



Freedom from Arthritis

Mental Health & Arthritis



DISCLAIMER

This presentation contains general information and advice. Every effort has been made to ensure that the information is accurate and reliable. The content of this presentation is not a substitute for the individual treatment advice of your doctor or health professional. Always consult your doctor or healthcare provider to obtain individual medical or treatment advice.

1. What is Mental Health?
2. The relationship between stress, anxiety, depression and Arthritis
3. Coping strategies for emotional difficulties – mindfulness, deep breathing, mindfulness based cognitive behavioural therapy (MGBT)
4. Mental Health services & support

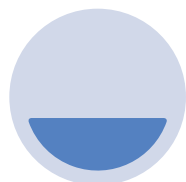
WHAT IS MENTAL HEALTH?

- Defined as **“A state of well-being in which the individual realises their own abilities and ability to cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to the community” (WHO, 2001)**
- But when we have osteoarthritis (OA), rheumatoid arthritis (RA), lupus, fibromyalgia – ANY chronic condition – it can make these things a little difficult

LETS TALK ABOUT IT!



DEFINING ANXIETY, STRESS, DEPRESSION



Stress

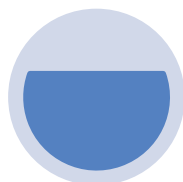
worry

nervousness

tension

Increased heart rate,

sweating, blood pressure



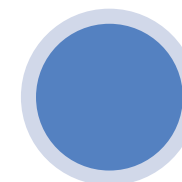
Anxiety

feelings of tension

worry

irritability

increased blood pressure



Depression

Sadness

lack of interest in activities

weight loss/gain,

Sleeplessness

excessive sleeping

lack of energy

inability to concentrate

feelings of worthlessness or
excessive guilt

Suicide/death ideation



HOW DOES IT RELATE TO ARTHRITIS?

Arthritis can have negative effects on our mental health

Our mental health can have negative effects on our Arthritis & symptoms

Rates of depression and anxiety in people with arthritis-related diseases can be between **2 and 10 times greater** than the rates in the general population.

Studies show that anxiety and depression **can lower your pain threshold** but then the chronic pain aggravates your anxiety and depression.

ANXIETY & DEPRESSION

Among Adults with Arthritis

2 OF 10
ADULTS
with arthritis
have anxiety symptoms.



Depression symptoms occur **TWICE AS OFTEN** in adults with arthritis.



Talk to your **healthcare provider** about your mental health.



Ask your provider how **physical activity** or **self-management education workshops** can improve your mental health.

