Exercise and arthritis

devised with and for people with arthritis
Exercise can be the furthest thing from people’s minds when they live with pain on a daily basis. But, for people with arthritis, exercise is all-important. It helps limit pain, maintains mobility, boosts energy and keeps muscles strong to support joints. It also helps prevent disability.

Exercise is a life-long commitment. This booklet aims to give the facts about the benefits of exercise, explain some of the more common forms of safe exercise followed by people with arthritis, and help motivate you to start on the road to fitness and well-being.

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All people pictured on the cover and quoted in this booklet have arthritis.
EXERCISING FOR HEALTH

The facts about exercise are simple. Get enough and you’ll feel better, be able to do more and you may live longer.

Most people exercise too little. Modern living, with its armchair entertainment, office jobs and motor cars, does not encourage it as part of everyday activity. Finding the right sort of exercise will really help you to manage your arthritis.

Getting good advice, being careful about the way you exercise, choosing an exercise routine to suit you and your lifestyle, and keeping it up helps guarantee success.

Why exercise is important
Exercise is good for us: it keeps us supple and flexible and reduces the risk of illness. Everyone benefits from exercise but, for people with arthritis, the benefits of regular exercise are enormous.

Following a regular exercise programme enables people to live a more pain-free, independent life. The benefits include:

- better range of movement and joint mobility
- better pain management
- increased muscle strength
- stronger bones – which can help protect against osteoporosis
- weight control
- improved balance and co-ordination
- reduced stress
- improved sleep patterns
- increased energy levels
- better breathing
- improved self-esteem.

The NHS recommends that adults should undertake a minimum of 30 minutes of moderate intensity exercise at least five days a week. You can do this in blocks of five to 10 minutes if it is too much for you to do in one go.

Now I exercise I am far less tired. My quality of life is far better
Age is no barrier to exercise. The recommendations for adults also apply to older people.

Exercise helps keep weight under control which is important for everyone with arthritis. Extra weight means extra pressure on the back, hips, knees, ankles and feet – the weight-bearing joints.

Being overweight can increase the load carried by the joints by four or five times. Obesity increases the risk of osteoarthritis of the knee in women and also of the hands and possibly of the hips. Obesity can also increase the chance of developing other chronic conditions such as diabetes. Exercise is as important as diet in trying to lose weight.

Don’t expect immediate results. Although improvements may have begun, you may not see or feel the full benefits for a few months.

- Making that commitment

People use a multitude of excuses to avoid exercising. Pain, stiffness and fear of harming joints can be high on the list. The reality is that muscles lose strength and joints become painful, stiff and unstable if they are not exercised. Exercise does not make arthritis worse as long as the right technique is used and appropriate exercises are done.

Lack of time is a common excuse for not exercising. Building an exercise routine into your daily life may take a bit of getting used to, but is worth it in the long run.

Finding the right time to exercise is important: some people find it easier first thing in the morning, while others prefer to spread it throughout the day. After a while, exercising daily
becomes second nature.

Self-consciousness can also be a barrier to exercise. Some people worry about exercising in front of other people because of their arthritis. Everyone has a different level of fitness and most people who exercise do not have the perfect body. Wearing loose clothing when exercising with others can help if you are worried about how you look and exercising in water can hide limitations if you are worried about keeping up with a class.

**Before getting started**
Making the decision to begin exercising on a regular basis is vital, but so is understanding your arthritis and how it might affect you while exercising. It is important to be aware of a number of things which can make a difference.

**Don’t overdo it**
During the first couple of weeks of a new routine, expect to feel a small increase in discomfort because muscles are probably being worked in a way they are unaccustomed to.

However, if an exercise gives you a sharp pain, especially in the joint itself, stop doing it immediately. Before trying that particular exercise again, check with a doctor or physiotherapist.

Remember it is normal to feel the effects of exercise, especially in muscles. However, if there is still pain two hours after finishing exercising, it is a good indication that you have overdone things. Don’t be put off. Next time, do fewer repetitions and build the routine up gradually.

Other signs of overdoing it are persistent fatigue, decreased range of movement, increased joint swelling and continuing pain. If you experience any of these symptoms, seek immediate advice from a doctor or physiotherapist.

It is a good idea to exercise when in the least pain, such as after a warm shower or bath, or after taking pain control medication.
Painkillers can relieve pain, however, so be careful not to push too far until you know what your limits are.

A hot or cold pack can also help relieve pain in specific areas before or after exercising.

**Good posture**
Maintaining correct posture is vital for people with arthritis as it puts less strain on the body. People with bad posture usually slouch. When this happens, the weight of the body falls forward, putting added strain on muscles and joints.

Good posture looks good and it aligns the body. It can be hard work to maintain good posture, but exercising improves it and makes it easier to maintain.

Bad posture can be due to muscles and tendons either being too tight or too weak. For example, muscles and tendons running up your front may have become shorter and those running up your back may have become longer. This means they don’t support the
Exercises can be done to strengthen, lengthen and even shorten muscles, making it easier to maintain good posture. Swimming can be a good exercise for this. Improvements can be achieved in a short space of time.

The best way to achieve correct posture when standing is:
- imagine the crown of your head is floating upwards and the rest of your body is dangling below it. Your chin should remain slightly dropped. Your neck and back lengthen and straighten, your shoulders drop, your stomach flattens and your bottom tucks under
- stand with your feet slightly apart
- your ears should be directly over your shoulders
- tilt your pelvis slightly back so that it is level
- your hips should be in line with your knees and feet.

Check how good your posture is by looking in a mirror or by asking a friend. When it is good, the body feels more relaxed.

Maintain good posture throughout the day – while walking, at work, driving and while watching television. Increasing body awareness during daily activities will help good posture become a habit.

