

Osteoarthritis

**natural, safe,
EFFECTIVE relief**

by Herb Joiner-Bey, N.D.

Nearly 21 million people suffer from osteoarthritis, according to the National Institutes of Health (NIH). Also known as degenerative joint disease, osteoarthritis is the second most common diagnosis, after chronic heart disease, that calls for Social Security disability payments because of long-term absence from work.

Stephen I. Katz, M.D., Ph.D., director of the National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS), says, "Arthritis is a leading cause of disability. With the aging of the population, it will increasingly burden individuals as well as the economy." NIAMS estimates half of the population older than 65 would show X-ray evidence of osteoarthritis in at least one joint.

When you suffer from osteoarthritis, routine activities such as climbing the stairs, driving, shopping, or even writing a letter become increasingly difficult.

Even worse, conventional medicine has all but ignored this growing epidemic, offering only drugs to mask the symptoms and surgery to replace damaged joints. The most commonly prescribed drugs for arthritis are nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen and aspirin. But studies have shown NSAID use to be controversial. Some NSAIDs can exacerbate arthritis by blocking cartilage repair and contributing to cartilage damage (*Inflammation* 2002 Jun;26[3]). NSAIDs can provide immediate relief, but they do little to halt or reverse osteoarthritis progression, and they trigger a host of side effects, including gastrointestinal disturbances and peptic ulcers.

Defining osteoarthritis

More than 100 arthritic conditions exist, including rheumatoid arthritis, fibromyalgia, gout, polymyalgia rheumatica, spondyloarthropathies, systemic lupus erythematosus (SLE or lupus), juvenile rheumatoid arthritis, and scleroderma.

Osteoarthritis is the most widespread arthritic ailment. It occurs when cartilage in the joints becomes worn or damaged. This painful condition affects women more than men, and virtually everyone

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older than 75, according to NIAMS.

Causes of osteoarthritis include a family history of this condition, nutritional deficiencies, injuries to the joints, obesity, and simply aging. Years of use can lead to the wear and tear of the joint structure, specifically joint cartilage, resulting in osteoarthritis. In addition, researchers believe that as we age, the body's ability to repair joint cartilage decreases and joint erosion increases.

Key symptoms of osteoarthritis, according to the American Institute of Preventive Medicine, include:

- Stiffness and swelling in one or more joints;
- Deep, aching pain in a joint;
- Any pain associated with movement of a joint;

Because osteoarthritis frequently affects the spine, back pain is another symptom. In addition, the joints of the fingers, base of the thumbs, neck, big toes, hips, and knees are commonly afflicted.

If osteoarthritis takes hold, there are steps you can take to alleviate the pain and help restore joint movement without NSAIDs.

Improve the diet

Diet can help you prevent and treat osteoarthritis. Choose foods rich in nutrients and fiber. Ruth Bar-Shalom, N.D., and David Soileau, N.D., of the American Association of Naturopathic Physicians, recommend the following dietary guidelines:

- Eat a diet rich in complex carbohydrates such as whole grains. Every day, eat at least one cup of whole grains, such as brown rice, oatmeal, or millet.

- Get plenty of fiber. Include in your daily diet at least one of the following: one salad, one cup of cooked leafy green vegetables, or one tablespoon of wheat or oat bran.
- Drink at least eight cups of water per day.
- Avoid processed or prepackaged foods, such as breakfast cereals, unless you are certain they are free of additives and made only from whole foods.
- Limit your use of cooking oil, butter, margarine, and other saturated fats.
- An allergic reaction to vegetables from the nightshade family may exacerbate arthritic symptoms. Avoid tomatoes, potatoes, eggplant, and green peppers for at least two months. After that, reintroduce the foods, one at a time, and see if symptoms return. This can help you identify what foods trigger allergies or pain.
- Eat one-half pound or more of cherries, blueberries, and other dark-red or blue berries daily to help reduce inflammation.
- Avoid caffeine, which is found in coffee, sodas, tea, chocolate, and many pain relievers.

"Restrict your consumption of processed, high-calorie, high-sugar, high-fat foods," advises medical research writer Ray Sahelian, M.D. "Instead, substitute a variety of fresh fruits, grains, legumes, and vegetables to obtain the hundreds of carotenoids and flavonoids that act as antioxidants and anti-inflammatory agents."

A successful "anti-arthritis" diet also features ways to maintain a healthy weight. Excess weight

strains joints and can provoke pain. And obesity may contribute directly to osteoarthritis development. Researchers who analyzed studies conducted between 1966 and 2000 describing obesity and hip osteoarthritis concluded that obesity increases the odds of osteoarthritis by roughly 25 percent (*Rheumatology (Oxford)* 2002 Oct;41[10]).

Tone and strengthen

Consistent exercise is an essential component of any successful anti-arthritis strategy. Stretching, strengthening, and postural exercises can support healthy cartilage, increase a joint's range of motion, and build surrounding muscles so they absorb shock more effectively.

The American Institute of Preventive Medicine recommends moderate, low-impact exercise. They say inactivity leads to loss of muscle tone and bone deterioration, while too much exercise can worsen pain.

Hydrotherapy—exercise done in water—is effective and soothing. It puts less stress on the joints because the water supports almost all the body's weight.