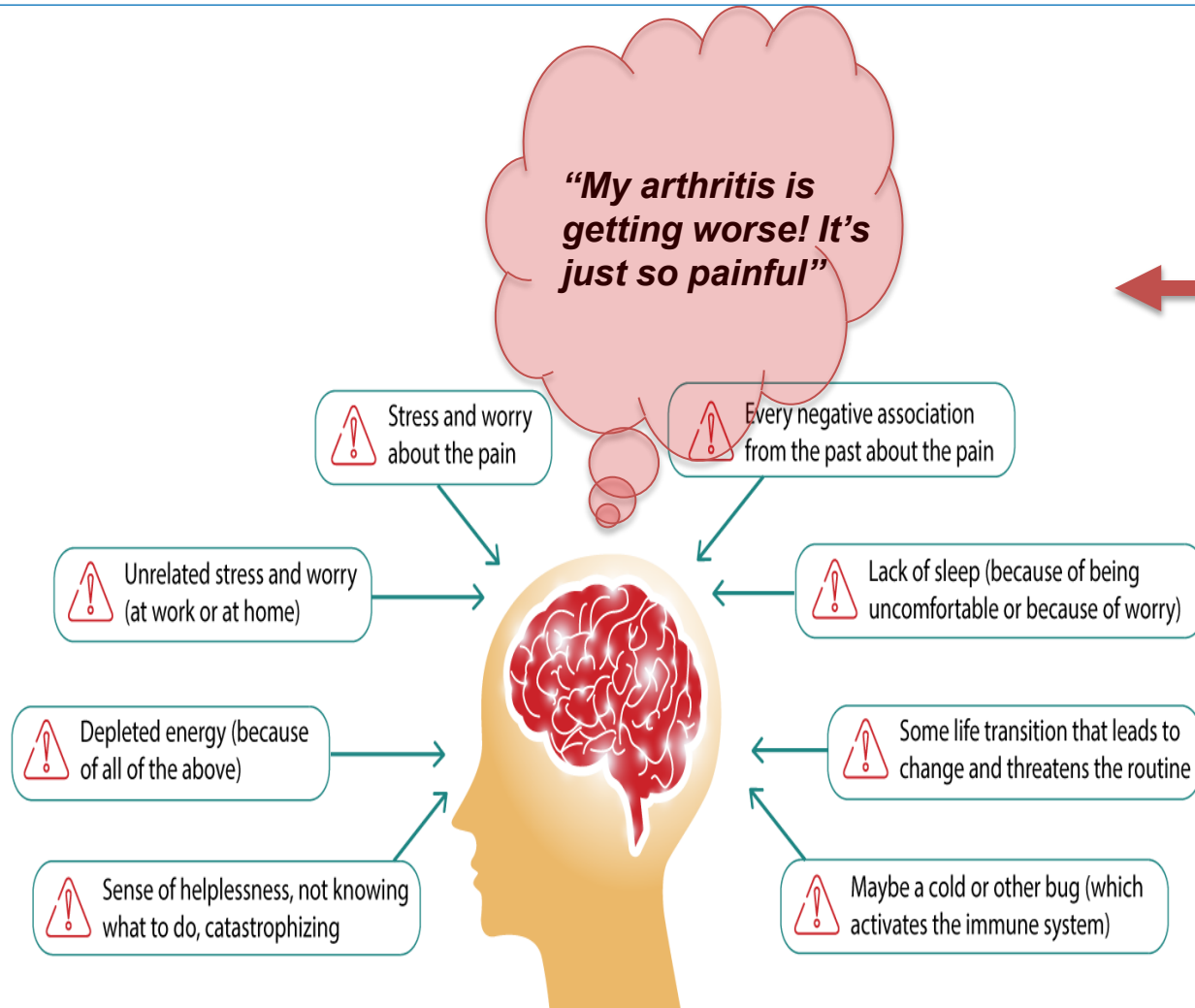


HOW DOES IT RELATE TO ARTHRITIS?

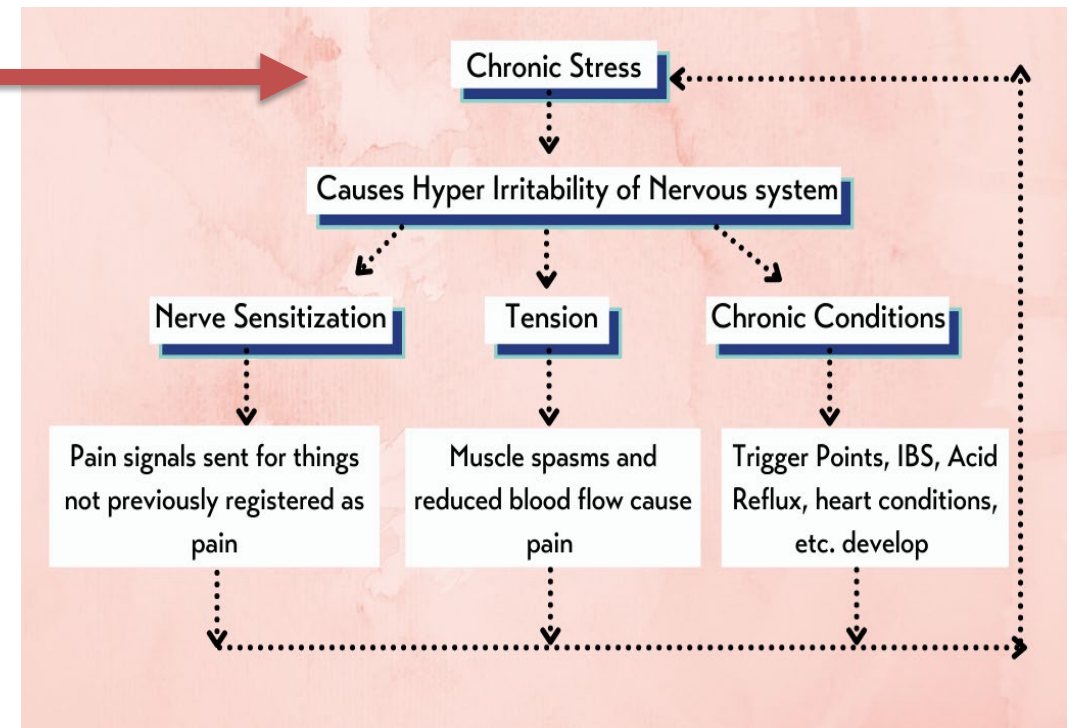
Many studies have shown clearly that people with arthritis with the highest pain levels are the most likely to be anxious or depressed.

