Your Health

New Survey Reveals Knee Osteoarthritis Sufferers Make Daily Accommodations To Avoid Pain, Without Fully Realizing Its Effect On Physical And Social Activities

(NAPSA)—It started with working fewer hours, staying home more and avoiding favorite pastimes like gardening and spending time with her family, including her grandchildren—anything to reduce the pain in her knees.

These are just a few of the ways in which Rebecca Von Eiff, who suffered for years with painful knee osteoarthritis (OA), accommodated her life because of OA. And, according to the results of a recent survey, she's not alone.

The survey conducted online by Harris Poll on behalf of DePuy Synthes Companies polled 668 U.S. adults aged 45 to 75 who have been diagnosed with OA, experience moderate to severe knee pain and have not had knee joint replacement. The survey found that more than half of respondents reported that, at least quite a bit of the time, they:

• Avoid an activity that requires a great deal of walking (57 percent)

• Avoid an activity that requires a great deal of standing (59 percent)

• Avoid an activity that requires going up or down stairs (52 percent).

"Finding ways to get through everyday life with minimal pain consumed me," remembered Rebecca. "I was prescribed medication to help with the OA pain and then began getting cortisone shots regularly. Although these remedies helped some, the effect eventually wore off."



Rebecca encourages those with severe knee pain to start a conversation with a doctor about treatment options.

As an interior designer, Rebecca, 68, was used to being active during the day; but knee pain caused her to begin sitting on the arm of a couch to take the pressure off her knees and that grew into scheduling shorter visits to the design center to pick up samples. Everyday activities, like gardening in her backyard, walking to get the mail at the end of her driveway or getting in and out of her car while running errands, became more and more difficult.

"I finally decided enough was enough when the pain started limiting my interaction with my entire family," said Rebecca. "I couldn't enjoy activities during family vacations and I went to my doctor and said 'I just want my life back'."

Rebecca and her orthopaedic sur-

geon decided that having her knees replaced with the ATTUNE[®] Knee System, which was specifically designed to work in harmony with the body to provide full range of motion and optimize stability, was the best option for her. After surgery, Rebecca participated in rehabilitation and worked with Christina Lewis, physical therapist and director at Townson Sports Medicine in Baltimore, Md. Christina incorporated everyday activities into Rebecca's therapy, which helped her get back to her life sooner, and helped her return to work in just six weeks.

"During rehabilitation, the focus is on increasing range of motion and stability, and getting the patient back to everyday life," said Christina.

Following her hard work to recovery, Rebecca is now back to doing the things she loves like gardening, interior design work and being active with her family, including her grandchildren.

"My advice to others is to not wait for the pain to get so bad that you stop living your life," said Rebecca. "Talk to your doctor about treatment options. Joint replacement has made such a difference for me."

To find out more about the ATTUNE Knee System or to find a surgeon near you, please visit www.GetBackSooner.com.

Important Safety Information: The performance of knee replacements depends on age, weight, activity level and other factors. There are potential risks and recovery takes time. People with conditions limiting rehabilitation should not have knee replacement surgery. Only an orthopaedic surgeon can determine if knee replacement is required based on an individual patient's condition.

About the Survey

The survey was conducted online by Harris Poll on behalf of DePuy Synthes Companies between July 25 and August 19, 2014 among 1,087 U.S. adults ages 45–75 who have not been diagnosed with osteoarthritis; 1,024 U.S. adults ages 45–75 who have been diagnosed with osteoarthritis; experience OA in their knees and/or hips, and have not had joint replacement surgery (including 668 who experience moderate to severe knee pain); and, 515 U.S. adults ages 45–75 who have been diagnosed with osteoarthritis, experience OA in their knees and/or hips, have had a knee and/or hip joint replacement, and do not currently experience severe pain in other joints (including 357 who have had knee replacement surgery). For complete research method, including weighting variables, please contact Deanna Ashikyan: 310-309-1018.