Living with rheumatoid arthritis

Melissa Johns

I was first diagnosed with rheumatoid arthritis in 1999 when I was 27 years of age. I was lucky in some ways – my diagnosis took place in the emergency department of my local hospital. I had presented there with intense pain, swelling and tenderness in my left hand; less so in my right hand. I saw a rheumatologist immediately, without the usual waiting period for an appointment with a specialist. The rheumatologist who diagnosed me that day has subsequently been my doctor for almost 12 years.

My only regret in being diagnosed with rheumatoid arthritis, apart from the obvious, is that I spent a few years in denial. I felt a little depressed, and refused to deal with the symptoms as they occurred. I had gone from being a very active, slender, fit woman, to feeling alienated from my body, and angry about a disease I had thought only affected older people. My rheumatologist prescribed immediate therapy: sulfasalazine, hydroxychloroquine and celecoxib. I did not always take my medications – I was careful about what I use to manage my disease, neither will current conventional medication. I’m supportive of the complementary treatments I use, as long as they are treatments that are known to have some benefit. My GP believes in practices that support good mental health in relation to chronic pain, as much as treating the physical symptoms. Her support has boosted my confidence, and by having a good healthcare team to manage my chronic disease, it feels like half the battle is already won.

In late 2009 I noticed that my pain levels had inched higher. I made an appointment with my rheumatologist’s surgery and she modified my treatment to include methotrexate and adalimumab. This is an injectable medicine, and the nurses at my rheumatologist’s surgery spent a lot of time walking me through the correct injection technique. I am still using this medication, in conjunction with methotrexate and celecoxib. These medications work very well for me and in late 2009 I noticed that my pain levels had reduced by at least half, with morning stiffness also receding. My blood test results – inflammatory markers – supported this.

In the early 2000s, I became interested in complementary treatment options, such as fish oil, yoga, osteopathy and acupuncture. Fish oil was emerging as a useful contender in the inflammation stakes. When I spoke to my rheumatologist about using fish oil she seemed unconvinced and warned me against ‘alternative’, untested therapies. I decided to try it anyway, as I knew that fish oil would help in other ways, if not for my joints. Over the years I have noted some reasonable studies about the use of fish oil for inflammation, and concurrently, noticed that my rheumatologist now approves of my taking fish oil.

I understand that using complementary therapies won’t cure rheumatoid arthritis, but then neither will current conventional medication. I’m careful about what I use to manage my disease, and I talk a lot with my general practitioner about management. In the past year my GP has supported my regular use of osteopathy by writing a patient care plan for me so that I can access osteopathy (or physiotherapy) through Medicare.

I have spent many years trying to find the right exercise ‘match’ for my joints. I’ve tried weights, yoga, cycling and walking, but find yoga, cycling and walking all work best when used on good days. Both my GP and osteopath have encouraged me to include swimming as part of my exercise program. So I have recently taken up swimming and have found it to be one of the most effective forms of pain relief for sore joints and surrounding muscles. Yoga (and meditation) help with some of the psychological aspects of chronic pain – and keep my joints more flexible than they would be otherwise.

These all might seem like ‘alternative’ treatment methods, yet without osteopathy, fish oil, yoga, meditation and exercise, I truly do not believe that my standard arthritis medications would work as well as they do. I view treatment as holistic: body, mind and soul – or wellbeing. Both my GP and my rheumatologist are supportive of the complementary treatments I use, as long as they are treatments that are known to have some benefit. My GP believes in practices that support good mental health in relation to chronic pain, as much as treating the physical symptoms. Her support has boosted my confidence, and by having a good healthcare team to manage my chronic disease, it feels like half the battle is already won.

Author
Melissa Johns is 38 years of age, the mother of a fit and healthy 8 year old, and married to a supportive partner. She has worked part time for many years in the indigenous policy arena, and hopes to move into other policy areas. She tries not to let rheumatoid arthritis take over her life, and is confident that a cure will be found in the next 20 years.

correspondence afp@racgp.org.au