Physiotherapy and arthritis

This booklet provides information and answers to your questions about this therapy.
Physiotherapy is an important part of treatment for most people with arthritis. It helps you to keep your joints and muscles moving and gives you the confidence to continue exercising on your own. In this booklet we’ll explain what physiotherapy is, how it can help you and how you can access it.

At the back of this booklet you’ll find a brief glossary of medical words – we’ve underlined these when they’re first used in the booklet.
What is physiotherapy?
Physiotherapy is a therapy that helps to keep your joints and muscles moving, helps ease pain and keeps you mobile. Your physiotherapist will assess how your arthritis affects you and put together a programme of advice, exercises and other therapies that will help to keep you moving and reduce your pain.

How can physiotherapy help?
Physiotherapy can help you to:
• understand how arthritis affects you
• manage your pain
• improve your fitness
• keep moving, stretching and strengthening.

How can I access physiotherapy?
Your GP or consultant will be able to refer you to a physiotherapist, but you can also refer yourself either on the NHS or privately. If you do self-refer, make sure you tell the physiotherapist your medical history at the first appointment.

At a glance
Physiotherapy and arthritis

Most people with arthritis will benefit from a course of physiotherapy. This may include a programme of exercises tailored to your individual needs, advice on increasing your activity level generally or help with pain-relief techniques.
What is physiotherapy?
Physiotherapy is a therapy that helps to improve general fitness and muscle strength, manage pain and restore or improve function in parts of the body affected by arthritis and related conditions.

Physiotherapists are part of a team of healthcare professionals who can help you to resume or maintain an active and independent life both at home and work. They’re experts in assessing movement and can show you how to protect your joints. Your physiotherapist will be able to offer advice and reassurance, helping you to feel confident about managing your condition and addressing any concerns or uncertainties. They’ll help you by setting appropriate goals to keep you as active as possible.

Specialist physiotherapists will have had training in diagnosing and treating joint and muscle problems, and your GP may refer you to a specialist physiotherapist rather than to a rheumatologist or orthopaedic surgeon.

Your physiotherapist will start by making a thorough assessment of the problem. They’ll do this by asking you questions and examining the joint(s) you’re finding painful. This assessment will allow the physiotherapist to suggest a programme of treatments and exercises tailored to your individual needs.

Physiotherapy treatment may include:
- a programme of specific exercises
- general advice on increasing your activity level and avoiding exercise-related injuries
- pain-relief treatments such as heat or ice packs, TENS (transcutaneous electrical nerve stimulation), massage, manipulation, acupuncture or taping
- providing walking aids or splints to help maintain mobility and independence.

Most people with arthritis will benefit from a programme of physiotherapy.

A physiotherapist might provide pain-relief treatments, such as heat packs, as well as a range of exercises.

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- manage your pain
- improve your fitness

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Take regular graded exercise
Graded exercise starts slowly and increases in small steps. This will help to strengthen your muscles and joints and increase your fitness. Improving your general fitness and stamina will help you to increase your level of activity without increasing your pain. Regular exercise will also stimulate production of your body’s own natural pain-relieving hormones (endorphins).

A physiotherapist may also recommend various pain-relief treatments. You’ll be able to continue with some of these treatments yourself between appointments.

- **Ice packs** can be used to soothe hot, swollen joints.
- **Heat packs** will help to relax tense, tired muscles.
- **Splinting** of swollen or painful joints may be helpful, for example during a flare-up of rheumatoid arthritis. Your physiotherapist or an occupational therapist (OT) may provide temporary splints for you (see Figure 1).
- **TENS (transcutaneous electrical nerve stimulation)** works by blocking pain messages to the brain and modifying your perception of pain. A TENS machine is a small electronic device that sends pulses to the nerve endings via pads placed on the skin (see Figure 2). This causes a tingling sensation that many people find soothing.

Managing your pain
Arthritis can cause pain in one particular part of the body or it may cause more widespread joint and muscle pain. Medications will help, but a physiotherapist can advise you on other strategies that will work alongside your medications.