Studies have found people with arthritis and depression





There is a complex connection between Stress, Anxiety, Depression and Pain



“An anxious mind cannot exist in a relaxed body...”
Edmund Jacobson

PAIN & THE BRAIN

- Pain is the brain's assessment of safety
- It is a complex experience finely tuned by the brain
- It can become over-protective when receiving a pain signal which can become a bigger problem than perceived
- Not always a reliable signal for what's going on
- **We need to stop thinking of it as an automatic, proportionate warning about a tissue damage.**

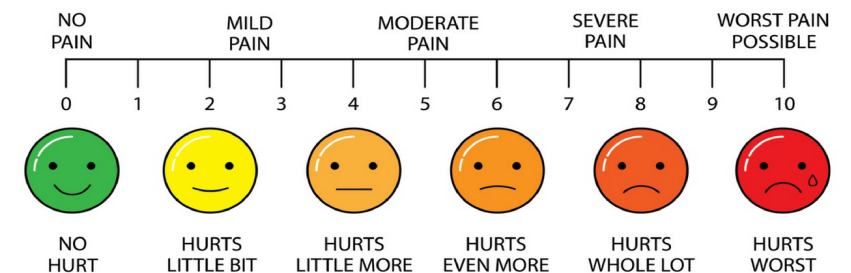


“it’s all coming from the _____, I know it!”



“Am I catastrophizing?”

PAIN MEASUREMENT SCALE



PAIN & THE STRESS CYCLE

- Pain is a warning system, but **central sensitization** is a hyper-active warning system.
- In rheumatoid arthritis (RA), patients often suffer more pain than expected from just the inflammatory erosion of their joints
- There is overwhelming evidence that the tissue pathology in osteoarthritis (OA) is not always the cause of chronic pain
- Some days you might feel more pain than makes sense, this could mean the nervous system itself is playing up



It could be the brain going haywire!

WHAT DOES THE RESEARCH SAY?

- In 2019, one study looked at the self-report data of 1471 people diagnosed with knee OA to predict the pain outcomes in people who reportedly experience high levels of pain intensity and severity.
- The self-report measured levels of pain intensity coinciding with levels of **anxiety, depression, catastrophizing, neuropathic-like pain, fatigue, sleep disturbance, pain distribution, and cognitive impact (central mechanism traits)**.
- Results showed the knee pain was more persistent and more severe in those who reported on more central mechanisms.
- This research suggested that identification of underlying pain mechanisms is important for optimal management of chronic knee pain, and predicting responses to existing therapies.



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IS IT PAIN OR SENSITIVITY - QUESTIONNAIRE

If you are not sure if it is “sensitisation” or actual pain? The more of these items you tick off, the more likely you are to be “sensitized”.

- You have no obvious cause for your pain, no recent injury, no known source for the pain - You are medically unexplained.
- Your pain is chronic.
- Your pain is out of proportion to any known, recent injury.
- You don’t know what’s going to make you feel better or worse.
- You are pessimistic, and have a lot of worries about it being a sign of something worse (e.g. catastrophizing).
- You have too much pain and tenderness elsewhere
- A history of troubles in the areas that are strongly associated with sensitization i.e. neck and shoulders, low back, abdomen, jaw.
- High overall stress load: exhaustion, poor sleep, chronic stress, anxiety, depression, and/or anything else that drains or menaces you (like another significant medical problem).
- You’re female. Unfortunately, this really is a risk factor!
- Overuse of stimulants like nicotine, caffeine, or more potent ones. Or withdrawal from sedatives like benzos (Valium), which can jangle your nerves for a surprisingly long time (months).

