



**Complementary
and alternative
medicine for
arthritis**

This booklet provides information
and answers to your questions
about these treatments.

Arthritis Research UK produce
and print our booklets entirely
from charitable donations.

Complementary and alternative medicine for arthritis



Complementary and alternative medicine includes a wide range of therapies and practices which are used outside of or alongside mainstream medicine. In this booklet we'll describe the complementary and alternative medicine most widely used. We'll explain what the treatments are, which conditions they might help with, the potential risks and how to find an appropriate practitioner.

At the back of this booklet you'll find a brief glossary of medical words – we've underlined these when they're first used.

www.arthritisresearchuk.org

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At a glance

Complementary, alternative and integrated medicine

What is complementary and alternative medicine?

Complementary medicine uses therapies that work alongside conventional medicine.

Alternative medicine includes treatments not currently considered part of evidence-based Western medicine.

Integrated medicine means that conventional, complementary and alternative therapies are brought together and used alongside each other.

Why do people use complementary and alternative medicine?

People use complementary and alternative medicine because:

- they wish to use treatments that are more natural and help them feel more in control
- they have persistent pain
- they have concerns about the side-effects of medication
- their symptoms aren't fully controlled by conventional medicine.

In the UK 60% of people with arthritis use some form of complementary and alternative medicine at some time.

What are the main complementary and alternative therapies for arthritis?

- acupuncture
- the Alexander technique
- aromatherapy
- copper bracelets
- diet and nutritional supplements
- healing
- herbal medicine
- homeopathy
- magnet therapy
- manipulative therapies: chiropractic, osteopathy and manual medicine
- massage
- relaxation and hypnosis
- wax bath therapy.

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Complementary and alternative medicine for arthritis

For more information on complementary and alternative medicines, including their effectiveness and safety scores, see the Arthritis Research UK reports:

Complementary and alternative medicines for the treatment of rheumatoid arthritis, osteoarthritis and fibromyalgia;

Practitioner-based complementary and alternative therapies for the treatment of rheumatoid arthritis, osteoarthritis, fibromyalgia and low back pain.

Are they right for me?

There are some key points to consider if you're thinking about using complementary and alternative medicine.

- **What am I hoping to achieve?**
Pain relief? More energy? Better sleep?
Reduction in medication?
- **Who is the therapist?** Are they qualified, registered and insured?
- **Am I happy with the therapy?**
- **Are there any risks – are they safe?**
- **What are the financial costs?**
- **Is there any evidence for their effectiveness?**

You need to:

- **be realistic** – there are no miracle cures for arthritis (be very suspicious of anyone, or any website, promising a miracle cure)
- **talk to your doctor**
- **continue taking your prescribed medication unless advised otherwise by your doctor.**
- ! For potentially progressive conditions such as rheumatoid arthritis, we recommend that you continue with your conventional drug treatments, though you may still find complementary therapies helpful as an add-on.



What is complementary and alternative medicine?

Complementary and alternative medicine refers to a wide range of therapies and practices that are outside mainstream medicine.

- **Complementary medicine** uses therapies that work alongside conventional medicine.
- **Alternative medicine** includes treatments not currently considered part of evidence-based Western medicine.
- **Integrated medicine** means that conventional, complementary and alternative therapies are brought together and used alongside each other.

Alternative and complementary medicine or therapies aren't always totally separate. For this reason, the term 'complementary and alternative medicine' (or CAM) is now widely used to include both approaches.

- ❗ In the UK at least 30% of people use complementary and alternative medicine each year, and around 50% of us use some form of complementary and alternative medicine in our lifetime. This increases to over 60% among those who have arthritis.

This booklet aims to help you decide whether complementary and alternative medicine could help you.

Why do people use complementary and alternative medicine?

The rapid growth in the popularity of these therapies suggests that some people aren't fully satisfied with normal medicine. This may be because:

- they wish to use treatments that are more natural and help them feel more in control
- they have persistent pain
- they have concerns about the side-effects of medication
- their symptoms aren't fully controlled by conventional medicine.



What are the main differences between complementary and alternative medicine and conventional medicine?

Complementary and alternative medicine:

- tends to be holistic and include therapies from various historical and cultural backgrounds
- often requires the individual to take an active part in their own treatment with lifestyle changes (e.g. diet, exercise, meditation or psychological exercises)
- includes therapies which are diverse in nature and origins. The ways in which these therapies are thought to work are also diverse, although many are based on the idea of supporting the body's ability to heal itself.

Conventional medicine:

- mainly focuses on understanding and correcting the underlying problems that are causing the symptoms. In many instances these aren't fully understood, although there have been major advances in recent years, especially in rheumatoid arthritis, with much of the research being funded by Arthritis Research UK
- is often criticised for treating the disease and not the individual, requiring the patient to accept the diagnosis and treatment offered by the doctor

- is increasingly recognising the importance of the patient's involvement and choice in their treatment, and many argue this is due to the influence of complementary and alternative medicine approaches.

What's similar?

Both styles of treatment emphasise the quality of the relationship between the practitioner and the person being treated. A good relationship is important for a successful outcome. Often, both conventional and complementary and alternative medicine approaches are used and may help people with arthritis or other long-term (chronic) pain, for example many physiotherapists are now trained in acupuncture. This is known as integrated medicine.

Does complementary and alternative medicine really work?

Because there are many types of complementary and alternative medicine, it's impossible to generalise about whether they work or not. Effectiveness might be judged by whether you feel better but it also may relate to measurable improvement in your condition or general well-being. We briefly discuss the effectiveness of the main complementary and alternative therapies on the following pages.