Pace yourself
Overdoing things can increase your pain, but so can not doing enough. Your physiotherapist can advise you on increasing your activity level at a rate you can cope with and on finding the right balance between rest and activity. Planning your activities so that you don’t overdo it will enable you to enjoy the things you want to do.

Physiotherapy can also help if you have hypermobile joints, where the range of movement is beyond the normal range, and some physiotherapists specialise in certain conditions like this.

Understanding how arthritis affects you
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Your physiotherapist may offer other treatments.

- **Massage** can help the muscles relax and make joint movement more comfortable.
- **Acupuncture** can stimulate the brain to produce natural pain-relieving hormones (endorphins). Some physiotherapists are trained to give acupuncture (see Figure 3).
- **Electrotherapy** using techniques such as ultrasound and low-level laser therapy can help to stimulate the healing process and therefore reduce pain.
- **Manipulation** can help to improve the range of movement in a joint. It’s not appropriate for every patient, but your physiotherapist will be able to advise whether it could be useful to you.

**Improving your fitness**

Keeping active is very important when you have arthritis. Joints are designed to move, and inactivity weakens the muscles and tissues around the joints. This can cause the joint to become unstable and may reduce your mobility and independence. Exercise can increase your general fitness, help you to lose weight or keep to a healthy weight, improve your general mobility and make you feel more self-confident.

The important thing is to find a form of exercise you enjoy so you do it on a regular basis. Think about this and discuss it with your physiotherapist. They can help you plan a programme if exercise is new to you and advise on any special equipment or training that you’ll need to get started.

It’s important to start exercising gently, pace yourself and gradually increase your activity. You may have a slight increase in pain when you first start, but this should improve as your confidence and strength increase.

Many people are afraid that exercise will increase their pain or cause further damage to their joints. But joints are designed to move and inactivity weakens the muscles and tissues around the joints.

**Mobilising, stretching and strengthening**

Arthritis can cause joint stiffness and muscle weakness, and this can affect your day-to-day activities. Your physiotherapist will assess your muscle strength and the range of movement in your joints, and advise on techniques and exercises to maintain the best possible function.

Some physiotherapists have access to a hydrotherapy pool where you can exercise in warm water. Many people find it easier to move in water – the warmth is soothing and the water supports your weight so that you can move the joints and muscles without straining them.

**How can I access physiotherapy services?**

There are three routes you can take to see a physiotherapist:

- You can be referred by your GP or your consultant to your local or hospital physiotherapy department.
- You can make your own arrangements to see a physiotherapist without a doctor’s referral. Check with your GP whether you have an NHS physiotherapy department in your area that accepts self-referrals.
- If you would prefer to go private, you can self-refer to a private physiotherapy practice. If you do self-refer, it’s very important to give a full medical history to the physiotherapist at your first appointment.

Some physiotherapy departments now offer a telephone assessment and advice service. Depending on your condition you may be able to receive all or part of the advice you need over the phone.
Glossary

Acupuncture – a method of obtaining pain relief that originated in China. Very fine needles are inserted, virtually painlessly, at a number of sites (called meridians) but not necessarily at the painful area. Pain relief is obtained by interfering with pain signals to the brain and by causing the release of natural painkillers (called endorphins).

Hydrotherapy – exercises that take place in water (usually a warm, shallow swimming pool or a special hydrotherapy bath), which can improve mobility, help relieve discomfort and promote recovery from injury.

Manipulation – a type of manual therapy used to adjust parts of the body, joints and muscles to treat stiffness and deformity. It’s commonly used in physiotherapy, chiropractic, osteopathy and orthopaedics.

Occupational therapist – a therapist who helps you to get on with your daily activities (e.g. dressing, eating, bathing) by giving practical advice on aids, appliances and changing your technique to reduce the strain on your joints.

Orthopaedic surgeon – a surgeon who specialises in treating problems affecting the bones, joints and other structures involved in making the body move. Treatments offered include joint replacements and surgical repairs to tendons.

