

ARTHRITIS DIGEST

ISSUE 3 2021

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THE LATEST SCIENCE EXPLAINED

WIN
WHEELCHAIR
SEE PAGE 5

MEET

ANNE SWITHINBANK

TOP TIPS FOR GARDENING WITH ARTHRITIS

DRUG DEN

New supplement may
reduce inflammation

UNDER THE SPOTLIGHT

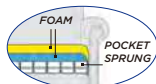
Myositis: what is it and
how is it treated?

LATEST RESEARCH

Delay arthritis with curcumin,
vitamin D & omega-3

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Positivity is a theme that runs throughout the new issue of *Arthritis Digest*. It is encouraging to see the number of new arthritis treatments researchers are working on. From nerve stimulation to reduce surgery pain (p23) to cognitive behavioural therapy for pain and insomnia (p19) and genicular artery embolization for knee function (p21), the future looks promising. We're making better use of technology with smartphones for knee arthritis (p21) and video content for osteoporosis (p27).

Dr Robin Munro outlines the huge strides that have been made in rheumatology over the last two decades (p17).

Anne Swithinbank, one of the UK's best-loved gardeners, offers simple and clever tips that make gardening with chronic pain conditions infinitely possible (p9). And don't miss the chance to win a fabulous wheelchair from eFOLDi (p5).

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CONGRATULATIONS!

In the last issue there was a chance to win *Chronic Pain Management* (by David Walton) & *English Wine* (by Oz Clarke). The – too many to list – lucky winners have been informed.

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CONTACT Editorial: iona@griffinpublishingsolutions.com **Advertising:** james@griffinmediasolutions.com

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@ArthritisDigest

Transformative turmeric

The main spice in curry has benefits that extend beyond the kitchen

Turmeric is a frequent visitor to the pages of leading journals and newspapers, thanks to its anti-inflammatory properties, and *Arthritis Digest* is no exception.

What makes turmeric special?

- Turmeric is a flowering plant within the ginger family... its roots are a staple of traditional Chinese and Indian medicine;
- Bioactive compound curcumin found in turmeric is what provides its powers;
- Curcumin has anti-inflammatory, anti-oxidant and neuroprotective properties;
- Research suggests that curcumin may block certain enzymes and cytokines that lead to inflammation;
- This sheds light on the possibility of curcumin as a complementary treatment for arthritis;
- Some studies suggest that curcumin might work as well as some anti-inflammatories.

Curcumin is well tolerated and can be used alongside recommended treatments from your GP or rheumatology team.

Rheumatoid arthritis

As rheumatoid arthritis causes the body's defence system to attack itself, curcumin's anti-inflammatory and antioxidant effects may help your journey toward remission.

A recent study (2019) found that 500mg of curcumin per day was as effective in treating rheumatoid arthritis symptoms as a nonsteroidal anti-inflammatory drug (NSAID) called diclofenac... and it had less side effects.

Osteoarthritis

A study with participants with knee osteoarthritis saw volunteers receive either 2g turmeric or 800mg ibuprofen per day for six weeks. Both groups' pain levels when walking and when climbing stairs improved, as did their knee function. But those who took turmeric found that their pain when climbing stairs improved more than those who received ibuprofen. There was no difference in reported side-effects between the groups.

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- Not water soluble & harder to absorb



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PRODUCT NEWS

A round-up of products to enhance life in the garden



EFFORTLESS MOWING

Robotic lawnmowers are fully automatic, so are a fantastic option for gardeners who have arthritis (and those who find mowing a chore). *Gardener's World Magazine* has reviewed what's out there and the Flymo 1200R robotic mower made it into the shortlist of eight recommendations.

■ Available for £600 from www.flymo.com or tel 0344 801 3653.

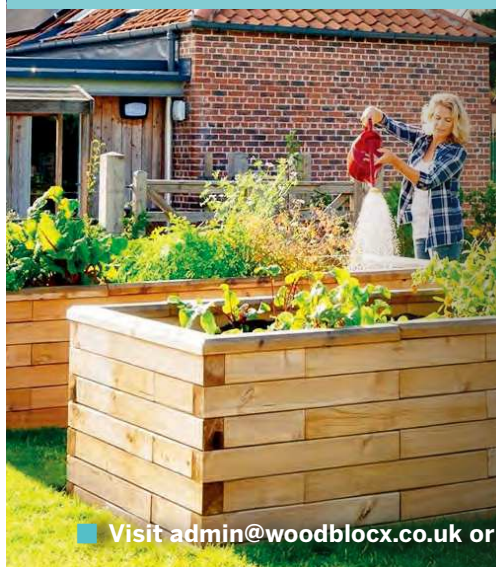
GIVE YOUR BACK A BREAK

Long-handled tools allow gardeners to work in an upright position, reducing back ache and muscle strain. The Fiskars Xact Weed Puller has three serrated claws to firmly grab weeds and roots, and an easy-eject mechanism on the handle to deposit the unwanted plant.

■ Available for around £40 from Homebase and B&Q.



RAISE YOUR STANDARDS



Raised beds reduce the need for gardeners to kneel, easing pressure on painful knee joints... as highlighted by our star interviewee, Anne Swithinbank on page 9. BlocX raised beds are guaranteed for 15 years against structural failure and are suitable for sitting on any surface, including slopes.

■ Visit admin@woodblocx.co.uk or tel 0800 389 1420.

TWO WHEELS ARE BETTER THAN ONE

A wheelbarrow with two wheels and a bar-type handle is more stable and easier to empty without bending or twisting. The weight of the contents of the wheelbarrow rests mainly on the axle instead of your arms. The bouncy pneumatic tyres of the 2 Wheel Wheelbarrow from Coopers of Stortford are designed to take on the trickiest of ground.



■ Available for £59.99, visit www.coopersofstortford.co.uk or tel 0844 482 4409.

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FOOD NEWS

Clare Thornton-Wood, specialist dietitian, discusses the latest findings about diet and arthritis, fibromyalgia and bones



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Curcumin with vitamin D and omega 3 may delay arthritis

The combination of curcumin, vitamin D and omega 3 fatty acids has been found to delay the development of arthritis in laboratory experiments, experts explain in *Arthritis Research & Therapy*.

Whilst the three components have been found to individually modulate inflammation and pain in arthritis, their effects when they are combined have not been studied, according to the experts.

The group has carried out some research using mice and found that curcumin alone decreased arthritis disease severity (gauged by joint thickness) by 60%. But when vitamin D and omega 3 were added, disease severity decreased by over 80%. Onset and progression of disease were impacted too.

"The combination of bioavailable curcumin, vitamin D3, and omega 3 fatty acids substantially delays the development and severity of collagen-induced arthritis", the experts explain. They recommend that people at risk of developing rheumatoid arthritis should consider taking curcumin, vitamin D3 and omega-3 fatty acids as supplements.

Expert comment

It is important to note that this study was carried out in mice with collagen-induced arthritis and the sample size was very small, just 10 mice in each group.

While it is a little early to draw firm conclusions from this study, increasing intake of vitamin D, omega 3 and curcumin may



benefit overall health in many ways.

One of the best food sources of omega 3 is fish, particularly oily fish. Recommendations are to eat at least two portions of fish per week, including one of oily fish such as salmon. There is 2,260mg of omega 3 in 100g of salmon (just under one small fillet).

*Curcumin is found in turmeric but in relatively small quantities. It is absorbed better if eaten in a meal containing oil; adding **black pepper** (which naturally*

contains piperine) helps with absorption too.

See below for good dietary sources of vitamin D. The Department of Health recommends that all adults take 10 micrograms of vitamin D per day during autumn and winter when the sun is not strong enough for the body to make the essential vitamin.

If you are considering taking supplements, please consult a suitable qualified professional and ensure you do not exceed safe intake levels.

Vitamin K2 has a positive impact on osteoporosis



Vitamin K is a family of fat-soluble vitamins that we need to produce a protein called prothrombin, that regulates bone metabolism and promotes blood clotting. It comes in two forms, K1 and K2, and both are important for human health.

New research (in *Nutrients*) has found that vitamin K2 has a positive impact on osteoporosis, cardiovascular disease, parathyroid disorders, cerebral palsy and even sperm motility.

If you are concerned you may not have enough vitamin K2 in your diet, speak to your GP or a registered dietitian.