Exercising during a flare-up
Some people with certain forms of arthritis, such as rheumatoid arthritis or lupus, experience what is known as a flare-up – a time when inflammation is suddenly more active and pain, swelling and stiffness get worse. Flare-ups can last from a couple of days to a few weeks.

It is important to keep doing gentle exercises during a flare-up of arthritis, especially range of movement exercises (see page 8). However, cut down on the rest of the routine and cut out the more strenuous exercise. You can also do very gentle muscle-strengthening exercises.

As the flare-up improves, slowly build up the routine again. Don’t pick up at the same level as before as some physical fitness may have been lost, especially if the flare lasted for some time.

If only one joint is affected by the flare, try adapting the exercises to give the rest of the body a good workout while not aggravating the inflamed joint.
Exercising with a joint replacement

For some people with arthritis, joints such as hips, knees or shoulders become so damaged and painful that replacement surgery is necessary. If this happens there are a number of steps that can be taken in the lead-up to the operation.

● Don’t wait for the operation, do exercises beforehand to strengthen the muscles around the joint that is being replaced. This speeds up recovery after the operation.

● It is often more comfortable to do non-weight bearing exercises such as swimming and cycling.

● Include range-of-movement exercises – range of movement can be hard to regain after an operation.

● Exercise should not be excessive; even 10 to 15 minutes a day can make a big difference.

After the operation, exercise is very important. Expect to work with physiotherapists to get the new joint moving.

The orthopaedic department should have booklets with information about how to look after the replacement joint in the first few months, but ask if there is anything you are unsure of. In the subsequent years after the replacement operation, the joint still needs looking after.

● Check with your surgeon or physiotherapist before beginning a routine and ensure the correct technique is being used when exercising.

● Walking and swimming are ideal exercises for people who have had replacement surgery as they are low impact exercises. Don’t overdo things and avoid swimming strokes that may overstretcher your new joint, such as breaststroke.

● Running is a high impact exercise so avoid it if you have had a hip or knee replaced, even if you think you can do it. This helps the new joint to last for longer.

● Skiing should be avoided due to the risk of damage to the replacement joint from falling.

● With a hip replacement, be careful not to bend too far when doing range of movement exercises for the leg as you risk dislocating it – the knee must not be lifted higher than hip height and you should not do any exercises where a leg crosses across the mid line of the
body. This may rule out breaststroke in swimming.

- Get advice before you play contact sports; these are not usually advised after joint surgery.
- If you want to get really fit, use gym equipment such as an exercise bike or crosstrainer and a treadmill for walking as these are not high impact.

### Staying motivated

It is all very well aiming to start an exercise routine, but without motivation you won’t get very far. Finding a form of exercise which is enjoyable, fun and suits your lifestyle and financial situation is crucial.

**Varying the routine** and the type of activities you do helps keep you on track and out of a rut. It also boosts fitness as the body has less chance to get used to what it is doing. If it is difficult to vary activities, try varying the speed and intensity of your routine. Try to **get a friend to join** you when exercising.

**Don’t set goals too high** – they should be realistic and short-term. Making a contract with yourself helps keep track of your achievements and keeps interest alive. Build your routine up gradually so that it becomes part of everyday life.

Exercise needs to be done at a **time that suits you**. If exercising at home, it is a good idea to try to exercise at the same time every day so that the routine becomes familiar. If attending a class, try and find one that is held at a time that fits in with your lifestyle – you will be far more likely to go.

Arthritis may mean sometimes having to take an unscheduled rest day. If you miss a session, don’t worry, but don’t let your routine slide by getting out of the exercise habit. Physical fitness and other benefits such as increased energy start to decline after missing three or four sessions. Remembering how quickly muscles lose strength and how much longer it takes to build them up should be a good motivator.

Finally, don’t stop exercising once improvements begin to show. To maintain the benefits, exercising has to be a life-long commitment.

"Making short-term goals gave me the motivation I lacked to begin a routine"
THE DIFFERENT TYPES OF EXERCISE

There are three main types of exercise for people with arthritis: range-of-movement, strengthening and aerobic exercise. A good exercise programme will include all three. An appropriate programme will depend on the type and severity of your arthritis and your general level of fitness.

The difference between the types of exercise is explained below and pages 11-21 show some of the more common range-of-movement and strengthening exercises.

■ Range of movement
Range-of-movement (ROM) exercises form the backbone of every exercise programme. Everyone should do range-of-movement exercises as they help maintain flexibility and are important for good posture and strength – especially important for people with arthritis.

The exercises involve taking joints through their comfortable range of movement and then easing them just a little further. ROM exercises are done smoothly and gently so they can be done even when in pain and during a flare-up.

Range-of-movement exercises should be done twice a day, every day. Take each joint through its range of movement between three and 10 times each session, building up the number of repetitions slowly. Ease gently from one position to the next and hold. You should feel a soft pull, not a sharp tug. Do not jerk or try to push it further as this can result in overstretching.

■ Strengthening
Strengthening exercises are important for everyone, especially people with arthritis, because they help strengthen the muscles which move, protect and support your joints.

Many people become less active when they develop arthritis because of pain and the fear of causing damage. This
usually leads to muscle wastage and weaker joints. By developing strong muscles, joints become more stable and tasks such as walking and climbing stairs become easier.

Strengthening exercises encourage the body to work harder than normal. Start slowly, building up the number of repetitions. As the muscles get used to doing more, they get stronger.

Strengthening exercises are done by tightening and releasing the muscles around a joint. The type of exercises you do depends on which type of arthritis you have, which joints are affected and the severity of your condition. Some exercises may be harmful so always check with a doctor or physiotherapist before starting on a routine – they may be able to suggest alternative moves.

