Panorama

I Have Osteoarthritis, but I Am Not Old

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If you had asked me 5 years ago what osteoarthritis (OA) was, I would have had a vague notion that it was something to do with the bones and joints of “old” people. Obviously, I was not old. I have always been a very active person, I played sports all through high school. As an adult, I walked at least 10,000 steps a day and went hiking whenever I could find the time. I loved to travel. Fast forward just a couple of years.

Not too long after my 50th birthday, I started having stiffness in my ankles and knees when I would first wake up in the morning or if I sat too long at work without getting up and moving around. I had some issues with stiffness in my neck. This all happened for about 4 months before I decided to go to a doctor. My primary care physician had me do x-rays of lots of different bones and joints around my body. I was diagnosed with OA in several joints, primarily my knees and the wrist on my dominant hand.

I didn’t think too much about it until after several months, when I realized I was not getting nearly the movement and exercise I once did. I didn’t enjoy hiking as much because my knees were getting swollen at times and it made me feel unsteady on the uneven terrain. When I would go downhill, I found myself getting nervous that I might trip and fall. So, I just stopped moving. I started feeling sorry for myself, and the pain and swelling just continued to get worse. I did a lot of reading about arthritis, inflammation, and what could be done about it. At this time, I was probably a year in with stiffness and pain. I was taking nonsteroidal antiinflammatory drugs pretty much daily and was down to about 2500 steps a day.

This spiral into what was a whole different life left me in a bit of despair. The positive side was that I am a licensed professional counselor, so I know all about endorphins and how they relate to depression. I knew intellectually that movement and exercise would decrease feelings of depression. But I also knew I was in pain much of the time. I did find out after my OA diagnosis that my chronic pain issues were also due to psoriatic arthritis (PsA) and Hashimoto thyroiditis. My markers of inflammation (erythrocyte sedimentation rate [ESR] and C-reactive protein) were off the charts. My rheumatologist tried a few things and here it is: 3 years later and my ESR has gone from 115 to 40 mm/h. My joints are still inflamed but not like how they were during my darkest times.

I was following support groups on Facebook and there was so much hurt and “giving up” on those forums that I just did not want to be that way. I knew through research that OA was not going to kill me—I just had to gain my confidence back. I spent over 2 years getting very little exercise and, as such, many of my muscles had lost their strength. I was starting over. I had to build the muscles back up in my knees and legs, and my arms and shoulders. I had to get moving. I have also been building back up stepwise. I still do not consistently get 10,000 steps a day, but I am on my way there with each passing day. I try to walk at least 30 minutes a day. I am making a conscious effort to take the stairs to build up my muscles. My knees continue to be stiff, but on most days, they don’t hurt. I’m starting to hike again—a lot slower and using trekking poles—but I was on a trail just last week.

I cut out lots of foods that I found were increasing my inflammation, such as sugar and processed foods. I stick with whole foods the best I can, and those that contain few to none of the ingredients that people can’t pronounce or identify. What I found is that when my inflammation is low, so is my pain. The arthritis—OA or PsA, I have them both—seems to only hurt when the markers of inflammation are high. The cracking and popping of the joints and around the joints do not really hurt and I can deal with those. I was prescribed several types of medications over the last 3 years to reduce the inflammation in my muscles and joints, and I am finally on one that is making a difference. The wearing down of the cartilage and joints themselves was not causing the pain—it was the swelling.

Once I realized I wasn’t going to hurt myself by pushing myself a bit to get back into an exercise regimen, I started to have hope. Medical professionals interacting with individuals with arthritis—regardless of what type—should really help patients find hope to get back to things they enjoy. The first 2 doctors I saw wanted to give me pain pills but never suggested I continue with my regular walking or with keeping those steps up. I was never told the less I moved, the stiffer I would become. Only when the markers of inflammation became high was I sent to a rheumatologist. The rheumatologist was very patient in explaining everything that was going on. It was the combination of treatment, activities, and medications that led to me starting to feel like myself again.