An Arthritis Survey[™] Publication

ARTHRITIS

WHAT WORKS

Dava Sobel and Arthur C. Klein

St. Martin's Press New York

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NOTICE: Some of the advice in this book can be traced directly to the thousands of medical practitioners who treated the 1,051 participants in our nationwide Arthritis SurveyTM, and some of the information comes from our own constantly updated search of the medical literature. But neither of these facts implies that this book is a substitute for medical care. Read it for the things your doctor may not tell you—for the discoveries and the possibilities that could change your life.

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ARTHRITIS WHAT WORKS

By the same authors:

Backache Relief

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For Zoë and Isaac

ACKNOWLEDGMENTS

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To the 1,051 Arthritis Survey[™] participants, for sharing their knowledge and experiences with us.



Experienced physicians know that medical knowledge derives as much from observing patients closely and listening to them carefully, as from studying and analyzing a multitude of scientific facts. There is much to be learned from people who live every day with a chronic condition, such as osteoarthritis or rheumatoid arthritis, and the authors of this book do an excellent job of capturing these people's insights and their resourcefulness. Arthritis: What Works looks at arthritis treatment from all angles, presenting clear and practical discussions of pharmacological agents, exercise, and diet.

Over one thousand people from around the country with osteoarthritis or rheumatoid arthritis filled out carefully designed questionnaires and were also given free rein to comment on their experiences. The criteria for inclusion in this analysis appear to be as strict as for any clinical study which encompasses a large number of participants.

Much progress has been made in the treatment of arthri-

tis, in its various forms, with improved anti-inflammatory agents and joint-replacement techniques. But this book also points out the crucial importance of a close partnership between patient and physician, who together must face the challenge of dealing with the persistent presence of an uninvited guest. The rheumatologist and orthopedic surgeon are found to play an especially important role in the overall care of the arthritis patient. The physiatrist's expertise in prescribing exercise is also recognized, as is the role of the physical or occupational therapist who helps the patient remain as active as possible within a given environment.

Much work still needs to be done to improve and refine what we know about exercise programs for each individual, but one thing is clear: very well stretched and strong muscles, as well as sound "body machines," are the joint's best friends!

Some of the less conventional approaches to arthritis that are found helpful by the subjects of this study are not accepted in academic circles. I do think, however, they are deserving of closer analysis. After all, for a long time no one thought diet could have any effect on arthritis, and now we know that it does.

I recommend this book to anyone who must live with, or who is involved in the treatment of, osteoarthritis or rheumatoid arthritis. Dava Sobel and Arthur C. Klein are to be praised for their efforts.

Willibald Nagler, M.D.
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Professor of Rehabilitation Medicine
Cornell Medical College
March 1989

CONTENTS

Acknowledgments Foreword	xiii xv
SECTION I: NEW FINDINGS AND A NEW SOURCE OF HELP	1
1. You Have Good Reasons to Be Hopeful	3
■ A new kind of knowledge about helpful treatments for arthritis ■ Startling findings from an unprecedented nationwide survey ■ Questions you dare not ask your doctor—answered here	
2. These People Can Help You	9
■ How early proper treatment changed a family history of arthritis ■ How gold reclaimed one woman's life ■ Surgery banished this man's pain ■ Experimental drug to the rescue ■ Diet makes a difference after all ■ Stories of people who helped themselves with exercise, grit, and guts	
SECTION II: HOW TO GET SIGNIFICANTLY BETTER RESULTS FROM PROFESSIONAL CARE	17
3. Medical Doctors: Which Ones to See, Which Ones to Avoid	19
■ Why rheumatologists and orthopedists are so effective ■ How to find an arthritis specialist ■ The advantages of a family doctor ■ Where to get medical advice on exercise ■ How to talk to your doctor	

	4. Non-M.D. Practitioners: Which Ones Get the Best Results	46
	■ What to learn from a physical therapist ■ What to fear from a chiropractor ■ What to look for in an acupuncturist ■ The virtues of exercise instructors and mental health prac- titioners	
SEC	TREATMENTS FOR ARTHRITIS	63
	5. Rating and Comparing the Major Prescription Drugs: The First Across-the-Board Evaluation of Arthritis Medications	65
	■ Personal preferences in anti-inflammatory drugs ■ Breaking the steroid habit ■ Going for the gold ■ The special uses of antirheumatic and cytotoxic drugs	
	6. Over-the-Counter Drugs: From the Miraculous to the Preposterous	100
	= Aspirin = Acetaminophen = Ibuprofen = Combinations = Rub-on balms	
	7. Surgery for Arthritis: A Surprisingly Successful Solution	114
	■ Dramatic results from joint replacement ■ Fusion ■ Arthroscopic surgery ■ Facts about procedures and risks ■ How to prepare yourself for surgery	
	8. Eleven Effective Extra Treatments for Reducing Arthritis Pain	136
	■ Exercise ■ Hydrotherapy ■ Heat/Cold ■ Ultrasound ■ Psychological Counseling ■ Wax ■ Massage ■ Traction ■ TENS ■ Splints ■ Biofeedback	

