

Joint Replacement?

Glucosamine and Chondroitin Study Results

If behavior modification and medical therapy fail to improve arthritic symptoms, joint replacement should be considered.

Every year, thousands of arthritis sufferers experience dramatic improvement in their quality of life as a result of joint replacement surgery. The goal of joint replacement surgery is the relief of pain and the restoration of joint function. Surgical techniques include removing portions of a joint, reshaping or replacing parts with metal or plastic components.

It is important to realize that joint replacement surgery is a major medical procedure and can involve a lengthy and challenging recovery process. As is the case with any surgical procedure, there are risks, and joint replacement should only be considered when all non-surgical options have been explored.

Options include lifestyle modifications such as physical therapy, exercise and weight loss, drug therapy with pain relievers and COX-2 inhibitors (nonsteroidal antiinflammatory drugs) that interrupt the cycle of inflammation, and medication injected directly into the affected joints. If behavior modification and medical therapy fail to improve arthritic symptoms, joint replacement should be considered.

The decision to have joint replacement surgery should be based on careful consideration of the pros and cons and the likelihood of achieving personal goals. These may include seeking relief from chronic pain or simply the ability to resume daily activities, sports or hobbies. Some questions to put to an orthopedic surgeon might include:

- What makes someone a good candidate for surgery?
 - What are the risks involved?
 - How long is the recovery process?
 - What is involved in the recovery process?
- Are there any non-surgical treatments that haven't been tried?
- Might the artificial joint have to be replaced in the future?

For more information, visit www.emc.org and click on Orthopedics under Centers of Excellence and then on Eisenhower Joint Replacement Center, or call the Eisenhower Joint Replacement Center directly at 760-773-4545.

Part II of Joint Replacement for Arthritis, to be published in the next issue of Healthy Living magazine, will discuss joint replacement procedures and some of the technological advances that have occurred over the past three decades. Glucosamine and Chondroitin Study Results Combination glucosamine and chondroitin is effective in treating moderate to severe knee pain due to osteoarthritis. GAIT Study Abstract

For a free guide to supplements and vitamins, contact the Arthritis Foundation at 800-568-4045 or on the Web at <http://www.arthritis.org>.

<http://www.arthritis.org>

The long-awaited results of the National Institutes of Health study on the ability of glucosamine and chondroitin sulfate supplements to relieve the pain of osteoarthritis (OA) of the knee were presented at the American College of Rheumatology's annual meeting in November. Results suggest that the combination of glucosamine and chondroitin is better than a placebo in relieving pain caused by osteoarthritis of the knee. However, the benefits appear to depend on pain severity.

In people with moderate-to-severe pain, 79.2 percent taking the glucosamine and chondroitin combination experienced pain relief compared with 69.4 percent taking celecoxib (Celebrex®), 65.7 percent taking glucosamine alone, 61.4 percent taking chondroitin alone and 54.3 percent taking a placebo.

In subjects with mild knee OA pain, the glucosamine and chondroitin combination did not show effectiveness over a placebo — 62.9 percent responded to the combination; 61.7 percent responded to a placebo.

Based on the findings from this study, the Arthritis Foundation recommends that OA patients speak with their physicians about how the supplements might fit within a comprehensive treatment plan that may include prescription medications, exercise, weight control, and in some cases, joint replacement surgery.