

Musculoskeletal Diseases

Arthritis

- Arthritis is the leading cause of disability in the United States, with prevalence projected to double by the year 2020 due largely to an aging population and an increasing prevalence of obesity (Johnson & Hunter, 2014).
- About one in five adults and 300,000 children have a diagnosed arthritic condition.
 - It is estimated that 41% of the 50 million U.S. adults living with arthritis report activity limitations caused by arthritis.
 - The Centers for Disease Control and Prevention predicts a 25% increase to 67 million of U.S adults with some form of arthritis by 2030.

Effects of Arthritis

- Arthritis usually affects people who have other chronic conditions.
 - For example, arthritis is found among 52% of people with diabetes, 57% of people with heart disease, and 53% of people with hypertension.
 - Obese people with arthritis are 44% more likely not to be physically active compared to those without arthritis (White & Waterman, 2012).

Costs of Arthritis

- In 2007, the costs attributable to arthritis and other rheumatic conditions were \$128 billion:
 - \$80.8 billion in direct medical expenditures (\$115 billion in 2013 dollars) and
 - \$47 billion in indirect lost earnings (\$59.4 billion in 2013 dollars) (Ma, et al., 2014).

Measures

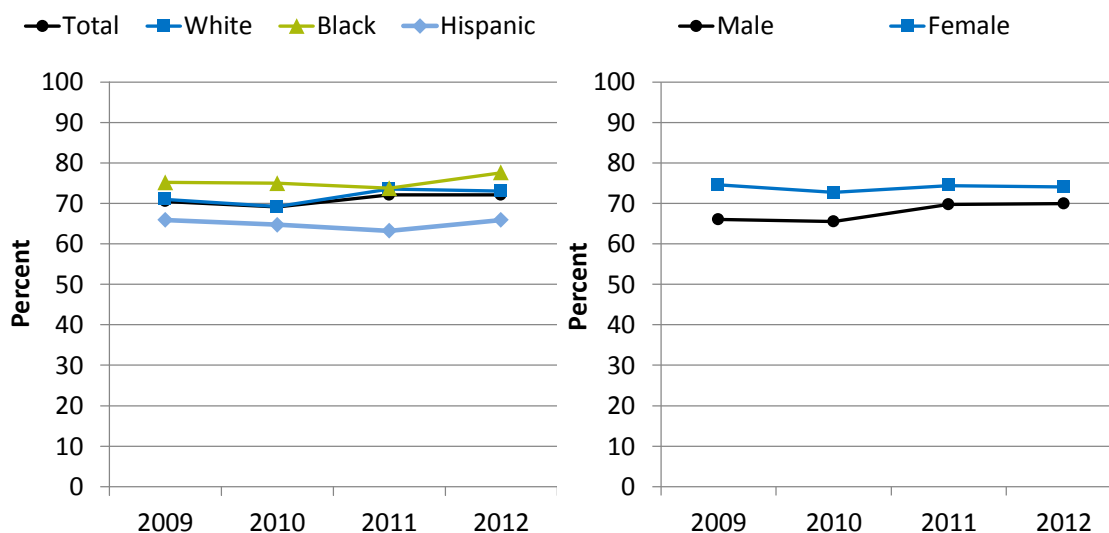
- Process: Adults with chronic joint symptoms who have ever seen a doctor or health professional for joint symptoms.

Chronic Joint Symptoms

- Estimates of arthritis prevalence vary depending on whether the definition includes chronic joint symptoms (pain, aching, joint stiffness).
- People with chronic joint symptoms report similar health outcomes as those with arthritis:
 - Activity limitations,
 - Poor/fair health and mental health, and
 - Similar health care use (Canizares & Badley, 2012).
- These patients need interventions and advice to manage and control the pain and symptoms in order to improve their health and quality of life (Canizares & Badley, 2012).

