

# ARTHRITIS

## NEWS FOR YOU

SPRING 2011

ST. JOHN'S ARTHRITIS CENTER

## Safe Driving with Arthritis

By Peter Fayard, MA, OTR/L

Driving is an important component of maintaining both independence and social participation for people with arthritis. In many instances, people can drive safely by adjusting their driving habits and training in the use of adapted devices.

Symptoms that are associated with arthritis include decreased range of motion, decreased muscle strength, decreased activity tolerance, and slowed reaction time—all of which may impact driving skills. In addition, studies have shown that disease presentation impacts specific driving skills. For example, a person experiencing cervical disc disease may have difficulty safely changing lanes or reversing a



vehicle. A person presenting with rheumatoid arthritis may also have difficulty with turning corners and getting in and out of a vehicle. Difficulty for people with

osteoarthritis may include poor tolerance for sitting for extended periods of time and difficulty with foot pedal operation. Many of these functional limitations

may be addressed with vehicle modifications.

People with arthritis further report that driving is important in maintaining their quality of life as it provides them with access to leisure activities, shopping, and health care providers. When driving, they report difficulty checking for other cars in the blind spot and responding to sudden

changes in the driving environment. They also may experience difficulty reacting quickly and difficulty in turning onto another street.

In addition to the driving difficulties previously identified by drivers with arthritis, clinicians have noted additional concerns. People with arthritis may present with decreased grip strength and limited shoulder range of motion that may negatively impact driving skills. Drivers and clinicians noted other challenges in vehicle operation such as turning the key in the ignition, turning knobs, shifting gears, fastening and unfastening the seatbelt, gripping the steering wheel, and accessing the trunk or hatchback.

Many of the difficulties that were identified by drivers and clinicians may be addressed through changing driving routines and/or

*Continued on page 6...*

## Ask Margaret

*I have Raynaud's syndrome, and I have a hard time coping with the cold. Do you have any suggestions?*

People with Raynaud's syndrome, a condition where blood vessels spasm primarily in the hands and feet, shutting off circulation and leaving affected parts white or blue, are especially sensitive to the cold. The condition is more common in people with some form of arthritis such as rheumatoid arthritis (RA) and scleroderma.

Although the condition can be quite serious, typically attacks are merely uncomfortable. (I'm sure that you've welcomed the warmth and relief of holding a hot mug or soaking in warm water.) Here are some additional tips and tricks from the Arthritis Foundation for ways to warm up:

- **Windmills**—Whirl your arms in circles to quickly send blood flowing back to your hands.
- **Exercise**—Stay indoors for winter and even early spring workouts. Regular exercise can improve overall circulation
- **Warm water**—Run your hands under or soak your feet in warm (not hot) water. Hot water can further damage blood vessels and prolong a Raynaud's attack.
- **Heat packs and wraps**—Keep air-activated heat packs and wraps for times when warm water isn't available

While Raynaud's syndrome provides a challenge in coping with the cold, it can be more serious when it occurs along with autoimmune disease. In some cases when both conditions exist, Raynaud's can lead to skin ulcers and gangrene. If you fall into the minority of people with Raynaud's syndrome who get frequent attacks that are tough to relieve, it's worth discussing the issue with your physician and seeking a more aggressive treatment with medication.

I appreciate the question and also extend thanks for the use of information in the recent Arthritis Today article, "Coping with the Cold" by Brenda Goodman (November/December 2010).

*Margaret Lindsey, R.N., is an Arthritis Educator with St. John's Regional Arthritis Center. Questions for her column should be addressed to Ask Margaret/Arthritis News for You, St. John's Hospital, 1235 East Cherokee, Springfield, MO, 65804*

**ARTHRITIS INFORMATION LINE**  
**417-820-3665 or 1-800-835-5197**  
**7:30 a.m.-4:00 p.m., Monday-Friday**

## Good Idea!



### Long-Handled Shoe Horn

This device helps you slip into shoes without bending, reaching, and straining. For information on locating featured products, call (417) 820-7115.