**Resistance work**
Strengthening exercises can sometimes be called resistance exercises – this is because resistant bands or weights can be added to the routine to strengthen muscles by making them work harder. This doesn’t necessarily mean pumping iron.

If exercising in a gym, there should be a range of resistance equipment and weights to choose from and instructors are on hand to give advice. If exercising at home you can use household items such as a pair of tights, cans of food, bottles and bags of sugar. Alternatively you can buy specifically designed equipment such as ankle weights. Be sure to begin with lighter items and build up.

People with painful hips and knees should avoid too many weight-bearing exercises and heavy weight lifting is not recommended. Check with a doctor or physiotherapist before adding weights to your routine.

Strengthening exercises may be difficult to begin with, but soon become easier. Aim to do at least one session a day.

It can be helpful to do gentle strengthening exercises on an inflamed joint, but check with a physiotherapist first.

**Aerobic**
Aerobic just means exercise that raises your heart rate. But when
people hear the word aerobic they often think of ultra fit people jumping up and down to loud music in a gym. Exercise has moved on since this 80s stereotype and, while aerobics classes still go on, there are many different sorts of aerobic exercises people with arthritis can do.

Aerobic exercise burns off calories, speeds up the body’s metabolism, helps maintain a strong heart and helps muscles work more effectively. This form of exercise uses the body’s large groups of muscles in continuous motion and is also known as endurance or cardiovascular exercise.

Aerobic exercise helps build stamina, control and reduce weight, improves sleep, strengthens bones (thus protecting against osteoporosis), and reduces depression. The moderate exertion used when exercising should bring about slight breathlessness and an increased pulse. Feeling more than that may mean you are doing too much.

Best forms
The best forms of aerobic exercise for people with arthritis are walking, cycling, swimming, and doing the vacuuming. These are all discussed in more detail later in the booklet.

Before starting to exercise, warm up by doing some gentle stretches. Likewise, cool down after stopping. This can be done by slowly doing a bit more of the exercise you were doing or by doing more stretching exercises.

Check with a doctor before beginning a new exercise, especially if you have moderate to severe arthritis, a heart condition or high blood pressure.

To get any benefit, aerobic exercise must be done for a prolonged period (30 minutes) five times a week. If this is too much to begin with, build up slowly until the body is ready for a full workout – try doing blocks of 5 to 10 minutes, resting in between.
COMMON EXERCISES FOR PEOPLE WITH ARTHRITIS

Listed on the following pages are some of the more common range-of-movement and strengthening exercises for people with arthritis. Choose ones most appropriate for you, but try to exercise every joint.

A physiotherapist may have shown you different, additional or adapted exercises. Before starting to exercise, it is important to adopt the correct posture (see page 4). Throughout the workout, keep checking that you are maintaining the correct technique in order to avoid injury and get the most benefit from exercising.

Breathe regularly while exercising – it is common for people to hold their breath without realising. If any of the exercises cause dizziness, visual disturbance or sudden increases in pain, stop them immediately.

Not all the exercises will be suitable for everybody so check with a doctor or physiotherapist before starting a routine. This is especially important if you have had a joint replaced.
Range-of-movement exercises

These exercises can be done in any order, but it is a good idea to start with the extremities – such as the hands – and work inwards. Try to do all of these exercises but, if pushed for time, concentrate on the areas affected by arthritis.

Range-of-movement exercises should be done twice-a-day, every day. Take joints through their range of movement between 3 and 10 times each session, building up the number of repetitions slowly.

For the hands, wrists and forearms

- Curl your fingers into a fist and stretch them back out.
- Spread your fingers into a wide span and then close them together.
- Circle your thumbs back and forth.
- Stretch your thumb away from the palm of your hand as far as you can. Pull the thumb back to touch each finger tip of the same hand. [figure 1]
- With your arms resting on the arms of a chair, rotate your forearms so that your palms face the ceiling and then turn them to face the floor. Keep your elbow in a fixed position. [figure 2]
- Resting your wrists on the arms of a chair, bend your wrists up and down towards and away from your body (This is one of the most important exercises).

Tips

- If your fingers are a bit stiff, try the exercise in a bowl of warm water or after washing up.
- These exercises can also help relieve morning stiffness.
- You can do most of these exercises while at your desk at work or while watching television.
For the ankles and feet

■ When lying down or sitting with your feet up, bend your feet up and down to point your toes.
■ In the same position, move your feet in circles clockwise then anti-clockwise.
■ Wriggle your toes up and down and try to spread them out.
■ Sitting down and keeping the outside edge of your foot on the floor, raise the inner edge (so that you are showing the sole of your foot). Lower back into a flat position. [figure 3a]
■ Keeping the inside edge of your foot on the floor, raise the outer edge (so that you are showing the sole of your foot). Repeat with other foot. Keep your knees in a fixed position throughout this exercise. [figure 3b]
For the shoulders

- Slowly shrug your shoulders up and down.
- Roll your shoulders in both directions.
- Stretch your arms above your head.
- Putting both hands behind your head, bring your elbows together and pull apart again. Avoid pulling on your head.
- Putting your hands on your shoulders (left on left and right on right) so that your elbows are out at the side. Circle the elbows up and back. [figure 4]
- Putting your arms out behind your back with the palms facing inwards, pull your shoulder blades together.
- Hold a stick, a hoover attachment or a rolling pin behind your back, one end in each hand. Keeping your elbows straight, lift the stick upwards away from your body.