Adults Who Have Seen a Doctor for Joint Symptoms

Adults with chronic joint symptoms who have ever seen a doctor or other health professional for joint symptoms, by race/ethnicity and gender, 2009-2012



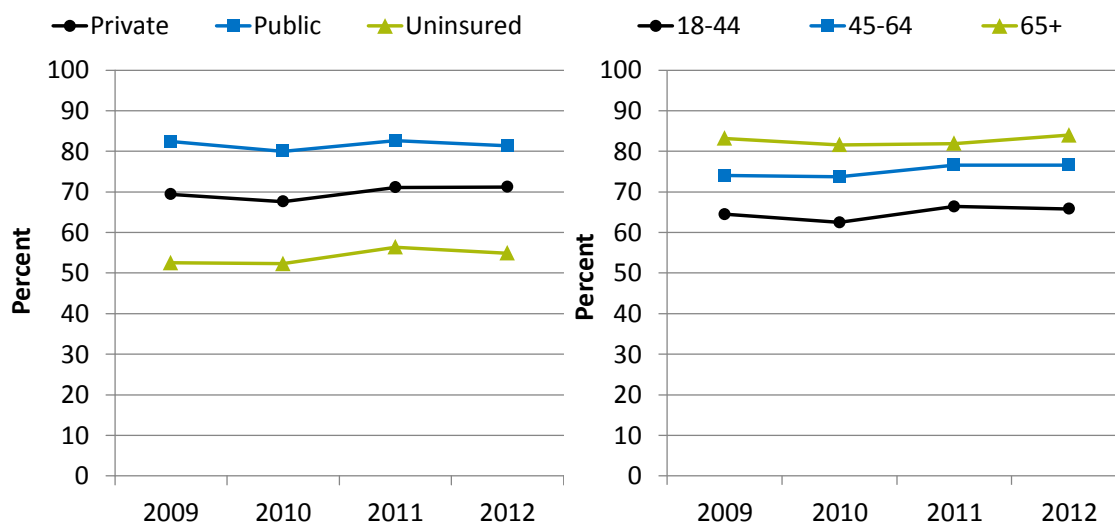
Source: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey, 2009-2012.

Note: White and Black are non-Hispanic. Hispanic includes all races.

- **Overall Rate:** In 2012, 72.1% of adults with chronic joint symptoms reported seeing a doctor or other health professional for joint symptoms.
- **Groups With Disparities:**
 - In all years, Hispanics were less likely than Whites to report seeing a doctor or other health professional for joint symptoms.
 - In all years, females were more likely than males to report seeing a doctor or other health professional for joint symptoms.

Adults Who Have Seen a Doctor for Joint Symptoms

Adults with chronic joint symptoms who have ever seen a doctor or other health professional for joint symptoms, by insurance and age, 2009-2012



Source: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey, 2009-2012.

• Groups With Disparities:

- In all years, people without insurance were less likely to report seeing a doctor or health professional for joint symptoms compared with people with private insurance.
- In all years, people with public insurance were more likely to report seeing a doctor or health professional for joint symptoms compared with people with private insurance.
- In all years, people ages 45-64 and 65 and over were more likely to report seeing a doctor or health professional for joint symptoms compared with those ages 18-44.

References

Canizares M, Badley E. Comparison of health-related outcomes for arthritis, chronic joint symptoms, and sporadic joint symptoms: a population-based study. *Arthritis Care Res* 2012 Nov;64(11):1708-14.

Johnson V, Hunter D. The epidemiology of osteoarthritis. *Best Pract Res Clin Rheumatol* 2014;28:5-15.

Ma V, Chan L, Carruthers K. Incidence, prevalence, costs, and impact on disability of common conditions requiring rehabilitation in the United States: stroke, spinal cord injury, traumatic brain injury, multiple sclerosis, osteoarthritis, rheumatoid arthritis, limb loss, and back pain. *Arch Phys Med Rehabil* 2014;95:986-95.

White P, Waterman M. Making osteoarthritis a public health priority. *Am J Nurs* 2012 Mar;112(3 Suppl 1):S20-5.