Arthritis is an umbrella term for more than 100 medical conditions that affect the musculoskeletal system, specifically joints. It can affect people of all ages.

The most common form of arthritis is osteoarthritis which becomes more common with age. Although often referred to as ‘wear and tear’ arthritis, osteoarthritis is not an inevitable part of ageing.

The next most common form of arthritis is rheumatoid arthritis which is an auto-immune condition in which the body’s immune system attacks the joints, causing inflammation and joint damage. Rheumatoid arthritis can occur at any age.

The burden of arthritis in Australia

Arthritis affects more than 3.3 million Australians.

Arthritis costs the health system more than $4 billion a year. It is also a leading cause of disability and early retirement, costing $1.3 billion annually in Disability Support Pension payments and $9.4 billion in lost GDP due to early retirement. The personal, social and economic cost of arthritis including lost wellbeing and reduced productivity was estimated to be $24 billion in 2007.

The prevalence of arthritis is set to increase exponentially in coming decades due to Australia’s ageing and increasingly obese population. By 2050, it is projected that 7 million Australians will suffer some form of arthritis.

The burden of arthritis in rural and remote Australia

The prevalence of arthritis is highest among those living outside the Major cities, particularly for males, Aboriginal and Torres Strait Islanders and those of lower socio-economic status.

Arthritis becomes more common with age, especially after the age of 45 years, and is most common among those aged 75 years and over. The prevalence of arthritis is likely to increase at a faster rate in rural and remote areas where the ageing of the population is more pronounced than in major cities.

Indigenous Australians, of whom 70 per cent live outside Australia’s capital cities, are 1.45 times more likely to have osteoarthritis and 1.92 times more likely to have rheumatoid arthritis than non-Indigenous people.

In addition, the industries of rural and remote areas – agriculture, mining, forestry and fishing – have higher incidences of injury, which can lead to arthritis. Farming particularly is associated with a higher risk of developing osteoarthritis.

Other lifestyle-related risk factors for developing arthritis are also more common among rural residents. These risk factors include being overweight and/or physically inactive, having joint injuries and, for rheumatoid arthritis, smoking.
Prevention and management of arthritis in rural Australia

Adopting a healthy lifestyle is important in preventing and managing most forms of arthritis. This involves maintaining a healthy weight, keeping physically active, and avoiding or quitting smoking. For example, up to 70 per cent of osteoarthritis of the knee can be prevented by avoiding excess weight gain and joint injuries.

People in rural and remote Australia have limited access to preventive, diagnostic and specialised care services, including GPs, allied health professionals and specialists, to help them manage their condition.

<table>
<thead>
<tr>
<th>Practitioner type</th>
<th>Major cities</th>
<th>Inner regional</th>
<th>Outer regional</th>
<th>Remote/Very remote</th>
<th>Australia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physiotherapist</td>
<td>117.1</td>
<td>72.6</td>
<td>60.2</td>
<td>50.7</td>
<td>105.4</td>
</tr>
<tr>
<td>Occupational therapist</td>
<td>68.2</td>
<td>48.3</td>
<td>48.4</td>
<td>23.1</td>
<td>63.0</td>
</tr>
<tr>
<td>Podiatrist</td>
<td>17.9</td>
<td>15.8</td>
<td>10.6</td>
<td>5.9</td>
<td>16.7</td>
</tr>
</tbody>
</table>

(a) Includes allied health practitioners who hold provisional registration.
(b) Derived from remoteness area of main job where available; otherwise, remoteness area of principal practice is used as a proxy. If remoteness area details are unavailable, remoteness area of residence is used. Records with no information on all three locations are coded to ‘not stated’.
(c) Includes migrants areas.
(d) Includes allied health practitioners who did not state or adequately describe their location and those who were overseas.

This lack of access to services can mean that rural and remote patients are forced to travel to metropolitan areas for treatment, often at considerable cost. The travel costs attributed to osteoarthritis and rheumatoid arthritis were estimated as $78.6 million in 2012. Patient assisted transport schemes (PATs) provide patients (and eligible escorts) in rural and remote Australia with financial assistance towards the costs involved in travelling to, and staying near, specialist medical services for treatment. A PATs Fact Sheet is available here [www.ruralhealth.org.au](http://www.ruralhealth.org.au/factsheets).

Arthritis Australia’s strategy *Time to Move: Arthritis* outlines the key components of a plan to improve care for people with arthritis across Australia. These include: awareness raising campaigns and strategies; strategies to prevent arthritis; providing better education and support for people to manage their own condition; improving access to co-ordinated care by a team of health professionals; and supporting health professionals to provide better care for people with arthritis. The strategy is available at [www.arthritisaustralia.com.au](http://www.arthritisaustralia.com.au).

If this strategy is successfully implemented, it will reduce the pain and disability associated with arthritis, help people to maintain their independence and quality of life, and maximise their ability to work and participate fully in society.

Key recommendations of the strategy addressing rural and remote services include expansion of outreach and telehealth services and building an appropriately skilled nursing workforce to support improved care.

Outreach and telehealth services are increasingly being used to deliver specialist services to rural areas of Australia. Information about current outreach services is available from Rural and Regional Health Australia at [www.ruralhealthaustralia.gov.au](http://www.ruralhealthaustralia.gov.au) or Australian Rheumatology Association at [www.rheumatology.org.au](http://www.rheumatology.org.au).


### Resources

Arthritis Australia provides an extensive range of information sheets and booklets on different forms of arthritis and arthritis management. These can be found at [www.arthritisaustralia.com.au](http://www.arthritisaustralia.com.au). An online website to help people to manage their osteoarthritis is also available at [www.myjointpain.org.au](http://www.myjointpain.org.au).

Arthritis organisations in most States and Territories have rural and regional branches and/or support groups offering a variety of resources, programs and support services for consumers such as free telephone information services, hydrotherapy classes, seminars, DVDs, library and self-management programs. Most also have a health professional’s page with resources and guides for specific professional groups such as GPs, nurses and pharmacists. Details of arthritis organisations by State and Territory can be found at [www.arthritisaustralia.com.au](http://www.arthritisaustralia.com.au).

Information about home maintenance and modification services, and community care packages for older people and people with a disability is available at [www.myagedcare.gov.au](http://www.myagedcare.gov.au).

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**Arthritis Australia**

Arthritis Australia is a charitable not-for-profit organisation, and is the peak arthritis body in Australia. It provides support and information to people with arthritis as well as their families and friends; promotes awareness of the challenges facing people with arthritis across the community, and to leaders in business, industry, and government; funds research into potential causes and possible cures as well as better ways to live with arthritis; and aims to keep health professionals such as physiotherapists, occupational therapists, and community nurses informed.