ASK YOUR DOCTOR 🛊

Hope For Those With Osteoarthritis Knee Pain

(NAPSA)-You may be surprised to learn that osteoarthritis (OA) of the knee is a leading cause of disability in the United States. In one year alone, approximately 9 million American adults were diagnosed with the condition. The pain from knee OA can be significant, with serious effects on daily activities.



And yet much can be done to help minimize its impact. With today's treatment advances, knee OA sufferers or have every reason to hope their pain can be reduced, enabling them to enjoy full and . active lives.

Dr. Peyton

Randall S. Peyton, M.D., an orthopedic surgeon from Arthritis & Sports Orthopaedics in Sterling, Va., answers a few questions to help you learn more about knee OA and available treatment options.

How can I tell if I have knee osteoarthritis?

Osteoarthritis tends to progress slowly. At first, your knee may ache after physical activity. As time goes on, the pain may become more persistent. Stiffness is a common sign and is especially noticeable in the morning. Swelling and pain may eventually make walking, climbing and other normal movements difficult.

Are some people more likely than others to develop osteoarthritis of the knee?

Age is perhaps the most wellknown risk factor for knee osteoarthritis. About 55 percent of those diagnosed are over the age of 65. Women are more apt to develop osteoarthritis than men and to suffer with severe knee osteoarthritis.

I've heard that diet and exercise might help knee pain. Is this true?

Health and behavior modifications, including exercise and diet, play a major role in the treatment of knee osteoarthritis. Exercise, if done correctly, builds strength, reduces pain and improves range of motion. Exercise also helps with weight loss. Excess weight places stress on joints, so weight control is important. Many nutritionists believe an anti-inflammatory diet rich in omega-3 fatty acids can be useful as well.

How is OA knee pain treated?

Your doctor can help you sort through the many treatment options available. Over-thecounter pain relievers are commonly tried first. But as your disease progresses, you need to make sure you are using the most appropriate treatment.

Viscosupplementation treatments such as Euflexxa (1% sodium hyaluronate) are often used to lubricate the knee joint and help reduce pain. Combining therapies like Euflexxa, weight loss and exercise may help improve joint function.

How can I be sure that I can take these treatments?

It is important to inform your doctor of all known allergies and sensitivities. Anyone with allergies to avian products such as eggs, or sensitivities to manufacturing chemicals like formaldehyde, should request viscosupplementation therapy that is not manufactured using these elements, such as Euflexxa®, to eliminate the risk of related reactions.

For more information about osteoarthritis, talk to your doctor and visit www.euflexxa.com to learn more about this treatment.

~____ Note to Editors: Euflexxa® (1% sodium hyaluronate) is indicated for the treatment of knee pain due to osteoarthritis (OA). It is used in people who have failed to get adequate pain relief either from simple pain medications, such as acetaminophen, or from exercise and/or physical therapy.

Important Safety Information:

Euflexxa® should not be used in people who have had any previous allergic reaction to hyaluronate preparations or who have knee joint infections or skin dis-eases in the area of the injection site. In a randomized, double-blind, multicenter clinical trial, the only adverse event reported with Euflexxa® at an incidence greater than 5% was arthralgia (joint pain) (8.75%). Temporary knee pain and swelling may occur after injection with Euflexxa®. The safety and effectiveness of injecting Euflexxa[®] into the knee together with other injectable medications or into joints other than the knee have not been studied. The safety and effectiveness of treatment cycles of fewer than 3 injections or of repeated treatment cycles with Euflexxa® have not been established. Strict aseptic technique must be followed to avoid joint infection. It is recommended to avoid strenuous activity or prolonged weight-bearing activities such as jogging or tennis within 48 hours following intra-articular injection.