Rheumatoid arthritis – an inflammatory disease affecting the joints, particularly the lining of the joint. It most commonly starts in the smaller joints in a symmetrical pattern – that is, for example, in both hands or both wrists at once.

Rheumatologist – a hospital specialist with an interest in diseases of joints, bones and muscles.

TENS (transcutaneous electrical nerve stimulation) – a small battery-driven machine that can help to relieve pain. Small pads are applied over the painful area and low-voltage electrical stimulation produces a pleasant tingling sensation, which relieves pain by interfering with pain signals to the brain.

Where can I find out more?

If you’ve found this information useful you might be interested in the following Arthritis Research UK booklets:

Condition
- Back pain
- Neck pain
- Shoulder pain

Therapies
- Hydrotherapy and arthritis
- Occupational therapy and arthritis

Self-help and daily living
- Complementary medicine and arthritis
- Keep moving
- Looking after your joints when you have arthritis
- Meet the rheumatology team
- Pain and arthritis
- Splints for arthritis of the wrist and hand

These are all available on the website www.arthritisresearchuk.org or by contacting:

Arthritis Research UK
PO Box 177
Chesterfield
Derbyshire S41 7TQ
Phone: 0300 790 0400
www.arthritisresearchuk.org

Related organisations

The following organisations may be able to provide additional advice and information:

Arthritis Care
18 Stephenson Way
London NW1 2HD
Phone: 020 7380 6500
Helpline: 0808 800 4050
www.arthritiscare.org.uk

Chartered Society of Physiotherapy
14 Bedford Row
London WC1R 4ED
Phone: 020 7306 6666
www.csp.org.uk

National Rheumatoid Arthritis Society (NRAS)
Unit B4, Westacott Business Centre
Westacott Way
Littlewick Green
Maidenhead SL6 3RT
Phone: 0845 458 3969 or 01628 823524
Helpline: 0800 298 7650
www.nras.org.uk
We’re here to help

Arthritis Research UK is the charity leading the fight against arthritis.

We’re the UK’s fourth largest medical research charity and fund scientific and medical research into all types of arthritis and musculoskeletal conditions.

We’re working to take the pain away for sufferers with all forms of arthritis and helping people to remain active.

We’ll do this by funding high-quality research, providing information and campaigning.

Everything we do is underpinned by research.

We publish over 60 information booklets which help people affected by arthritis to understand more about the condition, its treatment, therapies and how to help themselves.

We also produce a range of separate leaflets on many of the drugs used for arthritis and related conditions. We recommend that you read the relevant leaflet for more detailed information about your medication.

Please also let us know if you’d like to receive our quarterly magazine, Arthritis Today, which keeps you up to date with current research and education news, highlighting key projects that we’re funding and giving insight into the latest treatment and self-help available.

We often feature case studies and have regular columns for questions and answers, as well as readers’ hints and tips for managing arthritis.

Tell us what you think of our booklet

Please send your views to: feedback@arthritisresearchuk.org or write to us at: Arthritis Research UK, PO Box 177, Chesterfield, Derbyshire S41 7TQ.

A team of people contributed to this booklet. The original text was written by physiotherapist Kay Stevenson, who has expertise in the subject. It was assessed at draft stage by physiotherapists Jacqueline Adams, Maureen Motion, Nicola Scräfton and Karen Smith. An Arthritis Research UK editor revised the text to make it easy to read and a non-medical panel, including interested societies, checked it for understanding.

An Arthritis Research UK medical advisor, Dr Jonathan Hill, is responsible for the content overall.

Get involved

You can help to take the pain away from millions of people in the UK by:

• Volunteering
• Supporting our campaigns
• Taking part in a fundraising event
• Making a donation
• Asking your company to support us
• Buying gifts from our catalogue

To get more actively involved, please call us 0300 790 0400 or e-mail us at enquiries@arthritisresearchuk.org

Or go to: www.arthritisresearchuk.org