Expert comment

This review article comments on promising evidence that vitamin K2 can play a positive role when it comes to many diseases and conditions.

*The other form of vitamin K is K1, which is found in plants including **leafy greens, peas and beans**. Good food sources for vitamin K2 on the other hand are fermented foods such as sauerkraut, **dairy** products, liver, beef, pork, **egg yolks and fatty fish**. As vitamin K is a fat-soluble vitamin, low-fat alternatives are not good sources.*

Most people obtain enough vitamin K2 through their diet, but vegans may need to consider supplements. Before taking a supplement consult with a qualified healthcare professional.

Autoimmune arthritis? Take – or eat – vitamin D scientists suggest

Vitamin D is often in the journals and newspapers as a treatment for all kinds of health issues, from cancer to diabetes... and arthritis. Whilst vitamin D is widely viewed as being beneficial, occasionally studies come out saying that there isn't definitive positive evidence for the sunshine vitamin. Why? Partly because it is phenomenally difficult for researchers to unpick if disease leads to low levels of vitamin D or if low levels of vitamin D leads to disease.

Now a UK-based team has reviewed the research, publishing their findings in *Frontiers in Immunology*. They suggest that the evidence for the benefits of vitamin D supplementation on outcome measures in arthritis and lupus across ages is indeed poor. But the very fact that it does have a potential role as something to take alongside mainstream treatments "remains promising based on available immunological data".

Expert comment

This review concentrates on the impact of vitamin D on rheumatoid arthritis, juvenile idiopathic arthritis and lupus, and notes that at least 50% of the global general population has insufficient vitamin D levels in their blood. The review outlines the difficulty in comparing the studies as they were carried out in over 20 countries and include many factors that might impact on vitamin D status such as exposure to sunlight, ethnicity, clothing style and diet.

The study was unable to conclude that vitamin D supplementation is necessarily linked to improvements in the diseases considered, but suggested further targeted research could yield more promising results.

However, we do know that adequate vitamin D levels are essential for bone health and implicated in lowering risk of other conditions, including heart disease and boosting immunity in general.

Vitamin D is made in the skin after exposure to sunlight or is directly absorbed from the diet. Foods containing vitamin D are oily fish (salmon and sardines), egg yolk, mushrooms and fortified breakfast cereals, yoghurts and plant milks. See left for recommendations regarding vitamin D supplementation.



Mushroom, tomato & goats' cheese frittata (four ways)



PHOTO: CLAIRE WINFIELD

Preparation time: 10 minutes

Cooking time: 10 minutes

Serves: One

INGREDIENTS

2tsp light olive or rapeseed oil

½ small onion, diced

50g (2oz) mushrooms, sliced

6 cherry tomatoes

2 eggs

½ tsp dried thyme

25g (1oz) soft goats' cheese, crumbled

Salt and freshly ground black pepper

A small handful of rocket

METHOD:

1 Preheat the grill to medium.

2 Heat the oil in a non-stick ovenproof frying pan over a medium-low heat and add the onion. Cook for about 3 minutes until softened, then add the mushrooms and tomatoes and cook for a further 2 minutes.

3 Beat the eggs with the seasoning and thyme in a bowl or jug.

4 Pour over the vegetables, gently tilting the pan to ensure the egg is evenly distributed. Cook for a further 2 minutes over a low-medium heat until the base and edges begin to set, but the centre is still liquid.

5 Dot the goats' cheese over the top.

6 Place the pan under the grill for 1–2

minutes until the top begins to puff up and is golden.

7 Slide onto a plate and scatter over rocket.

VARIATIONS

● **Spinach and feta:** Add a handful of baby spinach and 25g (1oz) crumbled vegetarian feta and omit the tomatoes and mushrooms.

● **Red pepper and courgette:** Add sliced red or yellow peppers and courgettes in place of the tomatoes and mushrooms.

● **Pea and Courgette:** Replace the mushrooms and tomatoes with one courgette (grated) and 125g (4oz) peas.

NUTRITION PER SERVING: ● 315 cals

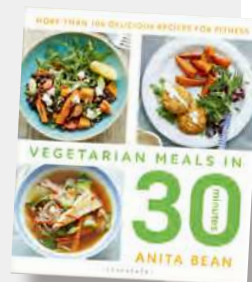
● 21g protein ● 22g fat (8g saturates)

● 7g carbs (6g total sugars) ● 3g fibre

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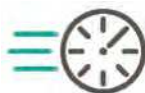
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MEET... *Anne Swithinbank*

One of Britain's best-loved gardeners talks to *Arthritis Digest* about hip surgery, plantar fasciitis and top tips for gardeners with arthritis

“Don't stop gardening, garden differently instead”



Horticulturalist, writer and broadcaster, Anne Swithinbank is a regular panellist for BBC Radio 4's *Gardener's Question Time* and enjoys a well-established writing, broadcasting and events career.

While life sounds rosy – gardening, riding and sea swimming fill her days – it hasn't all been picture perfect for Anne. A condition she was born with, congenital hip dysplasia, eventually led to a hip replacement operation many years later.

“It wasn't until I started walking as a toddler that my congenital hip dysplasia was picked up,” she says. “I spent a long time in plaster and the doctors eventually managed to get my hip socket to grow properly.”

Many years later, after Anne had children of her own, she began to experience progressively prohibitive pain in her hip.

“I've a very active person and it was difficult to have to stop doing the things that I love,” she remembers. “I even had to get a gardener, which seemed so ridiculous to me! I had no option but to become inactive and as a consequence I put on weight.”

Eventually, when Anne was in her early

fifties, she had hip replacement surgery and whilst the operation was not straightforward – and her recovery took a full year – it was a success.

Living with pain

Anne is frustrated that she has to live with a few other niggles, including plantar fasciitis, but does not let it hold her back.

“To counteract the heel pain of plantar fasciitis, I choose my footwear carefully, going for wide comfortable shoes with a low heel and a supportive sole. Before I start work in the garden, I exercise my calves. I have learned not to pitch in at full speed immediately, instead walking around the garden to warm up before getting stuck in.

“I don't garden too much in one go... depending on how I'm feeling I'll do 30–90 minutes at a time. And when I feel tired, I stop.

“My shoulders, arms and thighs are strong, so I tend to find heavy lifting tasks relatively easy. But if I do struggle to finish a job because it is so physically demanding, I have learned to ask for help.

“If you love gardening, don't stop due to pain or stiffness. Instead, look to change the way you garden – garden differently:


- Look at helpful products such as kneeling pads which ease pressure and pain on the knee joints;

- Raised beds reduce the need to bend or kneel (see page 5);

- Similarly, a greenhouse with staging allows you to garden at a standing position;

- Pump up those wheelbarrow tyres and remember to put the heaviest part of the load at the front of the barrow;

- If a task is too physically demanding, ask for help.

“Should you find the more physical aspects of gardening too difficult to maintain, try to outsource them as much as possible. Consider collecting particular plants that are easy to maintain. Make a list of plants you have never grown before and perhaps choose something unusual. Look up their histories, enjoy learning about them and send off for them. Plants are infinitely fascinating. In plants, I can lose myself for hours.” 

DRUG DEN

A summary of the latest drugs being tried, tested and brought to market

Supplement – GlyNAC – may improve multiple ageing defects

Ageing processes including inflammation, muscle strength, exercise capacity and walking speed may be taken on by a special combination of amino acids and other compounds, says a pilot study in *Clinical and Translational Medicine*.

The ingredients of the supplement (called GlyNAC) are needed for producing glutathione, a powerful antioxidant that supports the normal function of immune cells. As we age our glutathione levels start to decline, which can reduce our body's resilience to oxidative stress and impacts on overall cellular health.

Eight older adults were given GlyNAC supplements for 24 weeks. At the end of the 24 weeks, improvements were seen in inflammation,

insulin-resistance, gene-damage, cognition, strength, walking-speed and exercise capacity. Red blood cell deficiency was corrected along with oxidative stress and mitochondrial dysfunction.

Body fat and waist circumference were lowered too.

But they found that 12 weeks after the supplements were stopped these benefits declined.

"We are very excited by the results," explains Dr Rajagopal Sekhar, one of the experts. "After taking GlyNAC for 24 weeks, all these defects in older adults improved and some reversed to the levels found in young adults."

Supplementing GlyNAC in aging humans could be a simple and viable method to promote health."



