are generally very natural and safe, they can still interfere with traditional medications. When you begin a new supplement regimen, talk to your doctor about it to be sure that you won't experience any negative side effects from different drugs interacting with one another. Also speak with your doctor or a pharmacist to find out the potency of the supplements you wish to take and how you can expect them to affect your body.

Acupuncture is a form of TCM (or Traditional Chinese Medicine) that more and more patients are finding very helpful. The procedure, which includes sticking tiny hair-thin needles into points on your body, may at first sound scary, but the procedure is very safe and relatively effective for most patients, especially when used in conjunction with traditional Western medical treatment. The acupuncturist will first diagnosis your overall health by asking you questions, reading your face, looking at your skin and tongue, and learning about your body and emotions. He or she then treats your body's energy by stimulating the flow with needles.

An acupuncturist can also do massage, or you can benefit from traditional Western massages. This type of treatment works the muscles and helps you relax. Of course, a massage can be quite expensive, so truly gage your body's reaction to it (and to all procedures) before scheduling months' worth of sessions.

Lastly, you can use meditation or prayer as a form of treatment. Meditation does not have to be religious and can simply be a way for you to relax. Prayer usually is the same idea, but with a religious affiliation. Both are good ways to be thankful for your life, even though you are experiencing pain. Overall, prayer, meditation, and all of the other alternative treatments I mentioned work well for many who are experiencing arthritic pain, so you should research and consider these treatment options.

19. Paget's Disease: Prevention and Treatment

There are a number of different kinds of arthritic conditions—over 100—and one of these conditions is a debilitating disorder known as Paget's Disease. This form of arthritis usually affects patients who are in their later years of life, between the ages of 50 and 70. This chronic skeletal condition is similar to osteoarthritis, so it sometimes gets misdiagnosed at first. Paget's Disease can

be very painful and make life difficult, but there are many things you can do to prevent this disease from ever happening as well as a number of treatment options if you have already begun to develop this disease.

Paget's Disease is characterized by enlarged and deformed bone structure in one or more parts of the body. The pelvis, legs, skull, and back are most commonly affected in this disease, which results in high amounts of arthritic pain and can also account for hearing loss when occurring in the skull. Patient's bones are very fragile and therefore fractures occur easily. There is no one known cause of Paget's Disease, but there are many things a patient can do if they develop this type of painful condition.

Paget's Disease occurs when the enzyme SAP is overproduced in the bone, causing it to abnormally grow and become weak. By measuring SAP, doctors can accurately determine if the pain you are experiencing is due to Paget's, although you may see some other tell-tale signs, such as bowed limbs. SAP is measured most often with a blood test and higher than normal levels, along with normal kidney function, indicate Paget's Disease. Doctors can also use SAP level readings to chart how patients are reacting to certain forms of treatment for their condition.

Bisphosphonates and calcitonin are the two types of drugs that are available by the Food and Drug Administration to treat Paget's Disease. Doctors may also sometimes recommend surgery for fractures or extreme deformities. Alternative medical treatment options can also help patients cope with the pain. This includes acupuncture, massage, cupping, meditation, and Eastern exercises like yoga.

It is important to remain optimistic throughout your treatment. Paget's Disease can be extremely painful, but it is possible for patients to live fulfilling lives even when suffering for this disease. Learn all you can about this condition and stay educated on new medications and treatment options so that you can best take care of your body and stay as healthy as possible.

20. Psoriatic Arthritis: Millions Searching for a Cure

Psoriasis Arthritis is a disease that affects millions of people, but a cure has yet to be found. Categorized by swelling in the joints and scaly patches on the skin, this type of arthritis is related to the skin condition psoriasis, which also affects millions of people worldwide. If you or a loved one has recently been diagnosed with psoriatic arthritis, it is important to research this condition in order to fully understand its symptoms and treatment options that are available for these pains. By learning all you can about psoriatic arthritis, as well as general arthritic conditions and drugs, you can better know how to treat your body. Your doctor should be able to provide this type of information to you and can also direct you to library books that can be of use and organizations that can be located on the Internet and at centers across the country.