Glucosamine and chondroitin sulfate

In contrast to NSAIDs, specific natural substances can help repair damaged joint cartilage and protect against joint erosion. Scientific studies confirm that glucosamine, a nutrient derived from seashells and other sources, is superior to NSAIDs for treating osteoarthritis (*Arzneimittelforschung* 1998 May;48[5]). Glucosamine reduces pain, increases joint function, and keeps the affected joints from further deteriorating (*Lancet* 2001 Jan 27;357 [9252]). Best of all, it is extremely safe.

"Choose exercise routines that use all affected joints."

“Glucosamine works to normalize damaged joint cartilage and protect it from further harm.”

The recommended dose of glucosamine sulfate for osteoarthritis is 1,500 mg daily. Sahelian says most individuals experience at least partial relief within one to four months.

Another pain-relieving and healing supplement is chondroitin sulfate, a major component in the lining of joints. Studies indicate supplementing with chondroitin sulfate reduces pain, increases joint mobility, and contributes to healing (*Osteoarthritis Cartilage* 1998;16[Suppl A]).

“I would say about 60 percent of my patients benefit from glucosamine [sulfate] therapy. No side effects have been reported,” says New York physician Steven Bock, M.D. “When I add chondroitin to the glucosamine, some patients report a slight additional benefit.”

Some research indicates a combination of glucosamine and chondroitin is effective. For example, after reviewing numerous clinical trials, reviewers concluded glucosamine and chondroitin preparations provided moderate to large effects on osteoarthritis symptoms (*JAMA* 2000 Mar

15;283[11]). In another study, researchers found the combination, as a topical cream, effectively reduced osteoarthritis pain within four weeks (*J Rheumatol* 2003 Mar; 30[3]).

Other joint-protective compounds

In addition to proper dietary and lifestyle factors, and supplemental glucosamine and chondroitin sulfate, other natural substances can provide relief and protect against osteoarthritis. As with any health program, many experts advise taking a high-quality multivitamin and mineral supplement, along with a comprehensive antioxidant formula. The multivitamin and mineral complex should contain sufficient magnesium and calcium, important minerals for bone health. Drugs often given to arthritis patients can deplete the body's stores of calcium.

Bar-Shalom and Soileau, of the American Association of Naturo-

pathic Physicians, recommend the following supplements:

- **Vitamins A, B₆, and C**, and the minerals copper and zinc, are all required for the body's manufacture of collagen and normal cartilage.

- **Vitamins A and C**, when used in combination, may help slow the deterioration of afflicted cartilage.

- **Vitamins C and E**, used in combination, protect cartilage from free-radical destruction. In fact, white blood cell and plasma concentrations of vitamin C are significantly decreased in arthritis patients, indicating an increased need for this nutrient.

Pay particular attention to your vitamin C intake. Researchers have found that diets rich in antioxidant micronutrients, especially vitamin C, may reduce the risk of cartilage loss and osteoarthritis progression (*Arthritis Rheum* 1996 Apr;39[4]).

Another dietary supplement to consider is S-adenosyl-methionine (SAM-e). Researchers found it to be as effective as NSAIDs in reducing pain and improving functional limitations in patients with osteoarthritis, but without the adverse effects of NSAIDs (*J Fam Pract* 2002 May;51[5]).

In addition, there are several herbs with anti-inflammatory and pain-relieving properties. The Indian herb boswellia (*Boswellia serrata*) can improve flexibility and decrease swelling (*Phyto-medicine* 2003 Jan;10[1]). Cat's claw (*Uncaria tomentosa*), from Peru, reduced pain in osteoporosis patients leading researchers to

RETHINKING THE COX-2 INHIBITORS

A couple of years ago, the *Journal of the American Medical Association* made national headlines when it reported the newer, aggressively advertised COX-2 inhibitors such as Vioxx and Celebrex for arthritis increase heart attack risk. Doctors sometimes prefer these anti-inflammatory medications because they don't cause peptic ulcers, as do non-steroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen and naproxen. Based on this new study, however, some physicians are rethinking their position. Researchers at the Cleveland Clinic who conducted the study of 16,000 people found those taking COX-2 inhibitors were more than twice as likely to suffer a cardiovascular event such as heart attack, angina, or stroke. If you are taking a COX-2 inhibitor, and are concerned about the risk, talk to your doctor about other options.

suggest it as an effective treatment (*Inflamm Res* 2001 Sep; 50[9]:422-8). The potent anti-inflammatory action of devil's claw (*Harpagophytum procumbens*) proved to be as effective as the drug diacerhein, but with fewer side effects (*Phytomedicine* 2000 Jun;7[3]).

Willow bark (*Salix alba*), which is often called "nature's aspirin," also helps relieve the pain associated with arthritis without the side effects of aspirin. In addition, it is

reported to have antirheumatic and anti-inflammatory properties (*Clin Rheumatol* 1998; 17[1]).

Arthritis pain relief

Arthritis is a painful condition. Fortunately, with proper dietary and lifestyle changes, and nutritional supplements you can protect against—and possibly even reverse—osteoarthritis.

Don't let arthritis pain get the best of you. Climb those stairs, dance, walk in the sunshine, write

letters, and even play a round of golf—without a cart. By taking the right steps, you can free yourself from arthritis misery.

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