NEW WAY TO HALT EXCESSIVE INFLAMMATION IS DISCOVERED

Scientists have found a new way to "put the brakes" on excessive inflammation by regulating a type of white blood cell that is critical for the immune system.

The discovery – published in *Nature Communications* – has the potential to protect the body from unchecked damage caused by inflammatory diseases such as arthritis.

When immune cells are exposed to potent infectious agents, powerful inflammatory proteins are produced to fight the invading infection. But if these cytokine levels get out of control, significant tissue damage can occur.

Scientists found that a protein called Arginase-2 works through the energy source of macrophage cells, to limit inflammation. They have shown that Arginase-2 is critical for decreasing a potent inflammatory cytokine.

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The vital role of arthritis drugs in COVID-19 treatment & ankylosing spondylitis

Arthritis drugs have hit the headlines as treatment for COVID-19. What does the evidence say so far?

Two stages of COVID-19 have been recognised: the initial viral stage and the immune response phase, when we see hyperinflammation associated with acute respiratory distress syndrome.

The latter stage has led to arthritis drugs being tried in people affected by moderate or severe COVID-19. A review of the available evidence in *The Lancet*, *Rheumatology*, suggests that:

- Dexamethasone reduces COVID-19 related mortality;
- Interleukin-6 inhibitors lower the risk of cardiovascular or respiratory organ support;
- Baricitinib reduces the time to recovery in hospitalised patients needing oxygen support;
- There may be a role for glucocorticoids in people with less severe COVID-19 but more studies are needed.

The next 12 months will "undoubtedly bring further clarity about the clinical utility and optimal dose and timing of other anti-rheumatic drugs in the management of COVID-19" the researchers outline.



GPs now prescribe arthritis brace for knee pain and stiffness

Improve mobility, reduce pain and enjoy better quality of life

It's been a long time coming, but at last, after extensive research, a state-of-the-art knee brace is available on prescription in the UK, reducing the need for knee surgery.

Thuasne ActionReliever receives top marks:

- ✓ Straps (which are adjustable) create a pressure system clinically proven to reduce pain, increase mobility and allow proper anchoring when people walk;
- ✓ A combined rigid adjustable hinge takes care of the affected side of the knee while the unaffected side of the knee is supported by a flexible stay;
- ✓ Anatomical knitting and compression areas at the back of the knee and the edges of the brace maximise all-day comfort;
- ✓ Slim and discreet under clothing.



"My love of golf is now rekindled thanks to your fantastic knee brace. Walking the course is no longer a problem."



"I now have a substantial reduction in my knee pain"

THUASNE

If you have osteoarthritis knee pain and want to avoid surgery (or you're waiting for it!) there are four easy steps to getting the ActionReliever on prescription:

- **Step 1** – Know what you need
- **Step 2** – Ask your GP to prescribe it
- **Step 3** – Answer objections
- **Step 4** – Send your prescription to your preferred supplier or pharmacy

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COVID-19

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Despite many coats of preservative, the structure of the wooden fence in our front garden rotted, and a recent storm sent it off down the road, thankfully missing the neighbour's car.



However, every cloud has a silver lining, and we couldn't be more pleased with our new ColourFence. It looks great, and we are looking forward to years of summers with no fence paint or algae treatments.

Mr & Mrs P. Glamorgan

[†]Hose down several times a year – terms & conditions apply.
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FREEPOST CLIMAR (AD5/21)



Myositis

Prof Hector Chinoy reports on a rare autoimmune disease that causes muscle weakness



“New treatment options are becoming available including biologic drugs”

Myositis is a rare autoimmune disease that involves an abnormal immune reaction against the body's own organs, most commonly muscle, skin and lungs, which leads to inflammation.

The main symptoms are muscle weakness, pain, fatigue, rashes and shortness of breath. This usually gets slowly worse over time.

Who gets it?

Mostly adults but children can be affected too. The two main types of myositis are: **Polymyositis** that affects many areas of muscle in the body but is not seen elsewhere in the body;

Dermatomyositis that affects muscle and skin.

However, there are even less common types of myositis such as **inclusion body myositis**, which causes progressive muscle weakness around the knees and hands. **Necrotizing myopathy** causes muscle cells to rapidly die

and in very rare cases is triggered by taking statins.

Diagnosis

There is no single test that can prove for certain you have myositis, but there are tests that can be helpful in making a diagnosis. A specialist will therefore arrange blood tests, electrical muscle tests, magnetic resonance imaging, muscle scans and muscle biopsies.

Specific antibodies produced by the patient's immune system help with diagnosis. Scans and biopsies can show the extent of muscle inflammation and if there has been any damage to the muscles. The progression of the disease may differ depending on the type of myositis a person has.

Treatment

Myositis is usually treated with steroids in tablet or injection form to begin with. The aim is to reduce inflammation and muscle

pain along with the feeling of being unwell. But some people experience disease that is particularly aggressive or resistant to treatment and organ damage can occur. Side effects from steroids are common and may be serious.

New treatment options are becoming available, however, including biologic drugs that are more effective than steroids and have less severe side effects. Unfortunately, not all patients are eligible for biologics and some do not respond to them.

We need better ways to help predict who will best respond to available treatments. The Manchester Myositis Research Group is doing research into understanding what causes myositis and how treatments reduce symptoms. New treatments are in the pipeline. Watch this space!

■ For more information Myositis UK, visit www.myositis.org.uk or tel 023 8044 9708. ►

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Fiona unearths a welcome surprise with **TURMERIC+**

Gardening gives pleasure to millions of people and it's a great way to stay active, as well as helping achieve a sense of wellbeing. However, the physical exertion needed for activities like digging and planting can cause some of us to experience skeletal and muscular discomfort.

Fiona Hudson, 58, from Hertfordshire is a keen gardener and company director of a small family boat yard business. She swears by a product called Turmeric+ which she discovered a few years ago, when she feared she would no longer be able to continue to garden as she used to.

"I spend a lot of time in the garden, it's very important to me, particularly over the past year. I'd be devastated if I had to stop and could no longer lift, bend and dig as I used to. I'm very hands on and I love to give cut flowers to friends and family.

"I stumbled across turmeric quite by chance. I had organised a 'Curry Night' for

a large group of people and ate much more curry with turmeric than I ever usually do, plus loads of leftovers. I realised during this time that it was easier than usual to work in the garden."

The key active component of turmeric is curcumin. Around the world millions of people introduce curcumin into their diet by using turmeric in their cooking. The average daily dose of curcumin in the Indian diet is over 160mg (for an adult), usually consumed in an oily matrix, such as ghee or coconut milk, which helps with absorption of the curcumin.

The need for easy absorption is what led the scientists at FutureYou Cambridge



"I started taking **Turmeric+** and I haven't looked back"

to create Turmeric+ using the patented 'Curcuma Phospholipid Complex' formulation. It's thirty times more absorbable than standard turmeric and contains vitamin C, which contributes to normal collagen formation for the normal function of cartilage.

Fiona continues: "I started to research turmeric supplements on the internet. There seemed to be an overwhelming number of products but Turmeric+ from FutureYou Cambridge stood

out as they're scientifically researched and proven to be effective. There was no way I could eat the amount of turmeric through curries on a regular basis so this seemed like a practical solution. I started taking Turmeric+ and I haven't looked back."

"I'm now not only able to garden for hours in comfort, I've also returned to a fairly regular and intensive exercise class which I had been avoiding for years. I'm over the moon."

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FutureYou Cambridge, the nutraceutical company known for its science-backed health supplements, is offering new customers the chance to try its flagship product, Turmeric+, for just the cost of the £1.50 postage.*

Turmeric+ was developed in Cambridge with the backing of a scientific advisory board including luminaries such as Dr Nicholas Shenker, a leading rheumatologist and chronic pain expert at Cambridge University Hospitals NHS Foundation Trust

(Addenbrooke's). The formulation is thirty times more absorbable than standard turmeric, and also contains vitamin C which contributes to normal collagen formation for the normal function of cartilage.

Since launching the product the company has continually received positive feedback from happy customers, particularly on Trustpilot, the independent online review platform.

'As far as I'm concerned this stuff is magic... Highly recommend!' wrote one 5 star reviewer. 'The product appears

to meet all its promises and the service levels from FutureYou are first class,' said another.

