Physiotherapy in Rheumatoid Arthritis

Information for patients

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What do Physiotherapists do?

We conduct assessments by asking detailed questions about your symptoms, medical history and daily life.

Using specific tests we can then measure joint movements, muscle strength, muscle length and functional abilities, in order to provide you with appropriate treatments and advice.
What are the aims of Physiotherapy in Rheumatoid Arthritis?

- Prevent disability
- Increase functional capacity
- Improve general fitness
- Provide pain relief and education
- Improve flexibility and strength
- Encourage regular exercise
Physical Assessment

- Gait Analysis
- Assessment of posture
- Testing muscle length & strength
- Measuring joint movement
- Functional tests (balance, stairs etc)
Physiotherapy Treatments for Rheumatoid Arthritis

Cold Therapy: E.g. Ice packs

- Provides pain relief
- Causes constriction of the blood vessels around the treated area
- Normal temperature inside the body’s joints is 33°, but in rheumatoid arthritis this can rise to 36°. Ice helps limit the activity of enzymes that can damage cartilage
- Useful in the acute phase or active period of inflammation, but can also give day to day pain relief
- 10-20 mins 1-2 times a day
Treatments Cont’d

Heat Therapy: Hot water bottle/wheat pack

- Provides pain relief by reducing muscle spasm
- Improves the elasticity of soft tissues - can be used before exercise
- Encourages blood vessels in the surface of tissues around the joint to dilate, drawing circulation away from the painful joint
- Useful for chronic phases, or day to day
- 20-30 mins 1-2 times day
Treatments Cont’d

TENS “Transcutaneous Electrical Stimulation”

- Small current passed across the skin by electrodes
- Provides short-term pain relief (6-18 hours)
- Can be used several times a day - time usage with times of the day when you find your pain is worse
- Need to have regular breaks from using TENS as your nerves can become acclimatized to it which reduces its effects
Exercise For Rheumatoid Arthritis

- Maintaining muscle strength is important for joint stability & preventing injury
- Muscles can become weak following reduced activity
- Pain signals from your nerves and swelling can both inhibit muscles
- Muscle length can be affected by prolonged positions & immobilization and tightness can limit daily activities
Considerations for Exercise

- The number of joints affected
- Stage of condition
- Patient’s age / other medical conditions
- Patient’s goals
Exercises for the Acute Phase

- Performed at least once a day
- Gentle assisted movement through the joint’s normal range, to prevent contracture
- Isometric “static muscle contraction” exercises to maintain muscle tone without increasing inflammation
Acute Phase Cont’d

- These exercises should not be pushed into pain & any discomfort felt after exercising should settle within one hour.
- Build up new exercises gradually so that you can differentiate between the ‘normal’ amount of pain you get and pain from overusing a joint.
- The acute phase is when joints are most vulnerable to damage, so adjust the number of exercises or how far you move each joint for how you feel that day.
Exercises for the Chronic Phase

- Can progress the above exercises to include use of light resistance
- Postural / core stability exercises
- Swimming / walking / cycling to maintain cardiovascular fitness
- Gentle stretches for areas that become tight, such as knees & calves
Joint Protection

- Try to avoid prolonged positions
- Balance activity with rest periods - rest should come before you get fatigued or sore
- Look at your work or home desk set-up
- During the acute phase activities such as stair climbing can put stress through your knees, ankles & hips - try to keep the number of trips up & down to a minimum
Any Questions?