Most people diagnosed with psoriatic arthritis experience swelling in joints of the body, including wrists, knees, the back, elbows, and fingers. This condition also causes grey areas of skin that are very dry around the elbows, knees, and lower back. Those who suffer from the condition often have fingers that appear sausage-like and pitted nails or lesions around the fingernails. The cause for this condition is currently unknown; however, experts believe that a combination of genetic predispositions and environmental factors play a role in the development of psoriatic arthritis. Onset can occur at any age and with any gender, race, and ethnicity, but the most common age for psoriatic arthritis to begin is between 20 and 50 years of age.

This condition is tricky to treat because patients are essentially dealing with two fused

diseases—one of the skin and one of the joints. Because of this, it is important to talk with your doctor or other medical professionals about the drugs you are taking for each, as many drugs can have a negative interaction. There are many options other than medication that you can use to treat this disease. For example, some exercises work especially well with these patients to reduce swelling and pain in the joints. You can also begin skin therapy to treat the psoriatic part of this disease. Heat and cold can be effectively used to treat psoriatic arthritis, as can rest, which is important for all arthritis patients. Splints and surgery are rarely used, but the options are available for more extreme conditions. Cosmetically, this disease can be treated with laser surgery light treatment, or other corrective cosmetic surgeries. Talk to your doctor to find out more about this disease and your options for treatment.

21. Risky Business: Are You at Risk for Arthritis?

Arthritis is a condition that affects millions of people worldwide. Even though it is very common, it is still painful and incurable. Even though you may not realize it, you could be at great risk for developing arthritis. Although some of these conditions cannot be changed, there are a number of things you can do to prevent arthritis from occurring in your later years. Assess your risk in order to better be able to prevent yourself from developing this painful condition.

First, understand that arthritis can affect anyone of any age, race, and gender. Babies as young as six months can develop arthritis, even though most people equate arthritis with old age. It is true that your risks increase after the age of 40. There are a number of other things that increase your risk as well. For example, sports injuries often evolve into arthritic conditions, so if you are an active youth, be careful to avoid injury. If injury does occur, it is necessary to always continue treating the injury throughout your life to prevent more serious conditions from developing.

Weight is a very important factor when it comes to arthritis. If you are more than 30 pounds overweight, extra stress is put onto your joints, creating arthritic pain. Maintaining a healthy weight and exercising regularly is important in all facets of health.

Genetics also plays an important role in the development of arthritis. Unfortunately, there is not much you can do to counteract that. However, if you live an otherwise healthy life, you can help to reduce the risk of arthritic conditions developing at a younger age. Women are generally more at risk than men to develop many kinds of arthritis. This is due in part to hormonal changes during different parts of a woman's monthly cycles as well as hormonal changes during menopause. Keeping your hormones in check by regularly seeing your doctor to discuss any changes is therefore very important in reducing your risk for developing arthritis. Certain ethnicities are also at a higher risk for different kinds of arthritis. For example, African Americans are more likely to develop lupus, an arthritic disease. Caucasians, on the other hand, are at a larger risk for developing rheumatoid arthritis. Certain groups of Americans are also at risk for certain types of arthritis.

Overall, if you are at a greater risk for arthritis, you need to take steps to reduce your chance of developing a disease. Maintain a healthy lifestyle by eating a good diet and exercising regularly. Although arthritis can be a difficult disease with which to deal, you can prevent its onset.

22. So Many Medications, So Little Time

When you are diagnosed with arthritis or first begin to experience arthritic pain, you are often in so much discomfort that you wish to quickly begin a course of treatment. While you may simply wish to decrease the pain as quickly as possible, there are nine different broad categories of arthritis medications, as well as a number of different specific drugs within each category. Unfortunately, it is crucial for you to research and understand each of these drugs in order to make the best decisions regarding your health. All of these medications have advantages and disadvantages, so speak with your doctor about the medications he or she recommends.