'We're very happy to give people their first pack for free so they can experience it for themselves,' says Adam Cleavelly, the company's CEO.

'It might sound bonkers but it really isn't. We're that confident in the effectiveness of our formulation.

'I can't think of a better way to convince people. If they like it, they will stick with it. Tens of thousands of customers already do.'

To claim your free 28 day Turmeric+ subscription trial pack worth £16.80, visit **FutureYouOffers.co.uk** or freephone **0800 808 5740** quoting code **AD43**

If it's not for you, simply cancel your subscription at any time, without obligation.



Discount valid until 30th June 2021. **Turmeric+ contains vitamin C which contributes to normal collagen formation for the normal function of cartilage and bones.** New UK customers only. One free trial per household. Your first box is free (Just pay £1.50 postage) and you will be enrolled into a flexible subscription (£16.80 every 28 days). We regret but we cannot take payment for this offer by cheque. You can stop deliveries at any time without obligation. See website for more information on our subscription service. Turmeric+ from FutureYou Cambridge should be consumed as part of a healthy and balanced diet and lifestyle. If you are taking any prescribed medication or have any medical conditions always consult your doctor or pharmacist before taking vitamins or supplements. Trial pack promotion cannot be used in conjunction with any other promotions.



JILL, 43 YEARS OLD, LEEDS

Diagnosis: dermatomyositis

Four years ago, I came back with more than a tan after a holiday in Mauritius. On the last day of the trip, I noticed something strange happening with my hands. Over the next six weeks I accumulated a range of odd symptoms, so I sought help from the GP and even made a trip to A&E. Soon after I was diagnosed with dermatomyositis.

My dermatomyositis caused skin rashes, weight loss, sensitivity to the sun, swallowing difficulties, painful cracks on my hands, swollen stiff fingers and painful bleeding nails. On top of this I suffered with weakness and painful muscle loss in my hands, arms, shoulders, hips and thighs. Morning stiffness, brain fog and severe fatigue also affected me. My lungs were impacted, causing severe breathing difficulty.

I went from being very healthy and running most days to struggling when walking up stairs. I found it difficult to do simple things, such as cook, brush my hair or clean my teeth. Although my life at the time was pretty miserable, I soon found there were treatment options. I had an amazing team of rheumatologists at Leeds who worked hard to find a drug that would work for me. Eventually I was offered a biologic drug, which was life-changing. Finally, I could consider full-time work again, walk for longer distances and up hills.

Back on my feet

After nearly two years of medication, daily exercises, hydrotherapy and lots of swimming, I decided I was well enough to try participating in parkrun. A rheumatologist had recommended a Facebook group called *Parkrun for people affected by arthritis and musculoskeletal conditions*. I was inspired as I saw there were lots of people with inflammatory autoimmune conditions similar to mine. I decided to try my first parkrun with friends, to mark my birthday, so prepared in the gym to build up my distances. I was so proud of myself when I managed it! Throughout the run I felt confident and safe, as they always have a tail walker to ensure you are not left behind.

Parkrun promotes community inclusion and I realised there were lots of walkers too, so I decided to go by myself. I was soon embraced by a friendly and supportive community. Sometimes there are other people with arthritis to walk with, some who are not fit enough to run all the way and some are impressive speed walkers or injured runners.

Lots of times I have nearly dropped out due to pain and weakness, but I always manage the 5km and have friends cheering me on. After a while I started volunteering as a tail walker so I can help others. Walking as part of the team gives me a sense of purpose, as I miss team activities such as sports and dancing.

My advice? Don't stop trying to do the things you love, whatever life throws at you.



MARY, 73 YEARS OLD, CHESHIRE

Diagnosis: immune-mediated necrotizing myopathy

I started to feel unwell in the autumn of 2019, with nausea, dizzy spells and weight loss, shortly before going on holiday for two months to Australia. My symptoms worsened while in Australia. I experienced aches and pains in my legs and my core muscles became weak. It was a shock to lose so much strength in my body as I had kept myself fit and well until this point with tennis, gardening, walking and pilates.

On return home in early January 2020, I immediately sought medical attention. My GP took blood tests, realised something was seriously wrong and referred me to a specialist, who in turn referred me to Prof Chinoy at Salford Royal Hospital. By this stage any physical activity was extremely difficult. I had lost more weight, felt extremely weak, unable to drive and had difficulty getting in and out of bed.

Prof Chinoy performed various tests including a muscle biopsy and electromyography (EMG) examination of my upper and lower limbs and paraspinal muscles. The EMG revealed that I was suffering from myositis.

The results of a further blood test showed that I had statin-induced necrotising myopathy. It was a shock to be told that the statin I was taking had caused my body to make an antibody that had attacked my muscles... and this was continuing even though I had stopped taking the statin.

Blood tests revealed that I had abnormally high levels of creatine kinase, a product of muscle breakdown.


Prof Chinoy prescribed prednisolone steroid therapy, alongside (a few weeks later) methotrexate with the steroid being gradually reduced. I was referred to a physiotherapist for exercises to help rebuild my strength. After around five weeks I noticed definite improvement in my strength, reflected by reductions in my creatine kinase levels.

By June 2020 I felt distinctly better but still not capable of any arduous activity. However, I was able to start taking short walks with my husband and as the summer progressed my condition improved. Regular blood tests showed my creatine kinase levels were falling; I could take longer walks and do more gardening.

By November 2020 my creatine kinase levels had come down to normal and I felt very optimistic although I still suffered from sore muscles, especially in my legs. I continued to reduce the steroid dosage and finally came off the steroid in late January 2021, continuing with methotrexate only.

Work in progress

It is now March 2021 and my creatine kinase results have started to increase again, so I have gone back on a low dose of steroid pending further review with Prof Chinoy. It seems there may be a fine balance of the different medications needed to keep the myositis under control.

My experience of living with myositis has coincided with the coronavirus pandemic. Throughout the pandemic I was shielding so the myositis didn't have as great an effect on my life as it would have done otherwise. I am looking forward to being able to resume everyday activities. Although I still feel weaker than normal, I am much better than when I started treatment. I feel positive and hope I will eventually get to the stage when I don't need any medication at all. 

* **Hector Chinoy** is a Professor of Rheumatology and Neuromuscular Disease at The University of Manchester



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SERIES: HEALTHCARE PROFESSIONALS INVOLVED IN THE CARE OF PEOPLE WITH ARTHRITIS

MEET THE *rheumatologist*

Dr Robin Munro discusses the varied role of the consultant rheumatologist

When I first became a consultant rheumatologist over 20 years ago, my hospital had 12 beds dedicated to people hospitalised with inflammatory joint diseases, and they were always full. Thanks to huge advances in treatments and a move to diagnose and treat people as fast as possible, there is currently only one patient in my hospital due to inflammatory joint disease.

Of course there are still many challenges and improvements to be made. But more people than ever before are living healthy normal lives with inflammatory arthritis, even those with physically demanding jobs. It's progress I could only have dreamed of two decades ago, which is largely thanks to the development of game-changing treatments such as anti-TNF therapy funded by the charity Versus Arthritis, and the training and education they and others provide.

Most patients I see have an inflammatory arthritis such as psoriatic arthritis or rheumatoid arthritis. I see a smaller number of patients with connective tissue disease including systemic lupus erythematosus and Sjogren's syndrome. I also lead the local osteoporosis service.

Osteoarthritis tends to be managed in the community by GPs and physiotherapists. Consultant rheumatologists regularly meet with GPs and support them with patient education and developing treatment pathways. Today, GPs are much more aware of inflammatory joint disease and the importance of early treatment, which is a large part of the reason why long-term health outcomes are so much better.

The start of the journey

If a GP suspects that one of their patients may have a form of inflammatory arthritis, they are referred onto a rheumatology department and we aim to see them within three to six weeks.

At the first appointment I listen to the patient's symptoms and conduct a full examination. Tests have usually already been arranged by the GP (blood tests, ultrasound and/or X-ray) as we are keen that referrals with new inflammatory arthritis are not delayed by waiting for results.

Once the diagnosis of a new inflammatory arthritis is made, I will explain what the condition is and what the implications are. We discuss the different drug treatment options and work out a treatment plan together.

A supportive team

It's a lot of information for someone newly diagnosed to take in, which is why the specialist nurse is so important. The specialist nurse spends time answering questions and discusses lifestyle issues and difficulties the person is encountering and how we can help.

