

This patient page is excerpted from an article on KnowYourBack by Anand Joshi, MD, MHA. Find more about injury prevention, spine conditions, and treatments at knowyourback.org.

What is osteoarthritis?

Osteoarthritis is the most common form of arthritis. It is the leading cause of disability in older adults and may affect as many as 27 million Americans. There are many different forms of arthritis. However, osteoarthritis is a particular type that can be thought of as damage to the cartilage (the softer cushion within the joint) and an overgrowth of bone (bone spurs) when the joint tries to stabilize itself. Because of this, osteoarthritis can affect nearly any joint in the body—most commonly the knees, hips and spinal joints.



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How common is osteoarthritis?

Osteoarthritis is more common in some joints of the body but less common in others and becomes more common with age. The Framingham Osteoarthritis Study found that in adults age 45 and older osteoarthritis appears on an x-ray 19% of the time, but will cause pain or other problems 7% of the time. These numbers apply to the knee and there would be other numbers for other parts of the body and for other age groups. To put it all in perspective, osteoarthritis is the most common reason why older adults have trouble walking.

What are the risks for osteoarthritis?

Injured or abnormally shaped joints are more likely to develop osteoarthritis in the future. Some risks affect the body as a whole, including older age, female gender, African-American race, genetics and obesity.

When should I suspect osteoarthritis?

Pain is the most common symptom. Initially, pain is usually worse when you use the joint and better with rest; however, if osteoarthritis worsens, pain may become constant. The affected joint may also be tender. A joint with osteoarthritis may not be able to move through its full range-of-motion. You may see bony swelling near the joint. A joint with severe osteoarthritis may be deformed and may not be able to support weight.

Can anything be done to prevent or slow down osteoarthritis?

We do not yet have a way to reverse osteoarthritis once it has developed. One of the most important things that we can control to help prevent osteoarthritis is maintaining a healthy weight.

If I have osteoarthritis, can it be treated?

Yes, there are things you can do to keep pain from getting worse and keep the joint working! Even if you have osteoarthritis, it is not too late to reach a healthy body weight and find an exercise program that is safe and enjoyable for you. In fact, resistance exercise has been shown to decrease pain and improve the function of the joint.

Can medication help osteoarthritis?

Prescription medications are not always necessary, and in fact, acetaminophen is considered one of the best starting points. More severe pain may benefit from adding a nonsteroidal anti-inflammatory drug (NSAIDs), like ibuprofen or naproxen.

When should I think about surgery?

A joint with severe osteoarthritis that is very painful and not responding to other treatments may be a candidate for surgery. A treatment called radiofrequency ablation is available for painful arthritis of the spine. This is an outpatient procedure done with a needle. The treatment is meant to reduce transmission of pain by disconnecting some of the nerve endings. Like all more aggressive treatments, you will want to consult with your doctor first to see if you would be a candidate.

Tear this page out and use it as a resource to educate your patients about osteoarthritis. Use KnowYourBack.org for more patient information.