



Sievers Sports Medicine

Patient Information Sheet

Condition: Osteoarthritis

Definition: A degenerative process that affects joints. Joint cartilage is damaged, which leads to pain, stiffness, decrease in strength and sometimes swelling. It is caused by significant previous trauma, being overweight, repetitive stress and is influenced by heredity.

Treatments:

- I. Medications:
 - a. Tylenol Arthritis: a very safe and excellent first choice.
 - b. NSAIDs: a good second choice, especially if swelling is present. Examples include: Ibuprofen, Aleve, Naproxen, Aspirin, Naprosyn, Daypro, Celebrex and many others. Side effects of NSAIDs may include but are not limited to upset stomach, ulcers, hypertension, increase in blood pressure, bleeding/bruising tendency and kidney problems.
 - c. Joint Supplements: Glucosamine Chondroitin either with sulfate or MSM are safe alternatives in the 1500 mg per day dose. It may take one month to notice significant benefits; collagen hydrolysate, hyaluronic acid.
 - d. Topicals: Aspercreme, Biofreeze, Voltaren and other joint rubs.
- II. Avoid/limit stress put on joint:
 - a. Limit high stress activities: squatting, kneeling, stairs, and heavy lifting.
 - b. Braces may help disperse forces over the joint.
 - c. Cane or walker will help decrease put on lower body by using upper body strength. If using a cane, use it in the opposite hand of the painful leg.
- III. Exercise/rehabilitation: Maintain flexibility and strength through low impact activities such as bike, elliptical, swim and light weight lifting. These may be acquired through formal physical therapy, at home or in a gym. There may be short term discomfort but stiffness and weakness will cause much more pain.
- IV. Weight loss: Being even moderately overweight puts additional stress on joints. Losing 5-10 pounds can make a big difference!
- V. Joint injections:
 - a. Corticosteroid: decrease inflammation and pain for weeks or months. Not recommended to have more than 4 injections per year.
 - b. Joint lubricants: Sodium Hyaluronate can be injected in a series of 3 shots spread 1 week apart that may reduce the friction in the knee which in turn may reduce pain.
 - c. PRP (Platelet Rich Plasma): Information sheet available at front desk.
- VI. Surgery: Joint replacement may be considered when pain is severe and other treatments have not proved successful.