Tips

- All of these exercises can be done while standing or sitting.
- Some of these exercises can be done in the car, while at a desk at work or while watching television.
- If the exercises cause dizziness, stop.
For the neck

■ Tuck your chin in to make a double chin. You will feel the stretch in the back of your neck. Do not do this exercise if you have rheumatoid arthritis. [figure 5]

■ Keeping your chin in the same position, turn your head to look over your right shoulder as far as is comfortable and then over your left.

■ Keeping your chin in the same position and shoulders level, drop your right ear towards your right shoulder and then the left ear towards the left shoulder.

Tips

● All of these exercises can be done while standing or sitting.

● Some of these exercises can be done in the car, while at a desk at work or while watching television.

● Avoid circular movements of the neck.
For the back
■ Lying flat on your back with your knees bent up and feet flat, roll your knees from side to side.
■ Lying on your back with your knees bent up and your feet flat, push your back flat into the floor, tilting your hip bones towards your face then away from you towards your feet.
■ Either standing up or when sitting on a chair and keeping your hips in a fixed position, slowly turn around to the left as far as you can, then turn around to the right.
■ Either standing up or when sitting on a chair and keeping your hips fixed, slowly lean down to the side towards the floor to the left and then down to the right.
Tip
● Exercises done lying down should be done on a flat surface to keep your body in alignment. If you find it difficult getting up and down from the floor, try doing them on a firm mattress.

For the hips
■ Standing and holding onto something firm like a banister or a table, slowly sway your leg back and forth in front and behind you.
■ Lying on your back, bend one knee up towards your chest and then lower it. Repeat with the other leg.
■ Also on your back and keeping the knee straight, slide one leg out to the side and back in again. Repeat with the other leg.
■ Lying on your back with your knees bent and feet together, allow your knees to fall apart out to the sides as far as possible. [figure 6]
Tip
● Many of these ROM exercises can be adapted to be done in water.
For the knees

■ Sitting on a chair, bend each leg back under the seat and then straighten your leg. This is a good exercise to do when travelling or in a theatre or cinema, it can reduce stiffness on first standing up.
■ Sitting over the edge of the bed, swing your knees back and forth to help loosen morning stiffness.
■ Sitting on the floor with your legs out straight, bend your knee fully up to your hip then slowly lower out straight. Repeat with the other leg.
**Strengthening exercises**

You should repeat the exercises appropriate to you up to 10 times each. Build up the number of repetitions gradually. Tense and hold the muscles in each position for between five and 10 seconds.

**For the hands and wrists**

- With your hand flat on the table, hold a piece of paper tightly between your fingers. Try to remove it with your other hand.
- With your forearm resting palm down on your thigh or on a table, try lifting up your hand while resisting the movement by placing your opposite hand on top. Repeat with the other hand and with palm up. [*figure 7*]
- Repeat the exercise above, but rest your palm down instead of up.
- Also to improve grip, gently squeeze a soft ball and hold it for five or 10 seconds.
For the ankles

- Sitting on a chair with your feet on the floor, put one foot on top of the other foot. Try lifting the underneath foot while resisting movement with the foot that is on top. Repeat with your other foot.
- Sitting on a chair, hold a rubber exercise band or a pair of tights around your foot. Point your toes towards the floor using the band for resistance. Repeat with your other foot. Stand using a chair or banister for balance, push up on your toes to go on tip-toe.

For the back

- Lying on your back with your knees bent and feet flat, tighten your stomach by pushing the small of your back downwards. Hold the position and relax.
- Lying on your back with your knees bent and feet flat, bring your knee up to your hip and hug it to your chest. Hold for 10 seconds then let it go. Repeat with the other leg and then repeat with both legs together.
- Lying on your stomach with your arms in front of you, raise yourself up on to your elbows, keeping your hands flat on the floor. Slowly lower yourself down. [figure 8]
For the hips

■ Lying on your back on the floor or a firm bed, tighten your thigh muscles and push the back of your knees downwards. Hold for 10 seconds then relax.
■ Lying on your back with your knees bent and feet flat, lift your bottom off the floor, squeezing your buttocks together.
■ Lying on your side, with your bottom leg bent and top leg in line with your body, tighten the front thigh muscle then lift the top leg about 10 inches away from the floor. Hold then lower. Repeat on the other side. [figure 9]

For the hips and knees

■ Lying on your stomach, tighten the front thigh muscle then lift your leg up straight to a comfortable height, keeping the knee straight. Hold then lower.
■ Lying on your side, cross your top leg over your lower leg putting your foot on the floor. Lift your lower leg up. Hold then lower. Repeat with the other leg. If you have had a hip replacement, check with your physiotherapist before doing this exercise.
For the knees

- Lying on the floor or a firm bed with a pillow or rolled up towel under the knees, straighten one knee, raising the heel. Hold the position and relax.
- Lying flat on your back with your legs straight, pull your toes towards you so they point up to the ceiling and tighten the muscles above the knees. Hold and relax. This can also be done standing up.
- Lying down or standing, place a pillow or rolled up towel between your thighs and squeeze it, tightening your buttocks.
- Lying on your back, push your knee flat into the floor or bed and raise your leg into the air to a comfortable height. Lower slowly. Make sure you keep your leg straight throughout this exercise. This may be more comfortable to do if the opposite knee is bent with the foot flat on the bed.
- Sitting down, fully straighten your knees, hold for 10 seconds and then slowly lower.
Walking

Although walking does not suit all people with arthritis, it is probably the easiest and most common way to exercise. It is good for strengthening the heart and lungs and the muscles around the hips and knees.

Walking is such an easy form of exercise because it can be incorporated into everyday life – taking the dog for a walk, walking to the shops or to work.

As well as walking short distances each day, aim to go on a few brisker walks each week to get full aerobic exercise.

If you haven’t done a lot of walking, start with five to 10 minute walks and gradually increase the distance.