SECTION IV: WHAT YOU NEED TO KNOW ABOUT UNCONVENTIONAL TREATMENTS FOR	151
ARTHRITIS	151
An Uncensored Look at Arthritis "Quackery" from Copper Bracelets to Stinging Bees	153
■ What is quackery, anyway? ■ The green wrist effect ■ The solvent solution ■ Folk medicine ■ The sting	2
10. Three Widely Used Unconventional Treatments for Arthritis: What Is Their Value?	167
\blacksquare Manipulation \blacksquare Acupuncture \blacksquare Yoga	
11. Experimental Treatments: Which Ones Hold Real Promise?	177
■ New uses for existing drugs ■ New anti-inflammatory agents ■ Animals, plants, and oils that are the natural ene mies of arthritis ■ Healing rays ■ Copying the body's own weapons	-
SECTION V: NUTRITION AND ARTHRITIS	209
12. A Revolution in Medical Thinking About Nutrition and Arthritis	211
 Diets for arthritis = Supplements that control symptom. Fasting for periodic relief = Food allergies that aggravate arthritis 	
13. Expert, Experienced Advice About Nutrition and Arthritis	233
■ What doctors won't tell you ■ What weight loss can accomplish ■ What foods are most likely to aggravate arthritis pain	
14. The Arthritis Survey TM Diet and Thirty-Day Meal Plan	255
 A sensible new diet based on participants' experience and current research = General dietary guidelines = Specific 	

thirty-day menu plan with recipes

Vitamins and Minerals

į	■ Countering the effects of arthritis itself ■ Countering the effects of the drugs used to treat arthritis	
SEC.	TION VI: HOW THE COLLECTIVE WISDOM OF SURVEY PARTICIPANTS CAN HELP YOU ON A DAILY BASIS	311
	16. How and <i>Why</i> to Build a Positive Outlook in Spite of Arthritis	313
t	■ How arthritis affects emotions ■ How attitude affects arthritis ■ How survey participants control stress ■ How they lift their spirits	
I	17. The Twenty-Five Top-Rated Techniques for Fast Pain Relief: At-Home Treatments You Can Use to Enhance Your Overall Care	330
S	Rest = Heat = Ice = Baths and showers = Exercise = Massage = Over-the-counter products = Joint protection = Biofeedback and more	
1	18. The Best Fitness Exercises for People with Arthritis	351
	Walking Swimming Bicycling Gardening and other ohysically demanding work	
1 f	9. Where Does It Hurt? Survey Participants' Advice or Spot Relief from Head to Toe	361
S	Range-of-motion exercises for individual joints = Strengthening exercises = Tips for jaw, neck, shoulders, elows, hands, back, hips, knees, ankles, feet	
	20. How to Make Your Environment More Comfortable	383
-	The best mattress = Kitchen conveniences = Chairs and	

stairs = Bathrooms as home hydrotherapy centers = Work-

place changes - Car comfort

15. How and When to Supplement Your Diet with

291

	nte		
L.O	nte	DITS	

хi

21. How to Go About Your Everyday Activities with Minimum Pain and Maximum Ease	403
- Control of the cont	

■ Smart tips for joint protection ■ Gadgets that get things done ■ Scheduling activities and rest to help you accomplish more ■ New ways to keep doing what you need to do, what you love to do

About the Research	421
Appendix A: Arthritis Survey Questionnaire	426
Appendix B: Survey Demographics	431
Appendix C: Drug Interactions	436
Selected Bibliography	449
Index	457
About the Authors	473
How to Send Your Comments to the Authors	477



NEW FINDINGS AND A NEW SOURCE OF HELP

To move freely without restriction due to pain, disability, or weakness is among the most basic of human rights. Any disorder that impairs mobility; limits the capacity to touch, embrace, or protect; and interferes with personal hygiene, physical labor, or recreation threatens a person's sense of dignity and self worth.

—Stephen R. Kaplan, M.D., and Edward V. Lally, M.D., from an article on arthritis treatments in *The Journal of Musculoskeletal Medicine* (September 1986)

May the work you do to help the suffering and educate the public be blessed by God.

—Survey Participant #440, a Canadian psychologist, minister, and mother of four

1

YOU HAVE GOOD REASONS TO BE HOPEFUL

■ A new kind of knowledge about helpful treatments for arthritis ■ Startling findings from an unprecedented nationwide survey ■ Questions you dare not ask your doctor—answered here

If you've read only this far, you already know something about arthritis. Maybe you know how it feels to lie imprisoned in bed each morning by knees and hips that have hardened to cement during the night. Or maybe you know the ringing noise that aspirin blares in your ears after you've swallowed your tenth or twelfth tablet of the day, or the fatigue that knocks you down in mid-morning, before you've had a chance to do half the things you used to accomplish with ease, or the anger that flares up when television commercials describe your ailment as "minor aches and pains."

No doubt you would like a *different* sort of knowledge about arthritis. What would help most to kill the pain? Would a change in diet help? Which experimental treatments hold real promise? Is surgery worth the risk? Can exercise slow the deterioration of the joints? Who gives the best care for arthritis? Which drugs fight inflammation best? Is there any harm in