### How do you get your News?

**Update your address or receive the newsletter via email.**



If you have recently moved or are planning to relocate, please call us with your change of address... (417) 820-3665 or 1-800-835-5197. If you'd like to receive *Arthritis News* via email (rather than a hard copy by U.S. Mail), please let us know. An email version will allow you to forward copies to friends, print only pertinent reminders, etc. If you'd like to remove your name from our physical mailing list and be added to our electronic distribution list, please contact the Regional Arthritis Center at [margaret.lindsey@mercy.net](mailto:margaret.lindsey@mercy.net) or [heather.scott2@mercy.net](mailto:heather.scott2@mercy.net) or call 1-800-835-5197.

**New website!**

OUR NEW WEBSITE IS EVEN EASIER TO FIND AND USE! Take a look and forward the link to friends. We're at [www.moarthritis.org](http://www.moarthritis.org). You can click on Southwest Missouri or SW RAC!

**Fibromyalgia Support Groups**

**Springfield:** The group has temporarily suspended regular meetings due to illness. People with Fibromyalgia in need of information and support may call the Regional Arthritis Center at (417) 820-3446 or 1-800-835-5197.

**Aurora:** Meetings are the third Tuesday of the month at a new location—1 p.m. at St. John's Aurora Hospital, PDR. Call Coralie Exter at (417) 678-3580 or Marilyn Carey at (417) 678-2666.

**Lebanon:** Meetings are the first Tuesday of the month at 7 p.m. at Breech-St. John's. Call Evaleen Rogers at (417) 588-9783 or Dana McGaughy at (417) 533-3275.

**Mt. Vernon:** Quarterly meetings are held at MO Rehab. Call Jane Nelson at (417) 461-5490.

**Joplin:** Meetings are the first Tuesday of the month at St. John's Medical Center at 7 p.m. Call Pam Baack at (417) 781-6225.

**Marshfield:** Meetings are the second Monday of the month from 1-2:30 p.m. and the fourth Monday of the month from 6:30-8 p.m. at Marshfield First Baptist Church at 6:30 p.m. Call Martina Plavnick at (417) 468-2765.

**Speakers' Bureau**

The Southwest Missouri Regional Arthritis Center is pleased to provide speakers to any community group or civic organization wishing to learn more about arthritis. Our education programs are available free of charge. Call the Arthritis Information Line at 1-800-835-5197 or 417-820-3665.

**Ozark Area Arthritis Club (OAAC) Program Schedule**

The OAAC meets the second Tuesday of each month at Cedar's Restaurant at 3322 S. Campbell at 11:30 a.m. For information, contact the Arthritis Information Line at (417) 820-3665 or 1-800-835-5197.

**MARCH 8, 2011**

**Preventing Falls: Inside and Out**

Mark Coalson, PT  
Assistant Director, Nixa  
Outpatient Physical Therapy

**APRIL 12, 2011**

**Hugs and Songs**

Jay and Ellen Mitchell

**MAY 10, 2011**

**Nutritional Needs for Aging Adults: Nutritional Supplements and Drug Interactions**

Jan Long, MS, RD  
St. John's Hospital

**June 14, 2011**

**Arthritis Medications**

Terri Hampton, Pharm.D.  
St. John's Hospital

**Fibromyalgia Education**



Fibromyalgia education will be offered at Cox Walnut Lawn (Administrative Classroom) Springfield,

April 14-May 19, 2011, 6:30 p.m.-8:30 p.m.; July 14-August 18, 2011, 6:30-8:30 p.m.; and October 13-November 17, 2011, 1-3 p.m.

Registration is required. Call Cami Stanley at (417) 269-5282.

**Arthritis/Fibromyalgia Self-Management Course**



The free, six week class covers self-management of pain and stress, exercise, and medications. Registration is required. Call the Arthritis Information Line at 417- 820-3665 or 1-800-835-5197 for info on upcoming classes in Southwest Missouri.

**Springfield's St. John's Hospital Private Dining Room 4**, March 15 -April 19, 2011, 10 a.m.-12 noon, call 800-835-5197 or 417-820-3446 to register.