Occupational therapists help people newly diagnosed and those encountering new issues.



Occupational therapists are experts on work issues, managing fatigue, relaxation techniques and keeping active. They can help with any difficulties with daily activities and provide living aids.

Physiotherapists help improve the range of movement if someone's joints have been damaged and can tailor exercises to individual situations. They advise how to keep fit and active, something we are now appreciating as important in managing arthritis.

Ongoing support

The rheumatology team sees newly diagnosed patients every six to eight weeks (or more often if necessary) until their arthritis responds to treatment and settles down.

Patients with inflammatory joint disease are rarely discharged, so even when someone's arthritis is well-controlled, we discuss when they would like to be reviewed. This might be every one to two years but will be more often if needed.

A helpline is covered by specialist nurses five days a week so people with queries or problems continue to access support and specialist appointments and care.

Our multidisciplinary team meets once a week so rheumatologists, specialist nurses, occupational therapists and physiotherapists can discuss patients, protocol and anything else we need to. We hold regular team educational meetings that allow us to hear from guest speakers to keep us updated with information, research, etc.


The rest of the job

Like professionals in many industries, every year I spend at least 50 hours on Continuing Professional Development (CPD), which means

developing and enhancing my abilities as a rheumatologist.

I take part in relevant research and am fortunate that the department has strong links with local universities and actively contribute to the Scottish Collaborative Arthritis Research network. I enjoy teaching medical students about arthritis. Students regularly join us in the clinic, which gives them the opportunity to meet people with arthritis and hopefully equip them to recognise when patients may benefit from referral to a rheumatology clinic.

Pandemic

The last year has been difficult due to COVID-19. We have worked in a flexible and realistic way with hospitals often inaccessible to rheumatology out-patients due to wards full of COVID patients. Managing patients remotely is challenging but possible. Physical examination remains important in diagnosis and assessment of how active disease, so not all appointments can be done remotely. Let's hope that brighter times lie ahead. 

■ If you need to talk to someone about your arthritis symptoms or would like to find out about local support, contact Versus Arthritis. Visit www.versusarthritis.org or tel 0800 520 0520.

*** Dr Robin Munro** is a Consultant Rheumatologist at NHS Lanarkshire & an Honorary Clinical Associate Professor at the University of Glasgow



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But using them isn't always as easy as you'd want – and that's putting it mildly!

Do the manufacturers do it on purpose?

Sometimes it can seem like the manufacturers deliberately make them complicated – and how you do things is often hidden away. It might be easy once you know, but until you've been shown the easy way, it can drive you mad.

In fact only yesterday I was talking to someone whose Mum had got a new all-singing-all-dancing phone – but she couldn't work out how to answer a phone call on it! She's not daft – it's just that it's different from what she'd used before and the phone didn't come with a manual telling her what to do.

Whether you have similar problems or you're trying to do something slightly more advanced, the thing is, it can be easy to use them... once you know how. But until you've been shown, it can be like talking a different language.

That's why we've published these two books: *iPhones one Step at a Time* and *Android Smartphones One Step at a Time*.

Plain English... and that's not all

They explain how to use the phone, in plain simple language with pictures of the screen showing you exactly where to tap or slide your fingers. No jargon!

What's covered?

I can't list it all here. But amongst other things, you'll discover:

- The basics of controlling it – swiping, tapping, opening apps & so on.
- How to use it as a sat-nav... in the car or even on foot.
- Send emails from your phone.
- Make it easier to read the screen.



Suitable for iPhones, Android phones like Samsungs and so on and Doros. (Not sure what phone you have? Best send off for the free info pack)

- Video phone calls - a great way to keep up with family who live a long way away
- Most phones have a good camera so you can take photos: here's how to use it properly (and for videos).
- Share photos with friends around the world - quickly and easily.
- See updates, photos and video clips from friends and family – as soon as they "post" them.
- Instant messaging and how to use it.
- Browse the web at home or out & about.
- Choosing and downloading apps.
- And obviously, you can make phone calls and send and receive text messages. ("Voicemail" is covered, too)

All explained nice and simply. (Find out more in the free information pack – read on...)

What one reader had to say:

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Exercise and cognitive behavioural therapy reduce knee pain

Having cognitive behavioural therapy (CBT) while exercising regularly appears to lower knee osteoarthritis pain, says an evidence review in a leading journal.

Research already suggests that chronic pain from knee osteoarthritis can result in changes to the structure of the brain, altering people's pain levels, emotional status and perceptions of pain.

Cognitive behavioural therapy may reverse these adaptations to chronic pain and the research group speculated that exercise could enhance the therapy outcomes. So they reviewed the evidence and found six relevant studies.

"Combining exercise and cognitive behavioural therapy seems to be an effective method to reduce knee osteoarthritis pain," the group highlights, after analysing the studies. However, they suggest that more research could "reveal any differences when each intervention is applied separately".



Oxygen-ozone therapy for arthritis: friend or foe?

A new study in *Biomolecules* suggests that oxygen-ozone therapy could reduce pain and improve function in people with knee osteoarthritis and low back pain. Yet oxygen-ozone therapy is not available on the NHS and private clinics charge hefty fees for the emerging treatment.

What is it?

Ozone is an energized form of oxygen that contains three atoms of oxygen rather than the two we normally breathe. It is a powerful disinfectant and some research suggests it may help various health issues, including arthritis. It is administered via injection into the tissue, the muscle or intravenously.

Can it help people with arthritis?

In recent years, the interest in oxygen-ozone therapy has considerably increased in the musculoskeletal field and the authors of the current research say their findings "suggest that oxygen-ozone therapy seems to reduce pain and improve functioning in patients affected by low back pain and knee osteoarthritis."

Elsewhere, however, the verdict in the scientific literature remains largely out with suggestions that at best oxygen-ozone for use in arthritis is as effective as placebo. As its biochemical effects are far from understood, we recommend a "watch and wait" approach while better research is carried out.

DID YOU KNOW... ... THAT GOUT IS ONE OF THE MOST COMMON FORMS OF ARTHRITIS?

Gout is a type of arthritis that causes sudden, severe joint pain. New research in *Arthritis Research & Therapy* shows that weight gain from early adulthood to middle age is associated with an increased risk for gout, as is obesity throughout adulthood.

One of the authors, Dr Jian-Bo Zhou explains that "maintaining normal weight over the whole of adulthood is beneficial [as it] reduces the risk of gout among obese individuals."



COGNITIVE BEHAVIOURAL THERAPY IMPROVES ARTHRITIS PAIN & INSOMNIA

Cognitive behavioural therapy (CBT) via a telephone call may improve sleep, tiredness levels and pain in people with osteoarthritis and insomnia, experts report in *JAMA Internal Medicine*.

CBT is a talking therapy that can help people manage problems by changing the way they think and behave.

In this new study, a total of 327 older people who had chronic sleep and osteoarthritis symptoms had six telephone sessions (each lasted about 25 minutes) for eight weeks. They filled out sleep diaries every day.

Around half of the volunteers were in the CBT group, so received instruction about sleep restriction, sleep hygiene and techniques to help them notice and change their negative thinking patterns. The other half were in the education group, so received information about sleep and osteoarthritis.

Key findings

■ Two months after the study, fatigue scores were lower in both groups, but more in the CBT group;

■ One year after the study had finished, 56% of people in the CBT group had reduced insomnia and 26% of people in the education group had reduced insomnia;

■ Although pain improved after treatment, the difference was not sustained after 12 months.

The research was so positive in favour of CBT that Prof Susan McCurry, who is involved in the research, suggests "scalable delivery models of cognitive behavioral therapy for insomnia, an effective treatment, are needed for widespread implementation."

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Smartphone help for knee arthritis

If you are asked to have your knee arthritis symptoms treated digitally – via smartphone – give it a go, after a recent study shows it can reduce knee osteoarthritis and improve pain and function.

Experts split 146 people with knee osteoarthritis into groups. One group received exercise and arthritis information through a smartphone application. The other group continued with the management recommended by their GP.

People in the smartphone group enjoyed greater

changes in pain, stiffness and function than those in the self-management group, and there were no negative side effects.