MEDICATIONS FOR MENTAL HEALTH & PAIN

Some medications that are used for treating anxiety and depression are also used for pain relief ...

Selective serotonin reuptake inhibitors (SSRI's)
Serotonin & Norepinephrine Reuptake Inhibitors (SNRI's)
(Anti-depressant)

- First line treatment
- Inhibit neuropathic pain
- Reduces production of brain chemicals that influence perception of pain

Tricyclic Anti-depressants (TCA's)
(Anti-depressant)

- Second line treatment
- Analgesic effects
- Helps with the way the body responds to pain

Anti-convulsants
(Anti-epileptic)

- Relieve pain by blocking damaged nerves
- Block pathways in the brain to provide pain relief



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COPING STRATEGIES FOR EMOTIONAL DIFFICULTIES

Coping strategies for mental health challenges can vary widely....



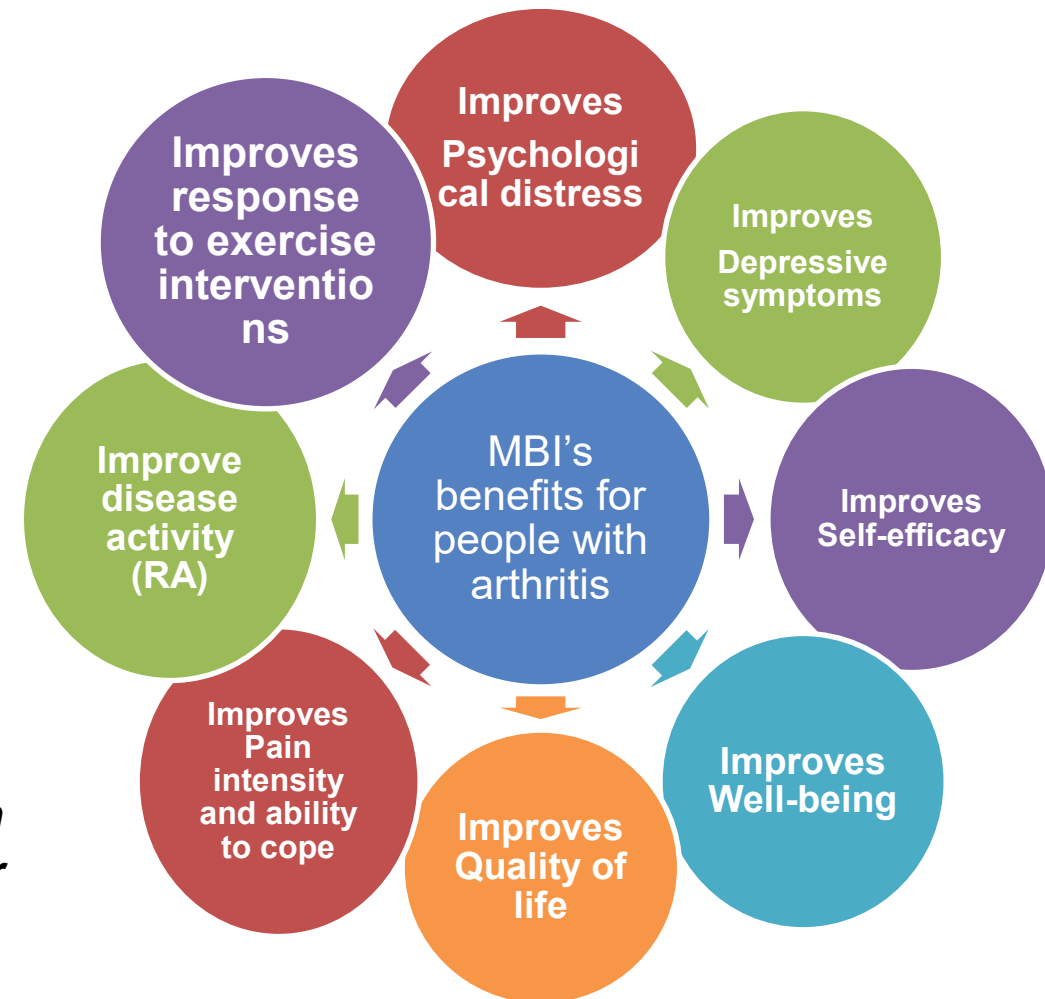
THE POWER OF MINDFULNESS

By now, we hope it would make sense as to why mindfulness strategies should have their place in your treatment options!