**Branson First Baptist Church, Branson**, April 12-May 17, 2011, 10 a.m.-12 noon, call Mary Chase at 417-334-3897.

**Scleroderma Support Group of the Ozarks**

The next regular meeting is at 6:30 p.m., March 7, 2011, at Cox South meeting room A.

For more info, call Gerry Robertson (417) 866-4297 or 1-800-835-5197.



**Sjogren's Syndrome Support Group**

The group meets April 18, 2011, at noon at St. John's Hospital, Private Dining Room 4. **PLEASE ASK FOR DIRECTIONS AT THE INFORMATION DESK AND NOTE THE PERMANENT ROOM CHANGE.** Call Una Lewis, (417) 827-3190 or 1-800-835-5197.

# Basilar Thumb Arthritis

By Victoria Kubik, MD

Arthritis at the base of the thumb, or basilar thumb arthritis, is one of the most common forms of osteoarthritis seen in the hands and wrists. In a normal joint, cartilage covers the ends of the bones and allows them to move smoothly and painlessly against one another. In osteoarthritis (or degenerative arthritis), the cartilage layer wears out, resulting in direct contact between the bones.



The thumb basal joint, also known as the CMC joint, is a saddle shaped joint that is formed by a small bone of the wrist (trapezium) and the first of three thumb bones (metacarpal). This specialized joint allows the thumb increased movement to pinch, grip, and wrap around objects beyond the standard flexion and extension seen in the fingers.

Arthritis at the base of the thumb is seven times more common in women than men. This type of arthritis can start as early as age 40 and can often be bilateral. Basal joint arthritis is caused by wear and tear on the joint at the base of the thumb, perhaps as the result of a fracture or injury. Repeated motions such as twisting, turning, or gripping objects with the thumb and fingers can worsen this condition.

The most common symptom associated with basilar arthritis is a deep, dull ache at the base of the thumb. The pain is accentuated by activities that require pinching, turning and gripping. Often people have trouble with turning keys or doorknobs, writing, and taking the lids off jars. Over time and in severe cases, a bump may form at the base of the thumb and the joint may become mis-

aligned and cause the metacarpal of the thumb to migrate towards the palm. This limits the motion of the thumb and diminishes the space between the thumb and index finger making pinching difficult. The neighboring thumb joint may hyperextend to compensate.

The diagnosis of basilar thumb arthritis is made based on appearance of the thumb, history of painful activities, and location of the pain. Applying longitudinal pressure along the thumb and twisting or grinding the basal joint is helpful in reproducing symptoms. Although x-rays are helpful in confirming the diagnosis, appearance of the joint on radiographs does not necessarily correlate with severity of symptoms.

Treatment is based on symptoms and radiographic findings. Less severe basilar arthritis usually responds to conservative treatment

with a combination of oral anti-inflammatories, cortisone injections, and splints. Splinting functions to support and minimize painful motion of the joint during potentially aggravating activities. It is important that the splints used for this condition extend up the thumb. Most commercially available “drug store” wrist splints leave the thumb free and may actually worsen the discomfort at the joint. While these measures will not change the radiographic appearance of the joint, they can be very effective at diminishing pain and improving function.

People with advanced arthritis or those who do not respond to non-surgical treatment may be candidates for surgical intervention. The goal of surgery is to eliminate the bone rubbing on bone due to loss of cartilage covering. A variety of surgical techniques are available that can successfully reduce or eliminate pain while improving thumb position and function. Surgical options include ligamentous reconstruction for an increased laxity without complete loss of cartilage, bone fusion or realignment, or the most common procedure, which involves removal of the trapezium combined with reconstruction using a tendon from the wrist. Recovery and rehabilitation varies depending on the exact type of procedure.

A consultation with your treating surgeon can help determine the best options for you.

# Juvenile Arthritis News

## Bad to the Bone: JA Can be Hazardous to Growing Bones, Here's How to Help



We all want kids with healthy, strong bones. That becomes an even greater priority for kids with arthritis. Research has shown that low bone mass, or osteopenia, is common among young adults with juvenile arthritis (JA). Other research shows that for many children, bone loss begins and fractures can occur early in the disease process, particularly in the spine.

