Mental health and arthritis: a complex relationship

In this issue of JointHealth™ insight, we focus on the important relationship between mental health and arthritis. People with inflammatory arthritis (IA) are more likely to experience mental health conditions such as depression, anxiety and “brain fog” than the general population. Recent research suggests there is a complex relationship between these conditions and arthritis, and the impacts are profound. People with osteoarthritis (OA) may also experience depression as a result of new and significant physical limitations. There are effective ways that people with arthritis can manage their mental health.

Depression and anxiety weaken a person’s ability to deal and cope with pain.

Living with daily pain aggravates your anxiety and depression.

Patients can find themselves in a negative cycle of pain, poor health and negative mood, which can significantly change the course and management of your arthritis.

People with IA and depression tend to have more functional limitations, are less likely to adhere to their treatment regimens, and have increased odds of developing other health problems.

Stuck in a negative cycle?

Arthritis can cause depression and/or anxiety; these conditions, in turn, can make your arthritis worse.

This issue will cover the following:

- Relationships between depression, “brain fog” and inflammatory arthritis
- Burden of depression
- Recognizing and managing depression and anxiety
- Prevent depression and anxiety
- Love, sex and arthritis*

*Please be advised that the content in this section contain graphics of “joint friendly” positions during sex and may not be appropriate for you or others in your household. The graphics are excerpted from the book, “Rheumatoid Arthritis: Plan to Win”, by Cheryl Koehn, Dr. John Esdaile and Taysha Palmer published by Oxford University Press, 2002.
Depression and anxiety, “brain fog”, and inflammatory arthritis

People living with inflammatory arthritis (IA), such as rheumatoid arthritis (RA), spondyloarthritis, psoriatic arthritis and lupus experience physical and emotional challenges. Research shows that people with IA are more likely to experience depression and/or anxiety than the general population; people with RA are 17-20% more likely to develop depression.

One theory is that mental health disorders are an outcome of the pain and disability associated with arthritis. For example, new limitations caused by IA can bring significant changes to one’s life, work and relationships, leading to anxiety and depression.

We know that pain and disability are linked to depression in arthritis, but there is now growing evidence that inflammation also plays a role. For example, researchers at the University of Glasgow found that chronic inflammation from IA, which affects joints and organs, such as the eyes, skin, and the brain, may also be related to mental health disorders like depression¹.

“Brain fog” is another symptom of IA. “Brain fog” can create episodes of confusion, disorientation and frustration. Patients are unable to think clearly, concentrate and have problems with memory.

Results from a 2018 study published in Nature Communications linked RA inflammation with how messages about your inflammation are transmitted between your brain and your central nervous system². Researchers believe these brain changes are the reason behind fatigue, pain, and an impaired ability to think.

The burden of depression

On the effectiveness of biologic medications...

Biologics are an important treatment option for different forms of inflammatory arthritis. A 2018 study published in Rheumatology found that experiencing symptoms of depression at the start of biologics treatment (at baseline) is associated with reduced treatment response, and over time, impacts change in disease activity³. The researchers found that depression at baseline contributes to approximately 30% reduced odds of good biologics treatment response in RA. Furthermore, patients who reported a history of depression or experienced symptoms of depression were more likely to switch biologics. The study recommends patients should receive repeated screening and management of their mental disorder from their rheumatologist and rheumatology nurse.

On Lifestyle...

Arthritis pain and depression, compounded by inflammation and fatigue, are instant life changing conditions. All of these health challenges may cause you to engage less in physical and social activity, feel isolated, and experience poor sleep quality. These negative changes in your lifestyle can increase your pain and dampen your overall mood – making your depression worse.

The study recommends patients should receive repeated screening and management of their mental disorder from their rheumatologist and rheumatology nurse.

References:

Recognizing and managing depression and anxiety

Depression and anxiety in arthritis patients are underdiagnosed and many of those affected don't receive mental health treatment, which could potentially help with their arthritis related symptoms. There are many ways to prevent and manage depression and anxiety. It is important to understand that it is not your fault you are depressed and that you are not alone in your disease journey. One step in self-care for patients is to be aware of the signs of depression:

- Eating more or less than usual
- Being angry when your body can no longer do what you want it to do
- Feeling that you are a burden on others
- Having little energy
- Thinking things will never get better
- Feeling lonely or isolated
- Having a hard time making decisions
- Having thoughts of suicide
- Getting frustrated at having to ask for help
- Sleeping more or less than usual
- Crying more easily
- Having little interest in sex
- Feeling overwhelmed by simple tasks or responsibilities

Information retrieved from the Vancouver Coastal Health, Mary Pack Arthritis Program website.
Here are some ways to prevent or manage depression and anxiety:

- Find a way to express how you feel – talk to others, write in a journal, cry, or laugh.
- Consider getting support from a counsellor, social worker, or mental health professional. The Canadian Mental Health Association provides a directory of crisis support line you can call.
- Take care of yourself first. Rest when you are feeling exhausted to avoid added stress and anxiety. Learn to say no. Get lots of rest and exercise regularly.
- Focus on the good things that remain or have come into your life – new arthritis comrades or research opportunities with arthritis groups.
- Explore new passions or interests to replace what you have lost or to distract you – a new hobby, advocating for a cause, or volunteering in the community.
- Ask family and friends to help out with your chores to reduce your work load.
- Speak to your rheumatologist about your concerns and to determine a treatment plan best suited for you. Learn skills for communicating with your rheumatologist through JointHealth™ Education.
- Find someone or something that inspires you and gives you strength – a role model or a book.
- Consider getting support from a counsellor, social worker, or mental health professional. The Canadian Mental Health Association provides a directory of crisis support line you can call.
Emotional and physiological symptoms of arthritis can impact your relationships with family, friends and romantic or sexual partners.