Make sure you adopt the right walking technique – land on the heel of the foot and roll forward to drive off the ball of the foot – and maintain good posture.

"Walking can be relaxing. I take it nice and easy, and it gives me a chance to get away from things."
If you enjoy walking but feel unsteady on your feet, try using a stick when out. A stick should be used in the opposite hand to the painful hip, knee or foot.

Wearing well-fitting, cushioned, non-slip shoes, like trainers, is advisable.

**Water**

Swimming is a good all-round aerobic exercise for virtually everyone as it stretches and strengthens muscles as well as giving the heart a good work out. Because people can move more freely in the water, it is particularly suited to people with arthritis – water supports the weight of the body, putting minimal strain on joints, causing less jarring and reducing pain.

There are a number of different swimming styles including back stroke, freestyle (front crawl) and breaststroke. Breaststroke is often unsuitable if knees or hips are affected by arthritis as it puts too much strain on these joints. It can also strain the neck if the head is kept out of the water.

Before beginning a regular swimming routine, check your swimming style is correct; if it isn’t you may strain muscles.

A lot more can be done in the water than just swimming. Exercises which are difficult on dry land may be easier to do in the water – the buoyancy of water relieves pressure on joints. Water also adds a natural resistance which can help build muscle.

Hydrotherapy courses – where exercise is done under the supervision of a physiotherapist – may be held in a local hospital. A hydrotherapy pool is heated to a warmer temperature, like that of a bath, which helps relax muscles and allow joints to move more easily. It is smaller than a swimming pool and usually the water goes up to shoulder level.

A referral is needed from a doctor for hydrotherapy sessions. Ask...
a GP or rheumatologist about facilities in the area. If there aren’t any, ask a physiotherapist to demonstrate some exercises to adapt in a swimming pool. Local Arthritis Care groups and other disability groups, such as BackCare, also run hydrotherapy sessions. A local library should have details.

If exercising in a pool other than a hydrotherapy pool, it is a good idea to check the water temperature to make sure it is warm enough – a warmer temperature is needed for exercising than for swimming as it makes exercising easier. Children’s pools are often warmer, shallower and usually easier to get into than the main swimming pool. Feeling tired afterwards is common because of the higher temperature.

Many people with arthritis enjoy aqua-aerobic classes at their local swimming pool. These are usually taught at different levels – try starting with the easiest or with one aimed at people with mobility problems.

The advantage of doing an aerobics class in the water is that, unlike on land, there is significantly less stress on joints. Make sure the water is deep enough – the deeper it is, the more it supports body weight. If you find some of the exercises difficult, ask the instructor to suggest alternative moves.

Before going swimming, check that you can get in and out of the swimming pool – some pools only have ladder steps which some people with arthritis find difficult to use.

Dance
Dancing can be great fun and it is a good way of keeping fit without the monotony of a regular exercise routine. It can improve stance, breathing and general fitness.

As well as the health benefits, dancing is a sociable way of exercising because there is usually a lot of interaction with other people.

There are many different forms of dance which can be done at levels which suit all capabilities. Go along and watch a class before deciding to join.

Comfortable clothing and footwear is recommended, but trainers may stick to the floor too much and prevent ease of movement.

Dance styles to try include ballroom, salsa, jazz or line dancing.
Tell the dance instructor that you have arthritis. If you have had a hip or knee replacement, check with a doctor that the dance moves are suitable before beginning a class.

As well as the structured dance styles mentioned there is also unstructured dancing that people do in a club or at a party. Although this can be great fun and gives a really good workout, be careful not to put excessive stress on joints.

■ Cycling
Bicycle riding is a good aerobic exercise and can be very enjoyable. Modern bikes can be adapted to suit individual needs. Handle bars, seats and positions, and operation of gears and brakes can all be adjusted – just ask a local bike shop or try a bike specialist. If balancing is a problem, try a three-wheeled trike.

Try finding a quiet road, park or wood if you are worried about riding a bike in traffic. If you would rather stay indoors, try using a stationary exercise bike. Watching television or listening to music while exercising can make it a bit more interesting.

Cycling may not be suitable for those with knee problems.
OTHER POPULAR WAYS TO EXERCISE

You may not want to exercise at home – you may find it harder to get motivated or you may even find it lonely. There are other ways and places to exercise, but always remember to make sure the exercise is safe and appropriate to you.

■ Classes

Exercise classes exist all over the UK in gyms, studios and village halls. Classes can be motivating thanks to the interaction with other people and supervision from an instructor.

With such a choice, there is bound to be a class that appeals, from yoga and aerobics, to keep-fit and aqua-aerobics. And you don’t have to be young – some classes are aimed at people over 50, over 60, or those with limited mobility, while others are more general and open to all.

There are a lot of ordinary people at the class and it’s very easy to exercise in the group. I really enjoy it.
Libraries or councils should have details. Some local authorities have a sports development team who have a health remit. They may organise specialist classes in the community.

Once you have found a class, contact the instructor, check they are qualified to teach the class, tell them about your arthritis and make sure you have confidence in their ability to understand your needs.

Exercises won’t be specific to you, but most can be adapted so ask the instructor for advice if you need it.

Don’t forget to check with a doctor or physiotherapist before joining a class to see if any moves should be avoided, especially if you have had a joint replaced.

The class needs to be accessible, held at a suitable time of day, of the right intensity and under the right supervision. If these things are right, you are more likely to go regularly.

Gyms and personal trainers
Gyms offer a way of exercising with the latest equipment, in conducive surroundings, under expert supervision. They offer a range of ways of getting fit including specialist equipment and fitness classes. There is sometimes access to a sauna, steam room or jacuzzi, which offer heat benefits to people with arthritis. Sometimes there may be a swimming pool within the facilities.