### Why Bones Go Bad:

The disease process itself can weaken bones in children with JA. The inflammatory process promotes the breakdown of old bone instead of the formation of new bone. Another reason is the use of corticosteroids. According to experts, like inflammation, steroids interfere with bone formation and increase resorption. They also have some effects on calcium absorption and affect bone mineralization. Lastly, joint pain can make it more difficult for children with JA to exercise or play outdoors in the sunshine, and bones are bound to be affected.

### What You Can Do:

1. Manage the disease—The advent of biologic agents for JA has made this goal possible for

increasing numbers of children. Newer medications such as TNF-inhibitors have kept the disease under control and led to impressive improvement in underlying bone.

2. Minimize the corticosteroids—When corticosteroids are needed, physicians should strive to use the lowest dose possible for the shortest amount of time feasible to control inflammation. If just one or two joints are inflamed, injecting corticosteroids directly into those joints eases inflammation without the bone-damaging risks of oral corticosteroids.
3. Practice good nutrition—A diet rich in calcium can help reduce bone loss. If you suspect that your child's not getting enough calcium, speak to a physician about a supplement.
4. Promote exercise—Just like muscles, bones are living tissue that need exercise to get stronger. Weigh-bearing and strengthening exercises are best for bones. Speak to your child's doctor about exercises that are safe for joints.
5. Get outside—Your child's body makes its own vitamin D in response to sunlight.
6. Monitor bone density—As your child's doctor about a bone density test. Many medical centers now have DXA machines for children that can reveal how



your child's bone density compares to that of other children without JA. Repeating the scans periodically can reveal if bone density is changing and improving.

7. Build bones with medication—If a DXA scan reveals low bone density, your child's doctor may prescribe a bisphosphonate medication such as alendronate (Fosamax) to slow bone resorption and improve bone density.

Although JA can have serious effects on bones, newer treatment approaches allow better control of JA, normal activities, and newer methods to detect and treat bone loss.

*Source: The Arthritis Foundation's Kids Get Arthritis Too (Vol. 11, Issue 1), "Bad to the Bone" by Mary Anne Dunkin*

### JA Fun Event & Clinics

Join other children with JA and their parents for **JA FUN DAY, April 12, 5:30-7:30 p.m. at Incredible Pizza Company**. Please call 417-820-3665 or 1-800-835-5197 to make your reservations for an evening of info and fun!

Dr. Andrew Lasky is seeing area children at St. John's Specialty Clinic by appointment on the second Tuesday of each quarter: April 12, July 12, and October 11, 2011. Please call 417-820-3446 or 1-800-835-5197.

## Safe Driving with Arthritis

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in the selection of and training in the use of adapted devices.

Examples of changing routines include taking breaks as needed during longer trips, performing intermittent hand and wrist exercises during breaks to balance out extended periods of gripping the steering wheel, and limiting driving to lower traffic times to allow for reaction time delays. These changes in routine may only be needed during a time of flare-ups. Lastly, obtaining a disability parking permit not only decreases the distance to the destination but as disability parking slots are wider, they are easier to access when steering the vehicle into the parking slot.

Examples of adapted devices that may enhance driving-related skills include remote starters, built-up key holders, Handibar for transfers, back supports, neck supports, modified seat belt fasteners, modifying seat height, steering wheel covers, rear view mirror extensions, blind spot side mirrors, pedal modifications, reduced effort steering, or steering devices such as a cuff or a knob.

Publications such as "Driving When You Have Arthritis" from the National Highway Traffic Safety Administration and the

Arthritis Foundation may also be helpful resources.

It has been reported that people with arthritis have been reluctant to disclose any difficulties with driving as they fear it will result in losing their license. However, with access to driver rehabilitation services including evaluation and training (as needed), continued and safer driving may be possible.

The driver evaluation will assist in determining the person-specific driving routines and person-specific adapted equipment that might be beneficial.

Driver training, however brief, will promote follow through with recommended routines and ensure the appropriate fitting and operation of any adapted devices.

Safe driving is crucial to independence in the community. Drivers with arthritis have very unique challenges with regard to safe vehicle operations.

Assessment and training by a driver rehabilitation specialist may help to determine those driver-specific routines or driver-specific adapted devices that can promote safe operation of a vehicle. Accessing appropriate resources is the key to maintaining ongoing independence.