From my perspective, chronic pain suffered by one partner definitely ends up impacting the lives of both partners, so sharing your feelings, concerns, and desires is a really positive first step to enjoying your sex life again.” An IA patient

The benefits of sex and physical contact (like hugging) include improving bonds and building trust between people, helping to reduce pain, promoting sleep, reducing stress, boosting immunity, burning calories, improving self-esteem and heart health.

Below is an excerpt from Rheumatoid Arthritis: Plan to Win with tips to manage arthritis symptoms during sexual activity or intimacy:

- Talk to your partner about what you like and don’t like, what hurts and doesn’t hurt. Be open about how both of you feel and come up with solutions that work for both of you. If you are finding these conversations difficult, you may benefit from seeing a sex therapist.
- Time your medication accordingly if you think it may impact your physical ability and mental mindset to partake in sexual activities.
- Communicate your daily level of pain and fatigue by using a number scale.
- Try different sex positions. Use well-placed padding, pillows, or wedge-shaped pillows to help ease joint pain and provide more comfortable position options.

Adjustments can be made to accommodate for partners of any gender and/or orientation. Experiment with your partner to determine what works best for you.

The information provided on this page is from the book Rheumatoid Arthritis: Plan to Win.

Arthritis Consumer Experts (ACE)

Who we are
Arthritis Consumer Experts (ACE) operates as a non-profit and provides free research based education and information to Canadians with arthritis. We help (em)power people living with all forms of arthritis to take control of their disease and to take action in healthcare and research decision making. ACE activities are guided by its members and led by people with arthritis, scientific and medical experts on the ACE Advisory Board. To learn more about ACE, visit www.jointhealth.org

Guiding Principles
Healthcare is a human right. Those in healthcare, especially those who stand to gain from the ill health of others, have a moral responsibility to examine what they do, its long-term consequences and to ensure that all may benefit. The support of this should be shared by government, citizens, and non-profit and for-profit organizations. This is not only equitable, but is the best means to balance the influence of any specific constituency and a practical necessity. Any amount remaining from our annual budget at year end remains with ACE and is used to support the following year’s core programs to continue helping Canadians living with arthritis.

For its past 20 years, ACE has consistently honored a commitment to its members and subscribers, academic and healthcare professional colleagues, collaborators, government and the public that its work is free from the influence of its funders.

To inform ACE employees and our stakeholders, members, subscribers that we will operate our organization with integrity and abide by the highest standards of lawful and ethical behaviour, ACE has adopted this strict set of guiding principles:

- ACE requests grants from private and public organizations to support its core program and plans and allocates those funds free from influence;
- ACE discloses all funding sources in all its activities;
- ACE does not promote any “brand”, product or program on any of its materials or its website, or during any of its educational programs or activities.
- ACE employees do not receive equity interest or personal “in-kind” support of any kind from any health-related organization;
- ACE identifies the source of all materials or documents used;
- ACE develops positions on health policy, products or services in collaboration with people living with arthritis, academic research community, health care providers and governments free from concern or constraint of its funders or other organizations; ACE employees do not engage in personal activities with its funders;
- Cheryl Koehn does not own stock or any financial interest in any of its private or public funders.

Thanks
ACE thanks Arthritis Research Canada (ARC) for its scientific review of all ACE and JointHealth™ materials.

Disclosures
Over the past 12 months, ACE received grants-in-aid from: Arthritis Research Canada, Canadian Biosimilars Forum, Canadian Institutes of Health Research, Canadian Rheumatology Association, Eli Lilly Canada, Hoffman-La Roche Canada Ltd., KT Canada, Merck Canada, Novartis, Pfizer Canada, Sandoz Canada, Sanofi Canada, St. Paul’s Hospital (Vancouver), UCB Canada, and the University of British Columbia.

ACE also received unsolicited donations from its community members (people with arthritis) across Canada.

ACE thanks funders for their support to help the nearly 6 million Canadians living with osteoarthritis, rheumatoid arthritis, psoriatic arthritis, ankylosing spondylitis and the many other forms of the disease.

Disclaimer
The material contained in this publication should not be relied on to suggest a course of treatment for a particular individual or as a substitute for consultation with qualified health professionals who are familiar with your individual medical needs. Please contact your physician for your own health care related questions.

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ACE does not promote any “brand”, product or program on any of its materials or its website, or during any of its educational programs or activities.

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