Many exercises are not suitable for people with arthritis so it is important to explain to the instructor what you are comfortable doing. The instructor should draw up a fitness plan and it is advisable to run this past a doctor or physiotherapist before beginning.

You can also ask your GP about the exercise referral scheme where you can attend a local swimming pool or gym with an instructor to guide you. The scheme is cheaper than joining a gym or pool yourself.

Know what to expect
Although gyms can be intimidating you can expect to be shown around the gym and taught how to use the equipment. This is an opportunity to get familiarised with the gym and any protocols.

Staff are always on hand to help. Don’t be embarrassed to ask
questions as it is in their interest to make sure you are confident and to prevent you from injuring yourself by using equipment inappropriately.

Gym instructors should have up-to-date qualifications and many gyms do internal training which allows instructors to regularly update their knowledge and skills.

There are a number of things to check before joining a gym:
● check the gym is accessible
● inform the staff you have arthritis
● check the instructors have up-to-date qualifications
● ask for a free trial or consultation before signing up for membership
● ask as many questions as possible at the trial
● try to determine whether the instructor has a good understanding of your condition
● after deciding to join, expect to be given a fitness test and asked medical questions
● don’t expect to use the gym alone until an instructor has demonstrated how to use the equipment
● your exercise programme should be reviewed regularly – every two to three months.

Joining a gym can be expensive, so work out whether it is cost-effective. Most places make people sign up for at least a year. Some gyms offer discounts for disabled people or those on benefits so check this out before signing up. Some local leisure centres offer pay-as-you-go options.

Don’t forget, if you are unsure whether the gym is for you, ask for a free tour to check it out.

If you want the expertise and motivation of a trainer but don’t fancy the gym, look into hiring a personal trainer. This can be expensive but, once the trainer has done a personal training plan and demonstrated the right techniques, there is the option of carrying on alone and getting them back to review the training plan as and when necessary.

A list of trainers across the UK is available from the national register of personal trainers (www.nrpt.co.uk or call 01536 425920). Many local magazines and newspapers carry adverts for trainers. Check out their qualifications before hiring them...
Yoga combines exercise, breathing and relaxation. It has been practised for thousands of years and is a popular holistic exercise. It is very popular with people with arthritis for its gentle way of promoting flexibility and strength in mind, body and spirit.

Yoga can improve muscle tone and mobility, and it can also help relaxation by undoing tension. Muscles and joints, circulation, digestion and the nervous and endocrine systems are stimulated and balanced by using the breath while the body is moved into different positions. The mind and emotions are also balanced and calmed.

Some yoga moves are not suitable for people with arthritis. Find a teacher who understands arthritis and can adapt movements for individual needs, especially if you have replacement joints. Check with a doctor or physiotherapist to find out if there are any movements to avoid.

There are classes which are specifically for people with arthritis, people with limited mobility, or for older people. Some teachers also work on a one-to-one basis which would be suitable for someone with severe arthritis.

It is a good idea to speak directly to the teacher before you begin a class and ask for a trial period to make sure it is right for you.

DVDs and books have been especially produced on yoga for people with arthritis and residential courses are available.

Pilates

Pilates is a fusion of western and eastern philosophies which teaches body awareness, breathing, balance, co-ordination, strength and flexibility. Like yoga, it is a holistic exercise – treating the mind as well as the body. Its emphasis is on stretching and strengthening for
the whole body without building bulk.

Pilates is a series of gentle, controlled movements which target the deep postural muscles, building strength from inside out. It puts little strain on joints as most of the exercises are low impact.

Pilates can be done by people of any fitness level. Exercises are done on a mat or machine but most can be adapted. Mat-based pilates doesn’t usually involve much getting up and down from the floor.

Find a qualified teacher to ensure proper training and supervision. Discuss your condition with them in detail to establish the kind of exercises that suit your needs best. Check the moves with a doctor before starting on a programme.

Pilates can be taught on a one-to-one basis or as part of a class. One-to-one classes tend to be a lot more expensive but, if your arthritis is more severe, it might be a good idea to begin with a few one-to-one sessions. Then, when you are confident in what you are doing, try moving on to a class, taking your adapted moves with you.

■ Tai chi

Tai chi originates from China and aims to improve the flow of chi (energy), calm the mind and promote self-healing. It is suitable for almost anyone.

Tai chi is a form of martial art which gently exercises the body, strengthening muscles and freeing up the joints. It consists of slow, fluid, gentle and circular movements. It can be practised almost anywhere and the intensity can be adjusted to suit your condition.

Many people with arthritis like tai chi as it improves energy, fitness and balance. It also helps correct body posture and improves circulation, flexibility and breathing.

It is best to learn tai chi in a class where an instructor can demonstrate the correct moves. However, it can also be learned from a video. Many of the exercises are performed standing up, but can be adapted to do sitting down. Many classes can be adapted to suit people with arthritis.

Tai chi is suitable for people of all ages and levels of fitness, but let the instructor know you have arthritis.
WORKING EXERCISE INTO DAILY LIFE

Although it is important to maintain regular, structured exercise, it is possible to incorporate exercise into a daily routine in surprisingly easy ways. Physical activity cannot replace structured exercise, but it does help maintain joint movement and fitness.

Do the housework: vacuuming is a good example of aerobic exercise. It uses both arm and leg muscles, particularly if using an upright cleaner. Washing/mopping floors gives a similar workout. Don’t try and do the whole house at once; build up to a maximum of 20 to 30 minutes to get a good aerobic workout.

Do the washing up: doing the dishes can also help maintain movement. Washing up in warm water can help loosen up finger joints and emptying the dishwasher can help stretch arm and leg muscles.