### Health Care Management Class

*Living a Healthy Life with Chronic Conditions*

This six week chronic disease self-management class is for people with diabetes, asthma, heart disease, arthritis, lupus, stroke, bronchitis, emphysema, and any other chronic condition. Learn skills for *living a healthy life with a chronic condition*.

Classes meet Thursdays, March 24-April 28, 2011, from 10 a.m.-12 noon at **St. John's Health Plans Building at 3265 S. National Ave., Springfield, MO, in the Community Conference Room (2nd floor)**. The class is free. Call (417) 820-3446 or 1-800-835-5197

**Mountain Grove Senior Center**, Thursdays, March 3-April 7, 2011, 1-3 p.m., call (417) 683-4409

**Newton County Health Department**, Neosho, MO, To gather more information on dates, time, and registration, call Casey (417) 451-3743

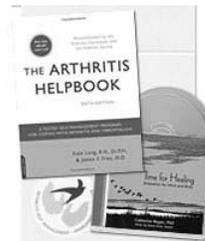
**Dade County Senior Center—Greenfield**, Wednesdays, May 24-June 28, 2011, call (417) 637-2626 for time and registration

**St. Francis Hospital, Mtn. View**, April 4-May 9, 2011, 10 a.m.-12 noon, call (417) 934-7000

**Please call 1-800-835-5197 for classes in towns throughout Southwest Missouri.**

### Arthritis Toolkit...Check It Out!

*The Arthritis Toolkit* contains information and tips that help many people with arthritis and fibromyalgia live happier, healthier, more comfortable lives!



**Check out *The Arthritis Toolkit* today. Call (417) 820-3446 or 1-800-835-5197.**

### Arthritis Foundation Exercise Program Area Classes (Formerly PACE)

Classes use gentle activities to help increase overall stamina, flexibility, and strength. It is not a substitute for a prescribed exercise program.

**Republic Parks and Recreation**, call Allison Davis (417) 732-6780; **Cox Monett Hospital**, call Lauren Holland (417) 354-1410; **Warsaw Area**, call Billie Mowry (660) 438-7569; **Branson First Baptist Church**, call Mary Chase (417) 334-3897; **Mt. Vernon**, call Sonny Poe (417) 461-5351 at MO Rehab; **Bolivar CMH Senior Health** (417) 777-7171; **Buffalo-Dallas County Area YMCA**, call Kay Morris (417) 345-1116; **Greenfield/Dade County**, call Charity Bayless (417) 637-2345; **Dade County Senior Center—Greenfield**, call (417) 637-2626; **Lamar Senior Citizens Center**, call Roberta Braxdale (417) 682-5809; **Lincoln Community Center**, call Billie Mowry (660) 438-7569; **Ellett Memorial Hospital, Appleton City**, call Kelly Tindall (660) 476-2111; **Strafford Senior Center** (417) 736-9898; **Willard Fitness Center**, call (417) 742-2262; **Republic Wellness Center** (417) 732-7672; **United Methodist Church, Fair Grove**, call Evelyn Sheppard (417) 759-2755; **McCarty Senior Center**, call Mark at (417) 282-6100; **Korth Senior Center Stockton**, call 417-276-5306; **Nixa Senior Center**, call (417) 725-2322; **Redbud Village, Ava**, call (417) 683-4033; **Summersville Senior Center**, call (417) 932-4044; and **Pierce City Senior Center**, call (417) 476-5006; **Rogersville Senior Center**, call (417) 753-7800; **Pineville United Methodist Church**, call (417) 223-4723; **Pleasant Valley Manor, West Plains**, call Lenora Martin (417) 257-0179; and **St. Francis Hospital**, call (417) 934-7153.

