

Illinois Department of Public Health Arthritis BRFSS Data Fact Sheet (2000-2003)

for the

Central Illinois Arthritis Foundation Branch Service Area

(serving Coles, Edgar, Clark, Cumberland, Fayette, Crawford, Clay, Effingham, Jasper, Richland, Lawrence and parts of Marion, Shelby, Edwards and Wabash counties)

What is Arthritis?

Arthritis includes more than 100 rheumatic diseases and conditions affecting joints, the surrounding tissues and other connective tissues. The three most common types of arthritis are osteoarthritis, fibromyalgia and rheumatoid arthritis.

Early diagnosis and appropriate treatment are important in managing arthritis. Physicians now believe that damage to bones begins within the first two years a person has the disease. Early diagnosis can decrease symptoms and long-term complications. A person with possible arthritis* should see a health care professional if symptoms of pain or swelling in multiple joints on both sides of the body develop.

* The Illinois Arthritis Initiative defines a **case of arthritis** as arthritis diagnosed by a doctor and **possible arthritis** as having symptoms of pain, aching, stiffness or swelling in or around a joint that were present within the past 30 days and have been present for three or more months but without doctor diagnosis.

Each year, arthritis results in 44 million physician visits, 750,000 hospitalizations and 36 million ambulatory care visits in the United States. According to U.S. Centers for Disease Control and Prevention (CDC) cost data, the estimated costs for arthritis (medical care and lost productivity) total \$86 billion. In Illinois, the total cost was estimated at \$3.8 billion. Illinois ranks seventh in the nation for percent of cases of arthritis at 4.35 percent.

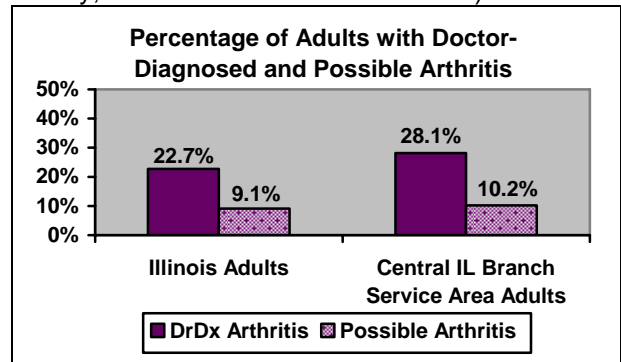
Illinois is the fifth most populous state in the country, but it's population is not spread equally around the state. A large percentage of the population resides in and around Chicago and other metropolitan areas, while 84 of Illinois 102 counties are designated rural. Demographics demonstrate statewide racial and ethnic diversity as well.

Because the sample size in individual counties is small, the Illinois Arthritis Initiative chose to report prevalence by Arthritis Foundation branch office service area.

The purpose of this fact sheet is to increase awareness about the burden of arthritis. Therefore, looking at the state on a regional basis will assist in defining areas of need and help local agencies increase awareness about arthritis issues in their communities.

Arthritis Prevalence

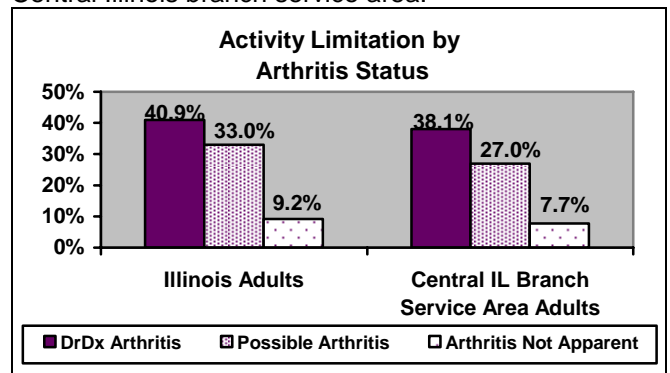
In 2002, 22.7 percent of Illinois adults (about 2.1 million people) suffered from **doctor-diagnosed arthritis**, and another 9.1 percent (about 850,000 people) had **possible arthritis** but had not yet been diagnosed. The chart below compares the prevalence of doctor-diagnosed and possible arthritis among Illinois adults and Central Illinois Arthritis Foundation branch service area (serving Coles, Edgar, Clark, Cumberland, Fayette, Crawford, Clay, Effingham, Jasper, Richland, Lawrence and parts of Marion, Shelby, Edwards and Wabash counties) adults.



Source: Illinois Behavioral Risk Factor Surveillance System (2002) and Illinois County Behavioral Risk Factor Surveillance System (2001-2003)

Arthritis and Activity Limitation

Arthritis is the leading cause of disability in the United States. Accordingly, activity limitation is increased among persons with doctor-diagnosed arthritis compared to those reporting no apparent arthritis. An objective of Healthy People 2010 is to reduce the proportion of adults with doctor-diagnosed arthritis who experience activity limitation due to arthritis or joint symptoms to **30 percent**. The chart below shows the percentage of adults with doctor-diagnosed arthritis, possible arthritis and no apparent arthritis reporting activity limitation in Illinois compared to those in the Central Illinois branch service area.