“Delivering a well-developed exercise program via smartphone over six weeks, which involved daily activities to improve symptoms of knee arthritis, resulted in a very strong reduction in knee pain, but also increased ability to walk fast, to sit down and get up from a chair, and increased muscle strength,” study author Dr Ana Valdes explains to *Healio Orthopedics*.

DID YOU KNOW...

... THAT NAIL PSORIASIS MAY PREDICT PSORIATIC ARTHRITIS?

People with nail psoriasis may be more likely to develop psoriatic arthritis and should be closely monitored for predictive signs, experts report in the *Journal of Rheumatology*. “The nail is connected to underlying bone,” explains Dr Gurjit Kaeley. “This anatomical connection of the nail matrix to the musculoskeletal system means that nail psoriasis can be an early indicator of psoriatic arthritis.”

DO YOU HAVE HIP ARTHRITIS AND BACK PAIN?

If so, you may be at a higher risk of an accidental fall. According to new research, older adults with hip osteoarthritis and chronic low back pain may be more likely to take a tumble. During the one-year study of 210 people aged 65–80 years old who had lower back pain and hip arthritis, 89 of the group had a fall. People who had worse hip arthritis were more likely to fall, and more likely to fall more than once.

Top tips to reduce falls

■ Ask your GP to review your medication as some medicines may make you dizzy.

■ Hearing loss and poor vision increase the risk of falls, but everyone aged 60 and over can have a free eye test. Hearing tests (and aids) are also free – ask your GP for further information.

■ Don't be tempted to walk around the house in bare feet, socks or tights as you're more likely to slip. Wear supportive shoes that fit well and take care of your feet.

■ Poor muscle strength and balance are two of the most common risk factors for falls. Programmes designed to improve strength and balance are run via Age UK and GP surgeries.

■ Remove or tape down trip hazards such as wires, fraying mats and carpets, and look into non-slip options.

■ Improve lighting in dark areas and consider a nightlight if you tend to get up in the night.

■ Install grab rails in positions where you may benefit from a little extra support, such as the stairs, bathroom or by the front door.



New non-surgical treatment improves knee function

A non-surgical treatment for knee arthritis – genicular artery embolization (GAE) – appears to be safe and effective in providing immediate and long-term pain relief, says a new study from the US.

A small catheter (a thin hollow tube) is inserted into the artery of the patient's upper thigh. X-rays are used to guide the catheter to the arteries supplying the lining of the knee. Tiny particles are injected through the catheter into these arteries, reducing the blood supply. This decreases the inflammation associated with osteoarthritis, which alleviates the pain.

GAE generally takes one to two hours and people can return home afterwards.



New research

The study included 40 people with knee arthritis. Each volunteer had GAE and their side effects and pain scores were recorded.

The volunteers saw benefits as soon as three days after the procedure. Average pain scores decreased from eight out of 10 before GAE to three out of 10 within the first week. And 70% of volunteers reported more than 50% reduction in pain scores at the one-year follow up.

Minor temporary adverse events resolved without treatment within days.

“After treatment, patients who initially could walk only three or four blocks were walking three miles,” highlights Prof Siddharth, lead researcher. “Some were able to do away with walking aids, such as canes, while others reported being in a better mood now that they were living without pain.”

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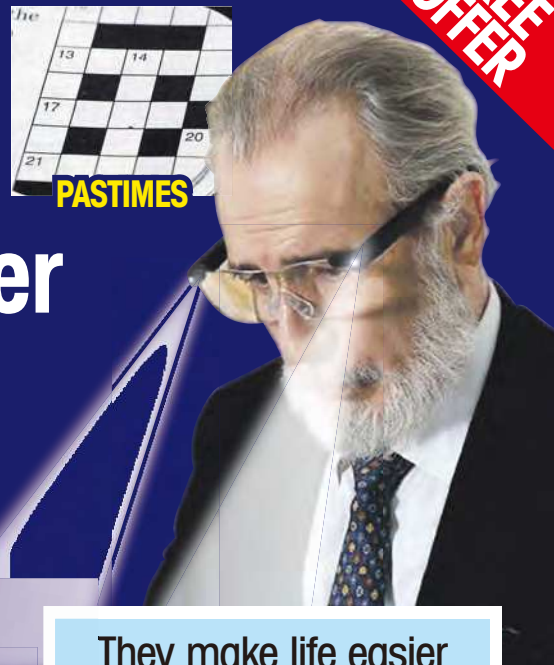


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Focus on mental health to reduce disease activity

Anxiety and depression reduce the likelihood of achieving sustained minimal disease activity in psoriatic arthritis, says a study in *Arthritis Care & Research*, highlighting the importance of looking after mental health in people affected by the inflammatory disease.

A total of 743 people took part in the nine-year study, during which time 337 (almost half) did not achieve sustained minimal disease activity.

Depression or anxiety was associated with a decreased likelihood of achieving sustained minimal disease activity.

“Comprehensive management of psoriatic arthritis should therefore include measures for addressing anxiety

and depression so that more patients achieve a state of minimal disease activity,” says Antonio Wong who is involved in the work.

Where to turn?

✱ **Mind** provides advice and support to empower anyone experiencing a mental health problem, visit www.mind.org.uk or tel 0300 123 3393.

✱ **The National Rheumatoid Arthritis Society** supports people affected by rheumatoid arthritis, visit www.nras.org.uk or tel 0800 298 7650.

✱ **Versus Arthritis** is a UK arthritis charity that offers support to people with arthritis, visit www.versusarthritis.org or tel 0800 520 0520.



“Nerve stimulation could become a new way to manage pain after surgery”

NERVE STIMULATION REDUCES PAIN AFTER SURGERY

An “impressive” reduction in pain and use of opioid painkillers following commonly performed joint operations was witnessed after a nerve stimulation technique was tried out on patients, experts discovered in a recent trial.

In percutaneous peripheral nerve stimulation, a tiny electrical lead is placed next to a nerve and connected to a battery-powered pulse generator. The generator delivers mild electrical stimulation to the nerve, interrupting pain transmission. Although this

technique has been widely used for people with chronic pain, this study is the first research to evaluate its use for pain after surgery.

In the trial of 65 people who had joint surgery, the benefits were “much greater than what we had anticipated, reducing pain scores by more than 50% and opioid consumption by 80%,” highlight the experts. They believe that peripheral nerve stimulation could become a safe and effective form of pain management after surgery.

Is industrialisation the root of inflammatory arthritis?

The impact of modern living on the gut's epithelial barrier may be to blame for inflammatory arthritis and other conditions, a research team suggests in a leading journal.

Autoimmune disease and allergies are on the rise, especially in industrialised countries, and are now thought to affect over one billion people worldwide. Their prevalence is increasing in developing countries in line with rates of industrialisation.

A team of experts has looked at the research and suggests that “agents linked to industrialization, urbanization and modern life underlies the rise in allergic, autoimmune and other chronic conditions”. They suggest these agents may be damaging the important barrier within the gut (epithelial barrier).

We know that the body's natural barriers (skin, mucous, etc) protect us from infections, toxins, pollutants and allergens. A defective barrier within the gut (epithelial barrier) could come into play in conditions such as rheumatoid arthritis, lupus, ankylosing spondylitis, atopic dermatitis, coeliac disease and inflammatory bowel disease.

The experts suggest that “immune responses to dysbiotic microbiota that cross the damaged barrier may be involved in the development of these diseases”.

It's a relatively new area of research that could have a major impact on people with many different inflammatory conditions.



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The use of aromatherapy in arthritis and other rheumatic conditions is given the thumbs up in a new evidence review, and lavender oil is the most popular.

Studies that looked at the benefits of aromatherapy for arthritis and other rheumatic conditions, including osteoarthritis, rheumatoid arthritis and fibromyalgia were included in the analysis.

There were lots of differences between the studies, for example, duration of oil use varied from two weeks to 12 weeks. However, the outcome of the review was widely positive in favour of essential oils. While lots of different oils were used, lavender was most common, followed by ginger and rosemary.

"All studies but one demonstrated the efficacy of aromatherapy," the researchers conclude, relaying that "there are few reports on essential oils in rheumatic disease" and more are needed.

What is aromatherapy?

Aromatherapy is the use of plant essential oils for therapeutic purposes. Each oil has its own special therapeutic properties, and can be used or applied in a variety of ways, including:

- Body massage, with the oils blended in a carrier oil or cream;
- By adding a few drops to warm bath water;
- Through steam inhalation or vaporisers;
- In creams and lotions for individual use;
- In compresses.