Mindfulness can improve mental health by:

- ❖ Reducing stress, anxiety and depression
- ❖ Improving quality of life
- ❖ Improving emotional regulation
- ❖ Improving memory and cognition
- ❖ Improving physical health

“If we can imagine pain, can we imagine pain relief?” Margee Kerr



MINDFULNESS BASED INTERVENTIONS

- **Daily Mindfulness:** Mindfulness is a **state of being and can used or practiced all day, everyday, anywhere, at any time!**
- **Breathing exercises** - sitting relaxed for 2min, focus on your breath.
 - Inhale for 4sec, **PAUSE,**
 - Exhale for 6sec. Focus on filling your lungs
- **Guided Imagery** - visualize a scene that touches on all your senses – from what you **see, hear, taste, touch and smell** to even what you're thinking and feeling



MINDFULNESS STRESS REDUCTION

“Ok, let’s think about this”

“I am safe”

I accept what’s going on”

“Just focus on the task”

“Ok, just breath”

“Focus on breathing evenly”



“OK, I’m having a stress response.”

“I feel my heart rate increasing, I feel hot, sweaty....”

“Wait. What’s my attention caught up in?”

“What’s triggering this?”

Mindfulness Based Stress Reduction (MBSR) with Cognitive Therapy (MBCT)

Generic case example:

- You feel a painful sensation or stiffness in your (insert joint), or you know a flare up is developing
- Your breathing rate increases, heart rate increases – you feel your heart thumping, you feel hot in the face, you might tremble.
- You start to think things like:
 - My knee hurts – not again!
 - how bad this time? How long will it last?
 - I’ve done more joint damage
 - I can’t go out – my day is ruined
 - what if I can’t sleep again
 - will this ever change?
 - Will I ever be without pain – pain rules my life

WHAT TO PRACTICE INSTEAD

1. I notice my breathing has increased, &
2. I'm catastrophising

~~"OK, I'm having a stress response."~~

~~"What's my attention caught up in?"~~

3. Now, we can either redirect our attention to an activity OR

~~"Ok, let's breath evenly and focus on the present task"~~

4. Before we do that, we can take note of our thoughts, challenge and/or accept them

~~"Ok, let's think about this"~~

- My knee hurts; it's annoying --but it's expected
- It's makes me feel sad/frustrated-- it's understandable
- I won't fight it--- but accept how I feel
- Today may not be the best day--- but I know the pain will pass; I will get through this
- I **will** adjust my activities for today, engage in pain management strategies I know that help
- While I may still be in pain/uncomfortable, I will carry on with my daily activities as best I can, and focus on other things I enjoy

MENTAL HEALTH SERVICES & SUPPORT



Lifeline
131 141



Beyond Blue
(03) 9810 6100



Black Dog
Institute

Blackdog Institute
(02) 9382 4530



MIND
1300 286 463

Online therapies for anxiety (e-therapies or computer-aided psychological therapy)

- Online therapies can be just as effective as face-to-face services.
- You might talk to them on the phone, by email, text, or instant messaging.

Where to find online therapies

- Find a range of online programs at the Australian Government's [Head to Health](#) website



Australian Government
Department of Health and Aged Care

HEAD TO HEALTH Living well Finding help Giving support For health professionals About Search Bookmarks

**Not feeling like yourself lately?
You're not alone.**

It's something most people experience at some point. And there are simple things you can do that can help.

- Stress, anxiety, depression are common in those living with Arthritis
- There is a bidirectional relationship between anxiety, depression and chronic pain
 - Mental and emotional well-being can significantly impact overall quality of life and the management of their condition.
- Addressing mental health concerns, individuals with arthritis can lead more fulfilling and healthier lives while effectively managing their condition.