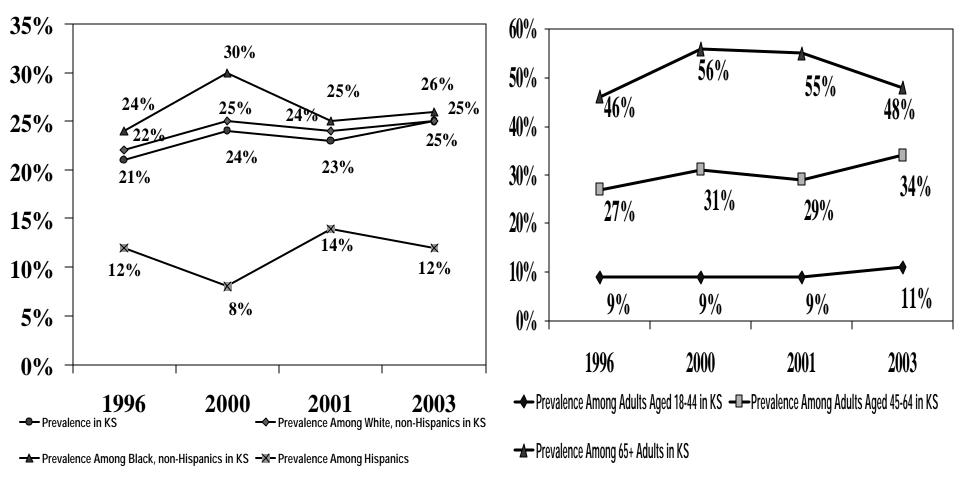
Arthritis in Kansas

Healthy Kansans 2010
Steering Committee Meeting
April 1, 2005

Prevalence of Doctor-diagnosed Arthritis Among Kansas Adults

Prevalence in Kansas Population and Racial/Ethnic Groups.

Prevalence in Age Groups



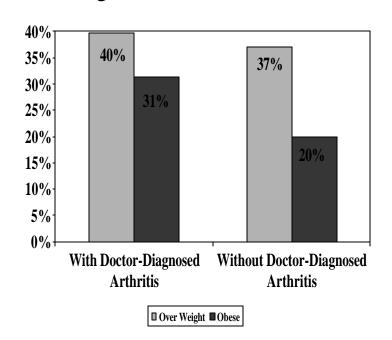
- Prevalence of doctor-diagnosed arthritis among adults in Kansas (25% in 2003) is similar to national figure (27% in 2002).
- Prevalence of doctor-diagnosed arthritis increases with increasing age.

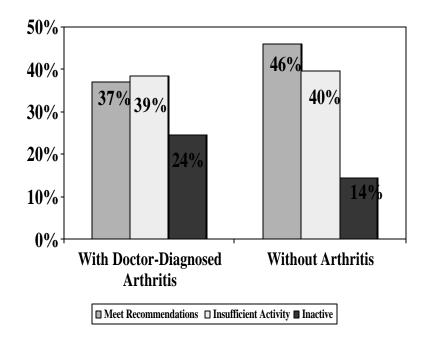
Source: 1996, 2000, 2001, 2003 Kansas Behavioral Risk Factor Surveillance System, Office of Health Promotion, Kansas Department of Health and Environment.

Prevalence of Obesity and Physical Activity Levels Among Adults With Doctor-Diagnosed Arthritis-2003

Overweight and Obese Status

Physical Activity Level Status

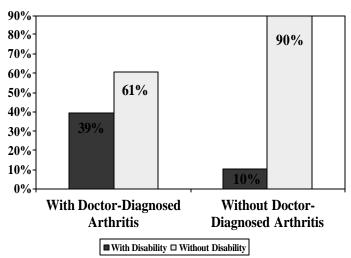




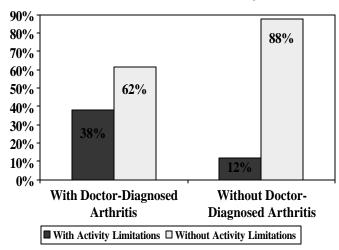
- Prevalence of obesity is higher among individuals with doctor-diagnosed arthritis.
- Prevalence of individuals who are physically inactive is higher among those with doctor-diagnosed arthritis.
- Prevalence of those who meet recommendations of physical activity is lower among individuals with doctor-diagnosed arthritis.

Quality of Life Among Individuals with Doctor-Diagnosed Arthritis-2003

Disability Status



Activity Limitations



- Prevalence of disability as well as activity limitations are higher among adults with arthritis when compared to adults without arthritis.
- 19% of Kansans aged 18-64 years with doctor-diagnosed arthritis or joint symptoms have reported that arthritis or joint symptoms now affect their work.
- 15% of individuals with doctor-diagnosed arthritis have responded that poor physical or mental health keeps them from doing their usual activities for more than 14 days during past 30 days (85% responded 1-6 days).
- 9% of individuals with doctor-diagnosed arthritis have responded that they have ever taken an educational course or class to teach them how to manage problems related to arthritis or joint symptoms.

Source: 2003 Kansas Behavioral Risk Factor Surveillance System, Office of Health Promotion, Kansas Department of Health and Environment.

How Are We Addressing Arthritis in Kansas Now?

Arthritis Self Help Course – Self management program reduces pain by 20% and physician visits by 40%

PACE (People with Arthritis Can Exercise) and Aquatic Exercise Programs

- Relieves stiffness
- Restores or maintains joint range of motion
- Increases flexibility of the structures surrounding the joint
- Restores or maintains muscle strength
- Improves posture
- Increases endurance

"Physical Activity: The Arthritis Pain Reliever" – CDC Health Communications Campaign – Promotes physical activity among people with arthritis aged 45-64 of low socioeconomic status, a campaign for Hispanic audience is currently being developed

What Are Kansas' Assets for Improving Arthritis?

- Partnership with the Arthritis Foundation Chapters: 50 + years of history providing programming for individuals with arthritis
- ACT (Arthritis Community Taskforce) authors of the "Arthritis in Kansas" state plan
- Established state-wide data surveillance system

What Are Barriers or Liabilities That Are Limiting Progress in Kansas?

- Limited number of Rheumatologists 22 in Kansas for an estimated 489,209 adults diagnosed with arthritis
- Limited resources to train the leaders to provide the science-based AF programs
- Limited awareness among the general population that arthritis can be managed through physical activity and weight control

Recommendations

- Increased focus on the importance of an early diagnosis of arthritis
- Increased awareness that physical activity and weight control can decrease the amount of disability
- Increasing the number of facilities and leaders that provide ASHC, PACE and Aquatic classes while decreasing leader turn over

Cindy Winters, CHIPr/Arthritis Program Manager KDHE – Office of Health Promotions 1000 SW Jackson, Suite 230 Topeka, KS 66612

Phone: 296-8150

Fax: 296-8059

E-mail: cwinters@kdhe.state.ks.us