The most popular arthritic drugs are found in the larger category known as NSAIDs, or non-steroidal anti-inflammatory drugs. These drugs block the hormone in the body that contributes to pain, inflammation, fever, and muscle cramping. Within this category, there are three main types of drugs—COX 2 inhibitors, which are more gentle on the stomach; traditional NSAIDs, which are available in low dosage over-the-counter forms; and salicylates, which include aspirin and are potentially dangerous if used in large dosages.

The second type of arthritis medication is known as analgesics. Unlike NSAIDs, analgesics do not address the problem of inflammation, but simply addresses the pain experienced by arthritis patients. Corticosteroids, on the other hand, work by stopping inflammation. This third category is the oldest type of arthritis drugs, and when used in small dosages they can save your joints and even your life.

DMARDs (or Disease-Modifying Anti-Rheumatic Drugs) make up the fourth category of drugs used to treat arthritis. These medications are only effective when used before inflammation causes damage in the joints. A fifth category is actually a subset of the DMARDs category. Called Biologic Response Modifiers (or BRMs), they also stop disease progression. They are most often used when all other medications have failed.

There are also a few categories that are used for specific types of arthritis. Gout, for example, has its own bunch of medications for patients. As a seventh category, fibromyalgia also has its own personal set of drugs. As often advertised, many different medications can be taken to relieve osteoporosis as well. The eighth and final category is made of drugs that are used to treat a specific kind of arthritis known as Sjogren's Syndrome.

It is important to understand these drugs so that you can discuss your options with your doctor. If you have recently been diagnosed with arthritis or a disease that causes joint pain, research the different medication choices to learn the advantages and disadvantages of each.

23. Sweet Dreams: How to Deal with Arthritic Insomnia

If you suffer from arthritis, one of the most difficult symptoms with which you may have to deal is insomnia. This sleeping disorder prevents you from getting the rest you need to be healthy, which in turn makes your arthritis even worse. It can be a vicious cycle. There are many things you can do to combat arthritis, and it is important to consider all of these options so that you can get a good night's sleep every single night.

Insomnia is categorized by a number of conditions. First, you can have difficulty falling asleep. Many people experience this at some time or another, but if you frequently cannot drift off, you may want to speak to your doctor. You may also wake up often throughout the night, for no apparent reason. Again, this happens occasionally to everyone and more so to people such as new parents, but if you find that you are tossing and turning more than once a week, you probably suffer from insomnia. Some people with insomnia, however, do sleep through the night. Their problem is

that they wake up too early or they do not feel refreshed, even after many hours of sleep. Depending on how frequently insomnia occurs for you, you can be diagnosed with short-term insomnia, intermittent insomnia, or chronic insomnia.

People who suffer from arthritis also commonly find they suffer from chronic insomnia, or insomnia that simply does not disappear and occurs for a long period of time. There are many reasons chronic insomnia is prevalent in people who have arthritis. First, the pain keeps some people awake at night. This can occur with any illness, but some arthritic patients find that their joints are especially painful and inflamed after a day of activity. A second cause of the insomnia due to arthritis is the high level of stress most arthritis patients experience. For example, worrying about a doctor's appointment can cause a person to stay awake all night. There is no difference for patients who are young and recently diagnosed or older and have dealt with arthritis for many years. Lastly, insomnia can be a side effect of the medications used to treat arthritis. Unfortunately, they may rid you of pain but cause you to stay awake all night. However, without taking them, you may also be awake all night, this time because you are in pain.

There are a number of things a person can do to combat insomnia. First, realize that you are not alone and that your doctor can help. Speak with him or her in regards to the medications that you can take to help you sleep, but realize that there are many side effects to these drugs, and they have an addicting quality as well. Taking steps to help de-stress your life can help you sleep at night, too. Only you and your doctor can decide on the best course of action, but speak to a medical professional to learn more because good sleep is absolutely necessary.