### Arthritis Foundation Exercise Program (Formerly PACE) Springfield Classes

Classes meet at **St. John's Fitness Center**; cost is \$10. Two classes are offered, 1:15-2:15 and 2:30-3:30 p.m. on Tuesdays and Thursdays. Call the Arthritis Information Line at 417-820-3665 or 1-800-835-5197 or The Professionals at 417-820-8888 or 1-800-909-8326. Classes are held at the following locations:

**Springfield Southside Seniors Center** (call 890-1313)

**Campbell United Methodist Church** (call Margaret Williams at 881-2018)

**Cox Senior Health** (call Sonnie Noble at 269-3915)

**Cox Fitness Center Meyer Wellness & Rehab Center** (call 269-3282)

**Wesley United Methodist Church** (call 883-1021)

**Covenant Presbyterian Church** (call 881-4449)

**NEW—Baptist Temple** (call 831-2631)

**NEW—Noble Hill Church** (call 425-0824)

**NEW—Cox North** (269-8882)

### Bothered by Arthritis? Concerned about Heart Disease?

We are conducting a research study of 3 approved medications commonly used to treat pain due to osteoarthritis (OA) or rheumatoid arthritis (RA) in people who also have or are at high risk for heart disease. Qualified participants will receive study-related medical care, regular study check ups, and study medication at no charge

#### To qualify you must...

- Be 18 years of age or older
- Have had OA or RA for at least 6 months
- Have been prescribed regular medication for your pain for at least 6 months
- Have or be at high risk for heart disease, which includes a history of heart attack, stroke, or diabetes.

For more information, call St. John's Medical Research Institute at (417) 841-0250 or toll free 866-207-0167.

### Arthritis Foundation Aquatic Exercise (Formerly Aquatics Programs)

**Springfield: Hammons Heart Institute**, call 417-820-2169

**Ward YMCA**, call 417-862-7456

**Meyers Wellness & Rehab**, call 417-269-3282

**Chesterfield Family Center**, call 417-891-1616

**Joplin: Joplin Family Y**, call 417-623-4597 or 417-625-2502

**West Plains: West Plains Civic Center**, call 417-256-8087

**Lebanon: Cowan Civic Center**, call 417-532-4642

**Monett: Lowry & Associates, Physical Therapy**, call 417-235-8770

**Nevada: Vernon County Health Department**, call 417-667-7418

**Nevada Regional Medical Center**, call 417-448-3622

**Lamar: Lamar Aquatic Park**, call 417-682-5383

**El Dorado Springs: Cedar County Memorial Hospital**, call Sandy Whitaker at 417-876-2511

**Bolivar: Citizens Memorial Hospital**, call 417-326-0453

**Citizens Memorial Hospital Senior Health**, call 417-777-7171

### Tai Chi for Arthritis

Tai Chi for Arthritis was developed for people with a rheumatic condition and consists of fluid circular movements that are slow in tempo. Benefits include improvements in flexibility, strength, overall fitness, and posture. New classes are forming. For information, please call Heather Scott at (417) 820-3665 or 1-800-835-5197. Classes are also forming at the **Ward YMCA**. Call 862-7456 for info.



**St. John's Health System**

1235 E. Cherokee  
Springfield, MO 65804  
[www.stjohns.com](http://www.stjohns.com)



*Please Join Us*

## **Arthritis Awareness Day 2011**

Our morning of information and sharing will feature distinguished healthcare professionals:

**Keynote Speaker:**

**Stanley Hayes, M. D., Rheumatologist, St. John's**  
**"Arthritis: Update & Newest Treatments"**

**Guest Speaker:**

**Deborah Kukal, Ph.D., Psychologist, St. John's Hospital**

**Please bring your questions for the experts to answer!**

### **Saturday, April 30, 2011**

St. John's C.H. "Chub" O'Reilly Cancer Center Auditorium, 2nd Floor, 9 a.m.-11:45 a.m.  
Registration and breakfast at 9 a.m.

No fee. Pre-registration is required. Please call (417) 820-8888 or 1-800-909-8326.  
St. John's C.H. "Chub" O'Reilly Cancer Center, 2055 S. Fremont, Springfield, MO

*Join the St. John's Arthritis Center for a morning of information, fellowship, and fun!*

St. John's Regional Health Center, a member of the Sisters of Mercy Health System, St. Louis, is a Christian ministry dedicated to healing and wellness. As an equal opportunity/affirmative action employer, St. John's provides services and benefits without discrimination.