



NATIONAL ASSOCIATION OF  
**CHRONIC DISEASE DIRECTORS**  
Promoting Health. Preventing Disease.

## **Arthritis: It is Time to Pay Attention to This Costly Chronic Disease**

For too long now, arthritis, a chronic disease that affects joints, surrounding tissues and connective tissues, has not received the attention it deserves in terms of allocation of federal resources. Arthritis is a devastating and costly disease both in terms of those who suffer from it as well as the financial burden it represents to our healthcare system, and ultimately our society.

### **Arthritis Facts:**

- ✓ *Arthritis is the most common cause of disability in the U.S. -- ahead of much more visible health issues such as heart disease, diabetes, lung disease and high blood pressure.*
- ✓ *Arthritis affects 1 of every 5 American adults (46 million adults).*
- ✓ *Osteoarthritis, the most common form of arthritis, ranks # 7 in the top twenty most expensive conditions treated in U.S. hospitals at a cost of \$26.2 billion, and # 6 in the top twenty most expensive conditions billed to Medicare at a cost of \$15.4 billion in hospitalization costs.*
- ✓ *Arthritis and related disabilities result in estimated annual medical care costs of \$81 billion and estimated total costs (medical care and lost productivity) are \$128 billion.*
- ✓ *Over 57% of adults with heart disease, and over 52% of adults with diabetes, also have arthritis. Arthritis may limit the ability of people to effectively manage other chronic diseases.*

### **Action for Arthritis Management**

Although arthritis presents challenges of increasing prevalence, disability, cost and co-morbidity that need to be recognized by federal funders, there are proven programs that can help reduce arthritis burden.

Evidence-based Programs: Evidence-based programs have demonstrated the ability to decrease physician visits and improve physical functioning of people with arthritis. Chronic disease self-management and physical activity programs are key to more effectively managing arthritis.

- ✓ *Research has shown that physical activity programs decrease pain, improve function, and delay disability.*
- ✓ *Self-management education programs help people with arthritis develop the skills and confidence to manage their arthritis on a day- to- day basis. In fact, self-management education programs have demonstrated the ability to reduce pain even 4 years after participating in the program.*

Many state arthritis programs that receive limited state and federal funding have had success implementing these evidence-based programs and reaching people in need. However, much more needs to be done to begin to address the problem of arthritis

It is time for arthritis to be recognized as a serious chronic disease and to receive additional resources commensurate with other chronic disease programs. With additional resources, the burden of arthritis can be addressed in a more comprehensive fashion that will deliver programs to those most in need. This is vital because the public health challenge that arthritis presents is projected to get significantly and progressively worse:

- ✓ **46.4 million (21.6%) of adults aged 18 years and older have self-reported doctor-diagnosed arthritis; by 2030, that number will increase to 67 million (25%)**
- ✓ **18.9 million (8.8% of all adults) have arthritis-attributable activity limitation; by 2030 that number will increase to 25 million adults (9.3% of all adults)**

## **What is needed**

A number of states in partnership with the Centers for Disease Control and Prevention have arthritis programs that have made progress; however funding continues to be a limiting factor.

It is time to take arthritis seriously. Self-management and physical activity programs work effectively in reducing pain and disability and decreasing health care costs associated with arthritis. Arthritis presents an urgent public health issue that requires additional funding to carry out these programs.

For more information go to [www.chronicdisease.org](http://www.chronicdisease.org) or call 770-458-7400

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The purpose of the Arthritis Council of the National Association of Chronic Disease Directors is to:

- Represent the needs of those with Arthritis and other rheumatic conditions, through the State Arthritis Programs, to the National Association of Chronic Disease Directors.
- Link state/territorial/tribal program directors/coordinators, and others in a national forum to act collectively in the promotion of Arthritis Health.
- Exchange ideas, strategies, materials, and policies and procedures to improve and enhance comprehensive public health programs/policies for Arthritis diseases and their risk factors.
- Advocate for legislation, policies and programs to reduce the burden of Arthritis diseases and their risk factors.
- Provide comments and recommendations to federal agencies and the membership on issues for which comment has been solicited or for which the Council feels comments are required.
- Provide leadership and develop partnerships with affiliates, private and public associations and industry to catalyze promotion of Arthritis Health.

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## References

1. Hootman J, Bolen J, Helmick C, Langmaid G. Prevalence of doctor-diagnosed arthritis and arthritis-attributable activity limitation—United States, 2003-2005. MMWR [View the errata for this article here and here.] 2006;55(40):1089–1092.  
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2. Hootman JM, Helmick CG. Projections of U.S. prevalence of arthritis and associated activity limitations. Arthritis Rheum 2006;54(1):266–229. abstract
3. Agency for Healthcare Research and Quality, Healthcare Cost and Utilization Project, Statistical Brief #42. The National Hospital Bill: The Most Expensive Conditions by Payer, 2005. December 2007.