Lose the remote control: getting up to change the television channel prevents sitting in the same position for too long. Even small movements like this help burn more calories and improve balance.

Learn to play the piano or take up knitting: both these hobbies are great exercise for fingers and can be very enjoyable. Playing the piano in particular gives fingers a good stretch.

Do the gardening: working in the garden is another good opportunity to exercise joints. Making a few adaptations to the way you garden may be necessary, perhaps using different equipment (An Occupational Therapist can best advise about this), but gentle gardening activities allow for stretching without putting too much stress on joints. Changing gardening jobs regularly works different sets of muscles. Try doing a little, often. Limit it to a maximum of 30 minutes at a time to avoid overdoing things.

Use the stairs: if you do not have problems with your hip or knees, use the stairs instead of taking lifts and escalators.

I regard everything I do as exercise.
When I am doing housework I try to put more movement into the way I do things
TIPS FOR SPECIFIC TYPES OF ARTHRITIS

People living with certain types of arthritis may find that their symptoms dictate how and when they exercise. The following information is intended to give some tips to help people living with osteoarthritis, rheumatoid arthritis, lupus, ankylosing spondylitis, osteoporosis and fibromyalgia. If you have a condition not mentioned here and would like information about appropriate exercise, talk to your doctor or physiotherapist, or call Arthritis Care’s helplines (see back cover for details) who can signpost you to the relevant organisation.

■ Osteoarthritis
● Regular exercise is one of the best ways of relieving the symptoms of osteoarthritis. Keeping active strengthens the muscles around the joints helping to prevent further degeneration. Exercise can help to maintain a healthy weight, which will reduce the strain on certain joints.
● Develop a moderate exercise programme – a strenuous programme may cause more pain and possibly accelerate deterioration.
● Range-of-movement exercises should be done every day in every joint.
● The routine should not increase your levels of pain beyond the two hour rule (see page 3).
● Never force a painful joint.

■ Rheumatoid arthritis
● A successful exercise routine requires a balance of rest and activity for people with rheumatoid arthritis.
● Exercise when least tired.
● Do range-of-movement exercises at least once a day. If done in the morning, they help ease morning stiffness and if done before going to bed at night they may help reduce it.
● Strengthening exercises are important to build muscle to protect and support joints.
Low impact aerobic exercises such as swimming and cycling are good for people with rheumatoid arthritis.

Always maintain good posture.

**Osteoporosis**

- Maintaining a regular exercise routine throughout life helps prevent osteoporosis – exercise strengthens bones.
- Weight-bearing, range-of-movement, strengthening and aerobic exercises are important for the prevention of osteoporosis.
- Always maintain good posture.
- The National Osteoporosis Society produces an exercise booklet especially for people with osteoporosis. See page 39 for details.

**Fibromyalgia**

- Research shows that exercise can be beneficial to people with fibromyalgia, increasing fitness levels, improving sleep and helping them cope with pain better.
- Vigorous exercise makes some people with fibromyalgia worse –
low to moderate aerobic and strengthening exercises are best for people with the condition.

- Incorporate range-of-movement and gentle strengthening exercises into daily routine.
- Maintain good posture.

**Ankylosing spondylitis**

- Appropriate exercise is vital for managing ankylosing spondylitis.
- Stretching exercises of the neck, spine, shoulders and hips are particularly important.
- Strengthening exercises for the back and hips are good for helping to maintain good posture.
- Swimming is an excellent exercise for people with ankylosing spondylitis. If you have neck restrictions, try using a mask and a snorkel to breathe while swimming.
- Avoid jerky movements and high impact exercises.
- An exercise video specifically for people with ankylosing spondylitis is available from the National Ankylosing Spondylitis Society. See page 39 for details.

**Lupus**

- Finding the right time to exercise is important for people with lupus because of the tiredness associated with the condition.
- Develop a programme of moderate exercise that includes stretching, strengthening and aerobic exercise.
- Walking, swimming and cycling are good moderate aerobic activities for people with lupus.
- Doing stretching exercises before going to bed may help reduce morning stiffness in joints.
- Avoid high impact exercises if you have arthritis as part of your lupus.

"I lost over half a stone once I started exercising which made me feel like a whole new person. I feel full of life compared to before."
Now that you have learned more about the benefits of safe and appropriate exercise to help you manage your arthritis better, it will help to remember the following tips.

● It is best to exercise when you have the least pain and stiffness, the least tiredness and your medication is having maximum effect.
● Wear comfortable, loose fitting clothes and supportive, cushioned footwear.
● A warm bath or shower before prolonged exercise may help relax muscles.
● Little and often within a daily routine is best for stretching and strengthening exercises. The routine can be done in blocks of five to 10 minutes instead of all in one go.
● Never force a joint.
● Do not continue with an exercise that causes severe pain or discomfort.
● Respect the two hour rule – if you feel more pain two hours after
exercising (other than normal muscle ache) than you did before you started, do less next time.

- It is not advisable to exercise a hot, inflamed joint. It is often too painful to move through its full range of movement but you should move it within the limits of pain. Return gradually to exercise once the inflammation has subsided.
- If you have had joint surgery, check with your doctor whether there are any movements you should avoid. Also check with your doctor if you have a condition affecting your heart or lungs.
- It is best to do lying down exercises on a hard surface like the floor – your posture will be out of alignment on a soft surface.
- An exercise mat may make exercising on the floor more comfortable.
- Most exercises can be adapted to suit your condition.
- Maintain the right technique for each exercise.
- Keep an eye on your posture at all times.
- Don’t be deterred if the benefits are not immediate.
- Make exercise a habit: keep positive and keep it up.