24. The Importance of Family: How Arthritis Affects All Members

Family is a very important thing for many people. When one member in the family is diagnosed with arthritis, it affects all of the other member as well. Unfortunately, like many diseases and illnesses, arthritis can be the point of stress for many marriages and parent-child relationships, as well as relationships between siblings. There are many ways in which patients and their families can counteract the negatives of this disease, but it takes effort and dedication to work through the many issues of this disease.

First, since arthritis is a condition that causes difficulty in movement, the other members of the family will probably need to pick up more of the load of housework and other responsibilities. This can be offensive for the person who has arthritis if he or she is used to doing these things for themselves, so the subject must be approached with extreme sensitivity. At the same time, those who have arthritis must realize that their family members are simply trying to help ease the pain of arthritis. It is important to always maintain communication between family members so that nobody's feelings can hurt and nobody feels resentment for having to do more work than another member of the family.

One way in which to be sure that communication is not a problem is to take part in family counseling or a family arthritis support group. It is best to join such organizations before you have a problem in order to prevent the breakdown of the family. Support groups are especially important for marriages to continue to succeed and for children who are dealing with the alienation they may feel due to their arthritic condition.

Families can also greatly benefit from education. When you know as much about your condition as you can, you can also understand what this means within a family context. Understanding is the most important part of dealing with a member of your family that is diagnosed

with arthritis. Situations can get heated easily, but don't let arthritis and the pressures of the family responsibilities hurt your relationships. Although the person you love may be slightly changed, it is important to continue to work on your family ties to be sure that they do not dissolve. As a spouse, help your disabled wife or husband continue to live life to the fullest. As a parent, be understanding toward your child's special emotional and physical needs as well as mindful to your other children's reactions to this family issue. Remember, arthritis does not need to dictate the way in which you live your life. With dedication to the love of family, you can continue to work together well even while you deal with a difficult arthritic condition.

25. You are Not Alone: Arthritis Support Groups

Millions of Americans suffer from arthritis and arthritic conditions every day. The important thing to remember is that you are not alone in your suffering. Although at times you may feel like the only person who is affected by this disease, there are others who feel the same way. Arthritis can be a very hard disorder to understand and many patients who suffer from arthritis feel alone and confused. However, with a little outreach, you can meet and talk with others who also suffer from arthritic conditions. By joining one of the many arthritis support systems, you can feel better about your condition and have a better outlook on life.

The Arthritis Foundation is the only non-profit organization that was formed specifically for those who have arthritis. There are over 100 different arthritic conditions, and the Arthritis Foundation works hard to address the needs and concerns of people who have each kind. This organization helps distribute information about arthritic conditions, as well as works as an advocate for arthritis patients. They also sponsor medical research on this condition in the hopes that we can someday prevent and cure arthritis. The Arthritis Foundation partners with many other organizations and companies to bring patients the services they need. Their website is helpful for both those suffering from arthritis and family members or friends who want to learn more about arthritis or donate money towards arthritis research. Online you can also join this organization and benefit from their many membership services.

If you are looking for something on a more personal level, however, your first step to finding a local arthritis group is to talk with your doctor or another medical professional. Often times hospitals will sponsor such groups to help people cope with disease and illness. Arthritis is no different. At a local group, you can meet others who are dealing with arthritis and get feedback on how to cope in daily life. These community groups also go on trips and to events and they cater especially to your specific needs. Other members of the group can be lifelong friends and help you live more optimistically. You can check your local newspaper if your doctor does not have information about such a group—or you can start your own. If no such support exists in your neighborhood, there might be a strong need from someone to lead this type of a project.

Support groups are especially important for children suffering from arthritis. Because arthritis is often seen as a condition that develops in old age, many children with arthritis feel outcasted from other childhood friends but cannot connect with typical members of a support group since they are usually much older. The children's wing of your hospital may be able to direct you to a children or family support organization. No matter what your age, you can benefit from the community of a support group when you have arthritis. Look online or talk to your doctor for more details.

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