Source: *The Federation of Holistic Therapists*

AROMATHERAPY BENEFITS ARTHRITIS SAYS EVIDENCE REVIEW



QUARTZ DUST CAN LEAD TO RHEUMATIC DISEASES

Exposure to silica – quartz – dust, from working with concrete and granite leads to greater risk of certain types of rheumatic disease. Published in an international journal, the large study shows that exposure to silica dust can come at a high cost.

Silica dust is made when flint, sandstone, granite and concrete are ground or processed in other ways. Some of the dust comprises small particles that when inhaled, are carried into the smallest parts of the lungs, where they can cause an inflammatory reaction and activate the immune system.

The researchers examined the association between exposure to silica dust and rheumatoid arthritis, systemic sclerosis, lupus erythematosus and small vessel vasculitis.

A survey of over three million adults saw 17,000 diagnosed with one of these autoimmune diseases. Almost

1,500 of the people diagnosed had been exposed to silica dust at work. Level of exposure to silica dust at work and autoimmune rheumatic disorders were clearly associated, most notably for systemic sclerosis and rheumatoid arthritis. The risk of the rheumatic diseases increased with greater exposure levels of silica dust.

"Exposure to silica dust at work, which is the case especially at workplaces within construction and industry, may lead to autoimmune rheumatic diseases – even at low levels of exposure," says Dr Signe Hjuler Boudigaard, one of the researchers behind the largest study of its kind.



Omega-3 lowers inflammation and stress in body and mind

A high daily dose of an omega-3 supplement may reduce stress-related inflammation and help slow the effects of ageing, new research suggests. The fatty acids have been found to suppress damage and boost protection at the cellular level during and after a stressful event.

The volunteers in this new research were 138 healthy but sedentary, overweight and middle-aged adults. They received either omega-3 or a placebo for four months.

Key findings

- Daily supplements that contained 2.5g of omega-3 (the highest dose tested) were the best at helping the body resist the damaging effects of stress;
- Compared to the placebo group, participants taking omega-3 produced less stress hormone cortisol and lower levels of inflammatory protein (interleukin-10) during a stressful event in the lab;
- Levels of protective compounds sharply declined in the placebo group after the stressor, but there were no such decreases in people taking omega-3.

"The findings suggest that omega-3 supplementation is one relatively simple change people could make that could have a positive effect at breaking the chain between stress and negative health effects," comments Annelise Madison in the journal *Molecular Psychiatry*.

Previous research suggests that people with a higher inflammatory reaction to a stressor in the lab may develop more depressive symptoms over time. So the research team hopes that by lowering stress-related inflammation, omega-3 may help disrupt the connection between repeated stress and depressive symptoms.



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Multivitamins DO protect against hip fracture

Many of us who take vitamins wonder if they do actually help our health and wellbeing. Rest assured, a new review of the evidence published in *Archives of Osteoporosis* has found that multivitamin use is significantly protective against osteoporotic hip fracture.

Scientists trawled through the evidence and found eight studies that were of a high enough quality to analyse. Of the 80,148 people from whom data was collected, there were 4,237 cases of fragility hip fracture.

Multivitamin use was found to be significantly associated with a lower risk of sustaining a fragility hip fracture.

"Combined multivitamins are amongst the most widely used supplements and are often preferred over single vitamins," the scientists explain. "Our meta-analysis indicates that multivitamin use is significantly protective against osteoporotic hip fracture."

"Multivitamins were associated with a lower risk of fragility hip fracture"



New videos for people recently diagnosed

If you have recently been diagnosed with osteoporosis or know someone who has, you may have a lot of questions. The Royal Osteoporosis Society has produced four useful videos that answer common questions and enable people to learn more about osteoporosis and bone health.

Visit www.theros.org.uk to watch:

- What is osteoporosis?
- How is osteoporosis diagnosed?
- How do you treat osteoporosis?
- How do I keep my bones healthy?

The Royal Osteoporosis Society can be contacted by telephone too: 0808 800 0035.

Scan delays reported around the world during COVID-19 pandemic

Adults with osteoporosis have had fewer in-person appointments, delayed DXA scans and interruptions with medication supplies during the COVID-19 pandemic, according to results from a global survey in *Osteoporosis International*.

The outcomes of the qualitative aspects of the survey strongly suggest that the key issues for the UK were:

- * Hampered provision of intravenous (eg zoledronate) and subcutaneous (eg denosumab) anti-osteoporosis medications;
- * Reduced ability to use DXA scans for diagnosis and (in some cases) monitoring of osteoporosis;
- * And concern that the above two will lead to a substantial increase in the risk of fracture.

Prof Cyrus Cooper, from the University of Southampton, who led the work comments that "these findings serve to highlight the detrimental effects the COVID-19 pandemic is having on osteoporosis assessment and management."

MILK CONSUMPTION DOES MORE GOOD THAN HARM FOR HUMAN HEALTH

Dairy products are often given a grilling by the media, who cite their potentially negative effects on health and the impact on carbon emissions.

However, a new extensive review of the research shows that milk consumption is more often related to benefits than harm when it comes to our health.

One cup (200ml) of milk a day was associated with a lower risk of osteoporosis, cardiovascular disease, stroke, hypertension, colorectal cancer, metabolic syndrome and obesity. Beneficial associations were also found for

type 2 diabetes and Alzheimer's disease. However, milk intake might be associated with higher risk of prostate cancer,

Parkinson's disease,

acne and iron-deficiency anaemia in infancy. Of

course, some people may be lactose intolerant and should therefore

steer clear of dairy products. "Milk

consumption does more good than

harm for human health

in this umbrella review,"

the research group concludes in *Nutrition & Metabolism*. "Our results support milk consumption as part of a healthy diet."



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Digital app can help chronic pain management

A new app has been found to help people manage chronic pain, which should in turn reduce the probability of misuse of prescription opioids.

A total of 246 people from chronic pain clinics were enrolled in the study, of whom 70% used the new app – Manage My Pain – alongside their medication, psychological therapy and physiotherapy. The app allowed participants to track their pain and create reports that allowed better communication with their healthcare team. Through a virtual portal, Manage My Pain gave clinicians the ability to remotely monitor their patients and use analytics to spot any negative trends weeks and months in advance.

The app prompts people daily to input the activities they are able to accomplish and rate the pain they feel. In return,

they receive charts and graphs that highlight patterns and trends that could increase self-awareness, and provide insight into triggers and interventions.

Publishing their findings in *JMIR Mental Health*, the study showed that compared to the 30% of people who did not use the app, those who did use Manage My Pain enjoyed a reduction in anxiety and pain catastrophising. These are two key areas that drive increased medical needs and potential abuse of prescription opioids.

“The COVID-19 pandemic has shown us how essential it is for patients to have a role in managing healthcare conditions,” says Dr Hance Clarke who is involved in the work. “Digital tools like Manage My Pain are a great way to empower self-management in patients, which is one of the hallmarks of successful clinical care.”

Financial stress leads to physical pain in later years

While financial stress can have an immediate impact on well-being, it may also lead to physical pain nearly 30 years later, says new research in *Stress & Health*.

Data from over 500 rural families in the US was collected for 27 years. The families had experienced financial problems in the 1980s. Most people now are over 65 years old.

Even after the team controlled for illnesses, family income and age, they found a connection between family financial hardship in the early 1990s and physical pain nearly three decades later.

Family financial stress in midlife was associated with a depleted sense of control, which is related to increased physical pain in later years.

“Physical pain is considered an illness on its own with three major components: biological, psychological and social,” explains Prof Kandauda Wickrama, who is involved in the study. “In older adults, it co-occurs with other health problems like limited physical functioning, loneliness and cardiovascular disease.”



ONLINE EXERCISE PROGRAMME MAY REDUCE FIBROMYALGIA PAIN

A telerehabilitation programme based on aerobic exercise improved pain and reduced stress for women with fibromyalgia during COVID-19 lockdown.

The small study saw 34 women split into two groups. One group was given telerehabilitation that focused on videos of aerobic exercises twice a week for 15 weeks. The control group received usual care.

The telerehabilitation group saw levels of pain intensity, pain sensitivity and psychological distress fall.