You should now have the tools to make a commitment to exercise that will improve the symptoms of your arthritis and help protect your joints from further damage. You are also likely to improve your overall health and well-being.

Remember to do safe and appropriate exercise and you could achieve a new level of fitness. This will help keep your body and mind in shape and give you the strength to deal with anything your arthritis (or life in general) throws at you.
USEFUL ORGANISATIONS

GENERAL
● Arthritis Care
  www.arthritiscare.org.uk
  Arthritis Care in England:
  Tel: 0844 8888 2111 or 020 7380 6509/10/11
  Email: englandoffice@arthritiscare.org.uk

Northern Ireland office:
  Tel: 028 9078 2940

Scotland office:
  Tel: 0141 954 7776

Wales office:
  Tel: 029 2044 4155

● Arthritis Research UK
  Tel: 0300 790 0400
  www.arthritisresearchuk.org
  Funds medical research into arthritis and produces information.

● BackCare
  Tel: 0845 130 2704
  www.backcare.org.uk

● Sport England
  Tel: 08458 508 508
  www.sportengland.org

● English Federation of Disability Sport
  Tel: 01509 227750 or 0161 228 2012
  www.efds.co.uk

● Sport Wales
  Tel: 0845 045 0904
  www.sportwales.org.uk

● Disability Sport Wales
  Tel: 0845 846 0021
  www.disabilitysportwales.org

● Sport Northern Ireland
  Tel: 028 9038 1222
  www.sportni.net

● Sport Scotland
  Tel: 0141 534 6500
  www.sportscotland.org.uk

● Scottish Disability Sport
  Tel: 0131 317 1130
  www.scottishdisabilitysport.com

● Disability Sports Northern Ireland
  Tel: 028 9038 7062
  www.dsni.co.uk
CLASSES AND TRAINERS
Contact your local council or sports centre for more information on what is on offer in your area.
Check libraries and the Yellow Pages for details of local exercise and sports clubs and courses.

● Excel 2000
Tel: 01263 825670
www.excel2000.org.uk
Offers disabled people structured movement to music – workshops as well as video and audio tapes. For information, send SAE.

● Extend
Tel: 01582 832760
www.extend.org.uk
Movement to music for the over sixties and disabled people of any age.

● The Fitness League
Tel: 017403 266000
www.thefitnessleague.com
Offers low impact exercise by trained teachers in a class situation. Classes are suitable for all ages and abilities.

● The National Register of Personal Trainers
Tel: 01536 425920
www.nrpt.co.uk
Can forward you details of registered trainers in your area.

● Sports Coach UK
Tel: 0113 274 4802
www.sportscoachuk.org
An organisation of coaches for all sports.

● The YMCAfit
Tel: 0844 346 0036
www.ymcafit.org.uk
Offers courses across the UK.

ALEXANDER TECHNIQUE

● The Society of Teachers of the Alexander Technique
Tel: 020 7482 5135
www.stat.org.uk
The largest regulatory body of Alexander Technique teachers.

CYCLING

● British Cycling
Tel: 0161 274 2000
www.britishcycling.org.uk

PILATES

● Body Control Pilates
Tel: 020 7636 8900
www.bodycontrolpilates.com
A list of UK instructors is available on their website.
USEFUL ORGANISATIONS

SWIMMING
● National Association of Swimming Clubs for the Handicapped
  Tel: 01329 833689
  www.nasch.org.uk

TAI CHI
● Tai Chi Union for Great Britain
  Tel: 01403 257918
  www.taichiunion.com
  Has a list of registered Tai Chi Union instructors throughout the UK (details online).

WALKING
● The British Walking Federation
  www.bwf-ivv.org.uk
  Promotes non-competitive sports for health and international relations. It has contact details of walking clubs around the UK.

YOGA
● The British Wheel of Yoga
  Tel: 01529 306851
  www.bwy.org.uk
  The governing body of yoga.

VIDEOS/DVDs
Tai Chi for Arthritis
DVD by Dr Paul Lam
Order online from www.taichiproductions.com

Fight Back
A home exercise and stretching DVD for people with ankylosing spondylitis. Available for £5 from:
National Ankylosing Spondylitis Society, Unit 0.2, One Victoria Villas, Richmond, Surrey TW9 2GW
Tel: 020 8948 9117
www.nass.co.uk/shop

BOOKS AND LEAFLETS
The National Osteoporosis Society produces a booklet on exercise:
Exercise and Osteoporosis
This booklet can be ordered from The National Osteoporosis Society Camerton, Bath BA2 0PJ
Tel: 0845 450 0230
www.nos.org.uk
Our information is regularly reviewed. This booklet will be reviewed in 2015. Please check our website for up-to-date information and reference sources or call 020 7380 6577.
**ARTHРИTIS CARE**

Arthritis Care exists to support people with arthritis. We are the UK’s largest charity working with and for all people who have arthritis. We offer support wherever you live in the UK.

It costs us £1.60 to provide you with this booklet. If you are able to access information online, you’ll help us save money and the environment.

Get involved with us today if you can.

- Make a donation.
- Leave a legacy in your Will.
- Join as a member.
- Become a volunteer.
- Support us in your local area.
- Take part in events.
- Campaign on our behalf.
- Find out about our self-management training and support.
- Join our online discussion forum.
- Visit our website.
- Ring our confidential helpline.
- Join a local support group.

We exist for everyone with arthritis, but we rely on the support of people like you. If you would like to make a contribution to our work, please phone us on 020 7380 6540. Or you can donate online.

www.arthritiscare.org.uk
To find out more about arthritis and Arthritis Care

Freephone our confidential helpline

0808 800 4050
(weekdays 10am-4pm)

Visit our website
www.arthritiscare.org.uk