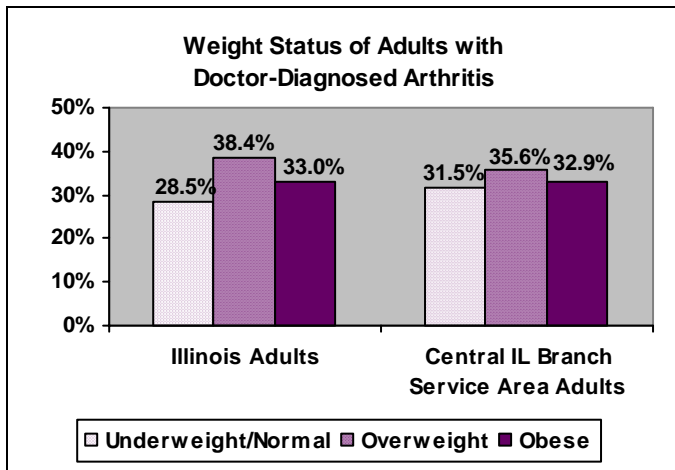
Source: Illinois Behavioral Risk Factor Surveillance System (2002) and Illinois County Behavioral Risk Factor Surveillance System (2001-2003)

Arthritis and Weight Status

There is an association between obesity and certain types of arthritis including osteoarthritis and gout. Excess body weight increases the pressure and stress on weight-bearing joints.

Body mass index (BMI) is an indicator of weight status calculated using both body weight and height. Overweight is defined as having a body mass index between 25 and 29.9. Obese is defined as having a body mass index of 30 or greater.

Among Illinois adults with doctor diagnosed arthritis, 38.4 percent are overweight and an additional 33 percent are obese. The chart below compares the weight status of Illinois adults with doctor-diagnosed arthritis with adults in the Central Illinois branch service area with doctor-diagnosed arthritis.



Source: Illinois Behavioral Risk Factor Surveillance System (2002) and Illinois County Behavioral Risk Factor Surveillance System (2001-2003)

Arthritis and Physical Activity Levels

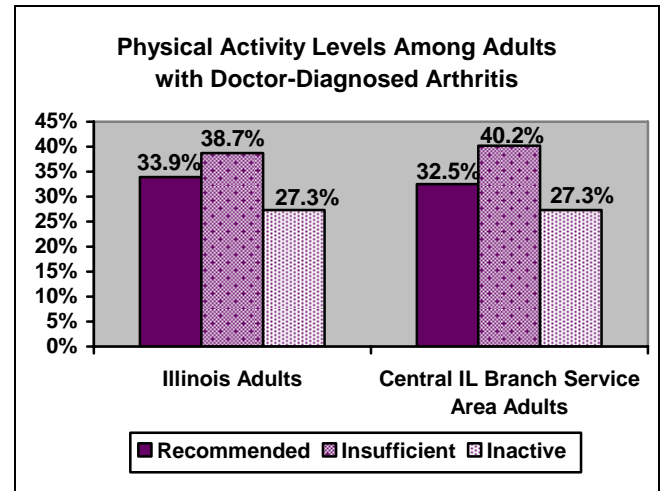
Exercise is important for maintaining healthy and strong muscles, for preserving joint mobility and for maintaining flexibility. Exercise also can help people to sleep better, to maintain a positive attitude and a healthy weight. It also can reduce pain.

There is an association between physical activity level and arthritis. Those with arthritis report less leisure time activity than those with no apparent arthritis.

Levels of physical activity are defined as:

- **Recommended:** Participating in moderate physical activity at least five times per week for at least 30 minutes or vigorous physical activity at least three times per week for at least 20 minutes.
- **Insufficient:** Some activity but not enough to meet recommendations.
- **Inactive:** Not participating in any physical activity or exercise other than their regular job in the past 30 days.

Only 33.9 percent of Illinois adults with doctor-diagnosed arthritis meet the Healthy People 2010 recommended level of activity. The chart below compares the physical activity level of adults with doctor-diagnosed arthritis in Illinois with adults in the Central Illinois branch service area.



Source: Illinois Behavioral Risk Factor Surveillance System (2002) and Illinois County Behavioral Risk Factor Surveillance System (2001-2003)

What Can Be Done?

Arthritis is an important public health problem in Illinois. The Illinois Department of Public Health's Illinois Arthritis Initiative is committed to decreasing the burden of arthritis in Illinois.

The initiative focuses on increasing awareness about the signs and symptoms of arthritis and the importance of early diagnosis so that persons with **possible arthritis** can get appropriate diagnosis and management. In addition, the initiative focuses on increasing availability and delivery of evidence-based self-management opportunities for Illinois residents with **doctor-diagnosed arthritis** to increase quality of life.

More proven public health interventions that are easily accessible and affordable need to be made available at the community level. Fewer than 1 percent of persons with arthritis who could benefit from such interventions receive them. These interventions need to be designed to improve function, decrease pain, and delay disability among persons with arthritis, particularly those at highest risk for functional impairment and disability.

For more information about the Illinois Arthritis Initiative, contact the Illinois Department of Public Health Arthritis Program at 217-782-3300.