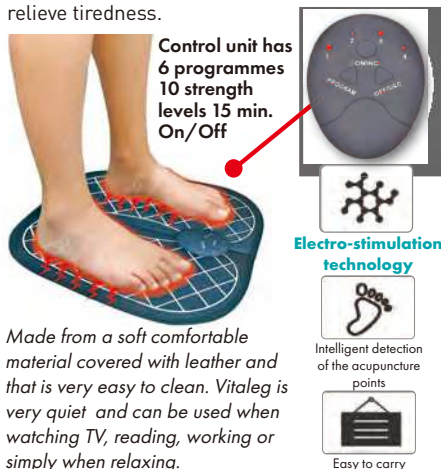
“Telerehabilitation based on aerobic exercise achieved improvements on pain intensity, mechanical pain sensitivity, and psychological distress compared to a control group during the lockdown,” the research group concludes.

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TECHNOLOGY****Switch it on, choose your setting, then
sit back and relax for 2 minutes!****HOW DOES IT WORK?**

The Low frequency pulse EMS electrostimulator technology is a process that combats the causes of poor blood circulation. VITALEG emits electrical micro-pulses via the soles of the feet to activate the nerves and contract the muscles of the feet and calves. The muscles will then release and release the blood that has congested during the first movement. At regular intervals, the electrostimulation creates a pumping effect in the veins, as if you were walking, to reactivate the blood circulation in the various parts of your body. This will give you the sensations you would experience from a real vibrating massage to stimulate your feet, improve circulation and relieve tiredness.



Control unit has
6 programmes
10 strength
levels 15 min.
On/Off

**Electro-stimulation
technology**Intelligent detection
of the acupuncture
points

Easy to carry

Made from a soft comfortable
material covered with leather and
that is very easy to clean. Vitaleg is
very quiet and can be used when
watching TV, reading, working or
simply when relaxing.

What would you say to an**acupuncture treatment at home?**

If you still don't believe that it's possible or too expensive, here is THE solution that could bring a smile to your face at last: the VITALEG mat. Designed to detect intelligently the acupuncture points on the feet (all types and all sizes), this mat is perfect for pain-free stimulation of the acupressure points, toning the cells, firming the skin of the feet and legs, combatting premature ageing of the veins by improving blood circulation and detoxing the meridians. It is also great for reducing muscular tensions and pains. The VITALEG stimulates the muscles in your feet and calves using low frequency pulse technology (EPS / EMS). It is very simple to use, simply place your feet on it and the electrical pulses will stimulate the meridians and acupuncture points.

**VITALEG provides
immediate benefits:****FAST
RESULTS**

- ✓ **REACTIVATES** circulation
- ✓ **LIMITS** water retention
- ✓ **REDUCES** swelling of legs
- ✓ **SOOTHES** pain and swelling
- ✓ **IDEAL** after surgery or if you are convalescing
- ✓ **COMBATS** varicose veins
- ✓ **PREVENTS** cramps
- ✓ **STOPS** pains

Well-suited for
pensioners, those
who are sedentary,
ladies who often
wear high heels,
or hikers ...

**HEAVY AND SORE
LEGS****SWOLLEN FEET
AND ANKLES****POOR
CIRCULATION ?****WHY IS IT EFFECTIVE?**

The VITALEG is based on an acknowledged ancestral method. This physiotherapy for your feet allows you to benefit immediately from a relaxing massage, the stimulation of the acupuncture points, the releasing of tensions and a reduction in fatigue.

VITALEG acts on the main health points:**LEFT FOOT:**

- Brain
- Digestive system
- Heart
- Arteries
- Colon
- Lungs
- Kidneys
- Spleen

RIGHT FOOT:

- Liver
- Stomach
- Pancreas
- Bladder
- Gall bladder
- Adrenal glands
- Pituitary gland
- Eyes
- Ears

**TEST WITHOUT RISK: Telephone: 0871 075 2635 – Online: www.mymvitalegs.co.uk**

Calls cost 13p per minute plus your phone company's access charge.

– Mail: Wellform Ltd, DRMG House, Cremers Road, Sittingbourne, Kent, ME10 3US

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If you are not completely satisfied or the results do not meet your expectations, we will
reimburse you fully without quibbling upon simple written request.

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Z2H66185	Buy Two Vitalegs Save £90		£69.98	
Standard 7 Working Day Delivery				£4.99
Priority Processing and Express Delivery				+ £3.00
TOTAL				

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SERIES
GREAT
BRITISH
ISLES

The Isle of Wight

Just four miles from England's south coast, The Isle of Wight is home to dramatic coastal scenery, wonderful food... and dinosaur footprints, reports **Ivo Kosa**

A popular holiday destination since Victorian times, The Isle of Wight is a little milder and sunnier than the rest of the UK. As well as better weather, the island boasts diverse wildlife, plenty of accessible attractions, and must-try foodie haunts.

Getting there

The most common means of travel is via ferry from Portsmouth, Southampton or Lymington; the crossing is only around 45 minutes. Take a car... or travel by foot, as rail and bus links make for a straightforward trip. **Visit www.wightlink.co.uk or tel 0333 999 7333.**

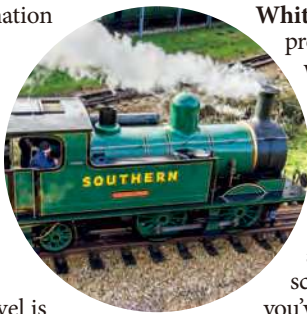
What to do

* One of the best-known attractions on the Isle of Wight is **The Needles**, located on the western-most point of the island. The row of three stacks of chalk rises dramatically about 30m out of the sea and can be viewed via chairlift or even boat. All public areas of the site (except for the beach) are accessible via wheelchair. **Visit www.theneedles.co.uk or tel 01983 752401.**

* Nearby, pick up some beautiful and unique glassware from **Alum Bay Glass** and watch live demonstrations from skilled local craftspeople. **Visit www.alumbayglass.co.uk or tel 0871 720 0022.**

* Those with a sweet tooth will enjoy watching local confectioners create sweet treats in front of their very eyes... and sampling the results. **Visit The Isle of Wight Sweet Manufactory or tel 01983 752401.**

* Another must-see attraction is the **Isle of**



White Steam Railway, where staff provide every possible assistance when it comes to accessibility.

Take a journey through history via beautifully restored Victorian and Edwardian steam locomotives and stations modelled in the style of different eras. Stop along the way to enjoy the scenic countryside. And when you've finished, take a tour of the Train Discovery Museum. The trains are accessible by wheelchair, along with the museum and carriage and wagon workshops. **Visit www.iwsteamrailway.co.uk or tel 01983 882204.**

* Towards the north of the island, **Osborne House** – the holiday home of Prince Albert and Queen Victoria – offers sumptuous state rooms, gardens and grounds. Accessibility to the first floor is provided by lift, and wheelchair loan is available for those who need it. On-site travel is made easier thanks to an adapted minibus that can take people to Queen Victoria's beach. **Visit www.english-heritage.org.uk or tel 01983 200022.**

Must eat

The Isle of Wight boasts an impressive range of dining options and many delicious products are grown, reared and made on the island. Whatever you're looking for, you'll be able to find it, from seafood to Sunday roast, small cafes to Michelin-starred restaurants.

For seafood why not try the **Crab and Lobster**? Dine while enjoying the breath-taking costal views of this family-owned restaurant, which prides itself on its menu of locally-sourced fresh seafood. There is level access throughout the restaurant and wheelchair-


accessible facilities. **Visit www.characterinn.co.uk or tel 01983 872244.**

Must sleep

There are plenty of accessible places to stay on the Isle of Wight, from self-catering cottages to bed and breakfasts and hotels.

If you're after a treat, we recommend the four-star **Lakeside Park Hotel and Spa** due to its fabulous facilities, a brasserie that overlooks a lake and grounds that can be enjoyed by everyone as they are DDA compliant. Some of the bedrooms have been especially equipped with wet rooms. As for the luxurious spa facilities... **Visit www.lakesideparkhotel.com or tel 01983 882266.**

Don't miss

Huge casts of dinosaur footprints have been found in several locations on the Isle of Wight. These can be discovered at low-tide at Compton and Brook beaches. If getting there is an issue, check out Dinosaur Isle, Britain's first purpose-built dinosaur museum and visitor attraction. **Visit www.dinosaurisle.com or tel 01983 404344.** 



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