

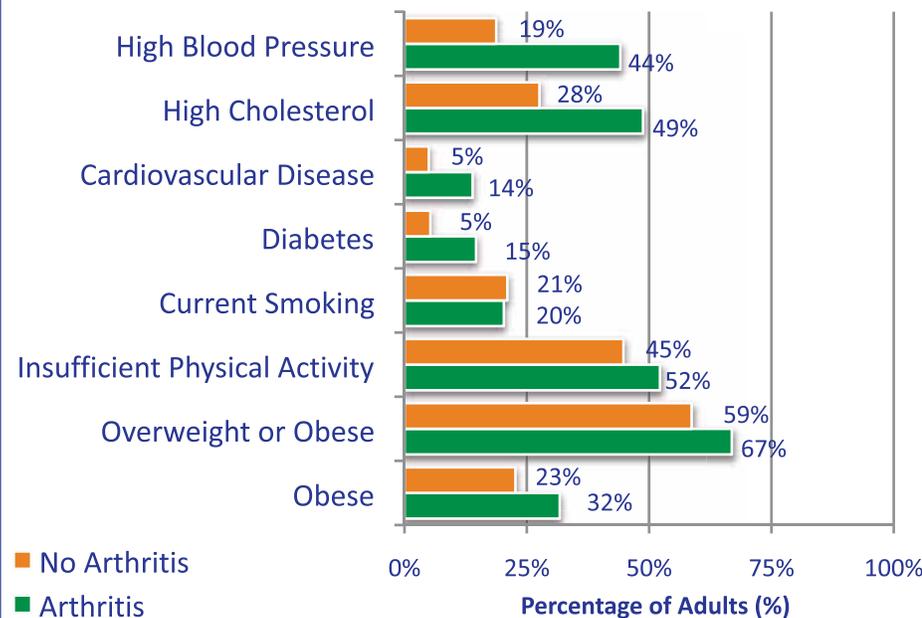
# ARTHRITIS IN NEW MEXICO

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FACT SHEET, 2010

Arthritis includes over 100 rheumatic diseases and conditions that affect joints, the tissue that surrounds joints and other connective tissue. Common forms include osteoarthritis, rheumatoid arthritis, lupus, fibromyalgia and gout. Arthritis symptoms typically include pain and stiffness in and around one or more joints.

**Percent of New Mexico Adults with Chronic Conditions by Arthritis Status, 2007**



## Arthritis and Other Chronic Conditions

Of New Mexico adults with arthritis...

- **52%** do not engage in sufficient amounts of physical activity, compared to **45%** of adults without arthritis
- **67%** are overweight or obese
- **15%** also have diabetes
- **14%** also report some form of cardiovascular disease (i.e., stroke, heart attack, coronary heart disease or angina)
- **44%** also have high blood pressure
- **49%** also have high cholesterol

## Arthritis in New Mexico

- Over 421,000<sup>1</sup> adults in New Mexico report doctor-diagnosed arthritis (**27%**)
- Among adult women in New Mexico, over 239,000 have doctor-diagnosed arthritis (**30%**)
- Among adult men in New Mexico, over 181,000 have doctor-diagnosed arthritis (**24%**)
- Among adults 18-44 years old, over 76,000 have doctor-diagnosed arthritis (**11%**)
- Among adults 45-64 years old, over 200,000 have doctor-diagnosed arthritis (**38%**)
- Among adults 65 years and older, over 144,000 have doctor-diagnosed arthritis (**54%**)

## Arthritis and Social Determinants of Health

- **34%** of adults with an annual household income of less than \$10,000 have doctor-diagnosed arthritis
- **30%** of adults with an annual household income of \$10-20,000 have doctor-diagnosed arthritis
- **29%** of adults with an annual household income of \$20-50,000 have doctor-diagnosed arthritis
- **25%** of adults with an annual household income of \$50,000 or greater have doctor-diagnosed arthritis
- Among non-Hispanic White adults in New Mexico, **34%** have doctor-diagnosed arthritis
- Among non-Hispanic Black adults in New Mexico, **24%** have doctor-diagnosed arthritis
- Among Native American adults in New Mexico, **20%** have doctor-diagnosed arthritis
- Among Hispanic adults in New Mexico, **20%** have doctor-diagnosed arthritis

## Available Intervention Programs:

The Centers for Disease Control and Prevention recommends evidence-based self-management and physical activity programs. Evidence-based intervention programs are proven to improve the quality of life for people with arthritis. Programs available in New Mexico include:

- Self-management education programs help teach people with arthritis techniques to manage arthritis on a day-to-day basis
  - Arthritis Foundation **Self-Help Program**
  - Stanford's **Chronic Disease Self-Management Program** (English and Spanish)
- Physical activity programs offer substantial benefits to people with arthritis and can decrease arthritis pain and disability
  - Arthritis Foundation **Exercise Program**
  - Senior Services of Seattle's **EnhanceFitness** (adapted to New Mexico)

## What's Being Done:

The Arthritis Advisory Group (AAG) consists of community members with expertise in arthritis, leadership, planning, evaluation, public health, aging services, social marketing, communications strategies and policy development and aims to heighten awareness of arthritis as a public health issue. The AAG provided the content for the document, *Arthritis in New Mexico: Blueprint for Action*, which includes strategies in four areas: access, collaboration, advocacy and evidence-based best practices. Priority goals were also established within each of the four areas.

## Priority Goals

**Access:** Increase access to affordable and appropriate self-management opportunities for people with arthritis

- Adopt payment/reimbursement systems for evidence-based exercise and self-managements programs for people with arthritis in New Mexico. Include pharmacological treatments for rheumatoid arthritis in reimbursement packages.
- Remove access-to-services barriers in hard to reach populations throughout New Mexico.

**Collaboration:** Increase collaboration between agencies and organizations that serve New Mexicans with arthritis and other chronic diseases that have similar disease management approaches. People with arthritis do not experience their condition in isolation and the self-management practices recommended for people with arthritis can help to manage heart disease, diabetes, osteoporosis, obesity and their risk factors.

- Agencies and organizations with resources and access to people living with arthritis collaborate to reach more people with arthritis and other chronic conditions.

**Advocacy:** Educate professionals and communities on the prevalence of arthritis in New Mexico, cost-effective self-management strategies and access-to-services barriers facing New Mexicans with arthritis.

- Reach agencies and organizations with the power to advocate for people with arthritis in New Mexico with consistent messages on prevalence, management and costs.

**Evidence-based best practices:** Healthcare practitioners should have access to evidence-based guidelines for diagnosis, treatment and self-management referrals for people they treat who may have arthritis.

- Healthcare professionals are aware of and utilize best practice guidelines for diagnosis and treatment of arthritis throughout New Mexico.

## References

All data presented are from New Mexico Behavioral Risk Factor Surveillance System, 2007

<sup>1</sup> Population Source: Bureau of Business and Economic Research (BBER). Populations Estimates, University of New Mexico.

Released 2008. <http://www.unm.edu/~bber/>.

With funding provided through the Centers for Disease Control and Prevention, Arthritis Program-Cooperative Agreement IU58DP001454-01.

