

## Joint venture

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Out of shape: the distorted joints caused by rheumatoid arthritis are a common feature of the disease.

Rheumatoid arthritis sufferers often seek alternatives to a life on drugs, writes Wendy Champagne.



We have all seen the devastation rheumatoid arthritis causes, the swollen knuckles and the lack of mobility. It is a debilitating disease that affects more than 250,000 Australians, most of whom will need medical supervision, pain relief and treatment with complex pharmaceuticals for the rest of their lives.

While the cause of rheumatoid arthritis remains a mystery, it is thought to be an auto-immune disease in which the immune system makes antibodies that attack the connective tissue in joints and tendons.

There is also no known cure. At best, medical intervention can manage the symptoms, sometimes producing what Dr Jim Bertouch, chairman of the Therapeutics Committee of the Australian Rheumatology Association and chairman of the Department of Rheumatology at Prince of Wales Hospital, calls a "therapeutic cure" - one that is dependent upon continuing therapy.

The fact that rheumatoid arthritis sufferers face a lifetime of drug intervention leads many to consider alternative treatments. "We very frequently have patients coming in with a paper they have copied from the internet," says Bertouch. "Some medical practitioners find that threatening, but I think it is something we need to embrace."

When she was diagnosed with rheumatoid arthritis three months ago, 50-year-old Karen\* knew what course of action she would take.

"I already had huge run-ins with stomach ulcers when I was taking anti-inflammatories for my back," she says. "And it sounded to me as if I would have to go back to that sort of regime, so I decided instead to go the natural way."

Rheumatoid arthritis can strike children and the elderly, but the average age of onset is between 25 and 40, and it affects three times as many women as men. Conventional treatments are: Non-steroidal anti-inflammatory drugs (NSAIDs), administered to reduce pain and stiffness. Unfortunately, some do cause peptic ulceration, but Bertouch says there is a push to develop a safer range of these drugs and deliver them to the market as soon as possible. Cortisone is also prescribed as an anti-inflammatory, but it is used cautiously because of side-effects. Suppression of the overactive aspect of the immune system, achieved with another family of drugs used in concert with the anti-inflammatory treatment. They including methotrexate, originally a chemotherapy drug but now used extensively to treat rheumatoid arthritis.

"Then there is a whole new and very exciting range of immune suppressants, called TNF-Alpha inhibitors, coming on to the PBS," Bertouch says. "These drugs, which have been very successful

in trials, work a completely different way from the old immunosuppressants, by inhibiting the chemicals released by the white corpuscles into the joints."

By contrast, Karen's therapy involves a strict natural diet with fruit and lots of greens, especially celery, juices, no nightshades - potatoes, tomatoes, eggplant, sweet or hot peppers - no red meat and very little chicken.

While she does take conventional pain relief and NSAIDs - "for when the swelling in my joints gets really out of control" - Karen has weekly **acupuncture** sessions and does twice-weekly Pilates training, a commitment she feels is really making a difference. "I have started sleeping all the way through the night for the first time in 15 months. When you go on the machines and stretch, it feels like everything in your body is coming back to life again."

Bertouch supports a patient's need to have a say in his or her treatment, but he also stresses the importance of checking for joint damage before embarking on any such treatment. "If a patient has joint erosion, I would be much more likely to say that, although I would be happy for you to explore alternatives - you may wish to go to a herbalist or explore nutritional therapy, that is fine as long as it is not harmful - I would like you to do that in accommodation with my conventional treatment."

For Karen and others like her, the key to successful remission may not actually lie with the alternative treatments but rather with the sense of empowerment that comes from taking part in your own healing.

"It makes you feel like you're doing something about it; you don't feel beholden to a system that is saying this is how it is and this is how it is going to be. If you go that way you are going to get very depressed very quickly because it is awful, it hurts ... and it's very scary.

"I want to do my own thing and do it my own way. I am going to do things that hurt and aggravate it, and I am going to do things that won't necessarily work, but I want to do it that way. I don't think it has to deteriorate. I think I can beat it."

Bertouch is more circumspect: "Your wellness in relation to diet and exercise is a critical part of the management of this condition, but I am not convinced that by simply doing that and nothing else that you can control or cure it. I would love that to be the case, but I don't think it is that simple." \* *Not her real name.*