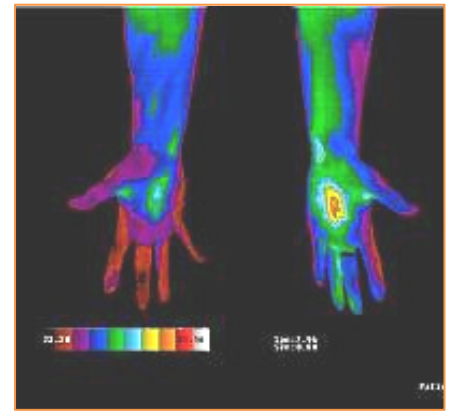


Osteoarthritis vs Rheumatoid Arthritis

May 2011



Thermogram Image

Joints bothering you? Think it's your age? There may be something more going on than just your joint pain. Knowing which kind of arthritis you are dealing with can determine treatment protocols to maintain your lifestyle.

What is Osteoarthritis (OA)?

OA, also known as degenerative joint disease (DJD), is identified as the breakdown of the joint's cartilage. Cartilage cushions the ends of bones in each joint of the body. Cartilage breakdown causes bones to rub against each other, causing pain and loss of movement.

The causes of OA can be related to age, weight, joint injuries from accidents, or overuse injuries. Stiffness from OA usually occurs in the morning and doesn't last more than an hour. This stiffness can re-occur at night. The pattern of OA will usually only affect one side and is common at the ends of the fingers, the hips, knees, and spine.

According to the American College of Rheumatology, 70% of people over the age of 70 have x-ray evidence of osteoarthritis. A physical exam accompanied by x-rays will diagnose a patient with OA. Decreased range of motion and tenderness of the involved painful joint will be present on examination. X-rays can reveal osteophytes, or bone spurs, at the joints, joint space narrowing, and increased bone density or thickening.

What is Rheumatoid Arthritis (RA)?

RA is a disorder that affects the entire body. It is characterized by the inflammation of the joint lining, which causes pain, stiffness, warmth, redness and swelling. The disease process of RA is autoimmune. Patients with autoimmune diseases have antibodies in their blood that target their own body tissues which as a result causes the inflammation.

It is not known what triggers the onset of RA. Infectious agents such as viruses, bacteria, and fungi have long been suspected, as well as environmental factors. Symptoms of RA come and go depending on the degree of tissue inflammation. The hands and wrists are most affected. Inflammation and pain are symmetrical (occurring on both sides) and are present upon rising for longer periods of time than OA. Other symptoms include fatigue, loss of energy, lack of appetite, low-grade fever, muscle and joint aches, and stiffness.

RA is medically diagnosed by a combination of the presentation of the joints involved, joint stiffness in the morning, the presence of blood rheumatoid factor (Rh factor), as well as x-ray findings of soft tissue swelling, joint space narrowing, and joint deformities. Rh factor is an antibody that can be found in 80% of patients with RA according to medical author William Shiel Jr, MD. Patients who do not have a positive Rh factor are referred as having "seronegative" RA. Seronegative arthritis's include Ankylosing Spondylitis, Reiter's syndrome, Psoriatic, Enteropathic, and Reactive. However, more studies show that testing the combination of Rh factor with the antibody cyclic citrullinated peptide (CCP) has more value than testing Rh factor alone.¹

According to American College of Rheumatology, approximately 95% of patients with a positive CCP will develop RA in the future. When patients are negative for CCP but have a positive RF, then the clinical signs and symptoms are more vital in determining whether they have RA or some other inflammatory condition.¹

What can you do?

1. Measure Your Inflammation

Thermal imaging or thermography specifically and visually measures inflammation. Thermography uses an infrared camera to measure your body's surface temperature and displays it as a digital thermal image called a thermogram. Whether your pain is chronic or acute, thermography can help provide a precise and objective measurement of your condition.

Contrary to most diagnostic tests, thermal imaging is pain free, non-invasive and usually taking less than 20 minutes. Most importantly, it emits absolutely **NO radiation**. Thermography is the *only* diagnostic method that can visualize your pain and pathology.

Thermography helps detect early signs of arthritis and differentiate between OA and RA. X-rays, ultrasound, MRI and CT scans are all tests that measure structures of your body (anatomy). Thermography has the unique ability to measure your physiological (chemical) changes and metabolic processes.

2. **Acupuncture:** A number of studies have looked at acupuncture in osteoarthritis and rheumatoid arthritis, the two most common types of arthritis. The most recent review article involved 3,498 people with OA in 16 trials and found that using acupuncture points designed to improve arthritic conditions was superior to sham acupuncture (using points not intended for arthritic treatment) for short term improvements in pain and function.¹

3. **Nutritional & Toxic Element Analysis:** Ask yourself "Why isn't my body healing and repairing as it has before?" What's different? Joints are non-essential tissues. You don't "need" them to survive. Maybe there is something more important developing and the body isn't wasting nutrients on joint health at this time. Addressing the inflammation would be an obvious step to take control of the pain. But if you identify nutritional deficiencies in the body and environmental toxins that may be burdening the body, you will likely have a better outcome. A healthy body heals more efficiently. You cannot correct it without a health professional that does metabolic testing to determine exactly what your body needs.

Many researchers, according to a Johns Hopkins Health Alert posted January 11, 2010 in *Arthritis*, now believe that vitamin D may one day play a key role in preventing the development and progression of arthritis. They have been looking at the effect of vitamin D on rheumatoid arthritis and osteoarthritis and the data is quite suggestive of linking low blood levels of vitamin D to chronic pain conditions, including various types of bone and joint pain, muscle pain, rheumatic diseases and osteoarthritis.

You're never deficient in just one vitamin and you're not going to find your "miracle" in one pill. Getting a thorough blood work-up, thermography and toxic element testing will shed light on dietary changes you need to make, target areas you may need to supplement and help to objectively monitor your progress.

Don't let chronic pain get in the way of your lifestyle. Aches and pains are a way of your body expressing that there is an underlying issue present. There may be, or probably is, a more serious problem or problems developing, we may just be seeing the tip of the iceberg. Your symptoms may be caused by a more serious condition that we can't see yet which is why thorough testing is so important.

Don't Guess About Your Health...

Schedule a Free Nutritional Consultation Today

Call 760-735-8101

email:
dr.cfarlow@cox.net

Telephone Consultations Available!

References:

¹ Bizzaro N, Mazzanti G, et al., Diagnostic accuracy of the anti-citrulline antibody assay for rheumatoid arthritis. *Clin Chem*. 2001 Jun;47(6):1089-93

¹ American Association for Clinical Chemistry, November 26, 2008

¹ Mann, Denise. *Alternative Treatments for Arthritis: Experts look at the pros and cons of alternative arthritis therapies*. October 4, 2010

Federal Law requires that we warn you of the following:

1. Your individual health status and any required health care treatments can only be properly addressed by a professional healthcare provider of your choice. Remember: There is no adequate substitution for a personal consultation with your chosen health care provider. Therefore, we encourage you to make your own health care decisions based upon your research and in partnership with a qualified health care professional.

2. The Constitution guarantees you the right to be your own physician and to prescribe for your own health.