What's the difference?

Complementary and alternative medicine tends to be holistic and include therapies from various historical and cultural backgrounds.

Conventional medicine mainly focuses on understanding and correcting the underlying problems that are causing the symptoms.

Is it safe?

Generally speaking, complementary and alternative medicine is relatively safe, although you should always discuss its use with your doctor before starting treatment. There are some risks associated with specific therapies, for example some herbal therapies may have significant side-effects or may interact with prescribed medication.

In many cases the risks associated with complementary and alternative medicine are more to do with the therapist than the therapy. This is why it's important to go to a registered therapist or one who has a set ethical code of practice and is fully insured.

Can I get it on the NHS?

Generally speaking, the NHS does not provide complementary and alternative therapies for people with arthritis or related conditions. However, there is a lot of local variation, so you may need to enquire. Some NHS organisations employ chiropractors and osteopaths. Many NHS physiotherapists use acupuncture, and some occupational therapists, clinical psychologists and nurses are trained in relaxation or meditation techniques. The Royal London Hospital for Integrated Medicine (RLHIM) in central London is an NHS centre for integrated complementary medicine. You need to be referred by your GP.

If you have private health insurance, it may cover complementary and alternative therapy so check with your insurer.

What are the main complementary and alternative therapies for arthritis?

In this section we'll explain the complementary and alternative therapies that are widely used, and some which are less common, and discuss their safety and effectiveness in the treatment of arthritis.

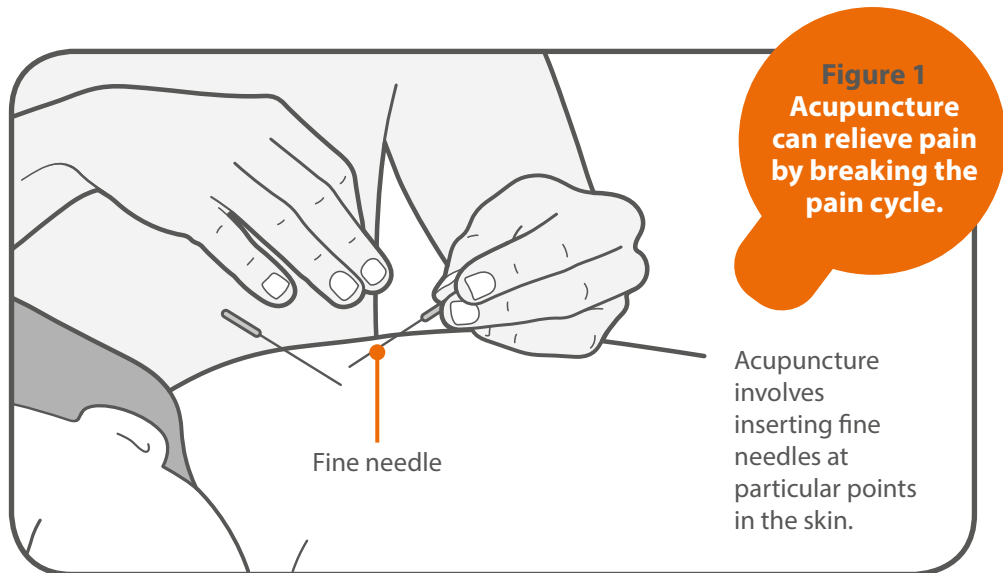
Acupuncture

What is it?

Acupuncture involves inserting fine needles at particular points in the skin (see Figure 1, page 8). The needles may be stimulated manually, by heat (with a dried herb called moxa) or by a small electrical current delivered through a box which allows adjustment of the strength of the current (electro-acupuncture). Acupuncture may be given one to one or in a group. Practitioners sometimes treat more than one person at a time, because the needles have to be left in place for some time.

The needles are very fine, so having them inserted isn't usually painful. Sometimes a sensation of heaviness or tingling may be felt at the insertion site, and this is considered a good sign.

Acupuncture seems to relieve pain by diverting or changing the pain signals that are sent to the brain from damaged tissues and by stimulating the body's own pain-relieving hormones (endorphins and enkephalins). This pain relief may only last a short time when you



begin treatment, but repeated treatment (usually weekly for six or eight sessions) can bring long-term benefit, often for several months. If the pain returns, then more acupuncture may help for another few months.

As with all treatments to relieve pain (including physiotherapy, hand therapy and painkilling drugs), breaking the 'pain cycle' sometimes gives permanent relief. This depends on what stage your arthritis is at, although acupuncture can help at almost any stage of the illness. As with many conventional treatments, it can't cure or reverse the process of arthritis.

i See Arthritis Research UK booklet
Pain and arthritis.

If you can't tolerate conventional drugs then acupuncture may help you through

a painful episode. There's now clear scientific evidence that it can be beneficial for some conditions including low back pain. For this reason acupuncture treatment is increasingly available on the NHS in physiotherapy departments or through your GP. However, at present, NICE guidelines do not recommend acupuncture for osteoarthritis.

Is it safe?

Acupuncture generally has a very good safety record. It could potentially transmit diseases if needles were re-used. However, disposable single-use needles are now standard practice, and there are strict guidelines regarding their disposal.

Acupuncture occasionally causes bleeding and bruising. Much more common is a short period of dizziness, drowsiness or faintness after treatment.

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If you are pregnant it's important to discuss acupuncture with your doctor and therapist as certain acupuncture points should be avoided during pregnancy.

i See Arthritis Research UK booklet
Pain and arthritis.

The Alexander technique

What is it?

At the end of the 19th century the Australian actor F. Matthias Alexander developed this technique in order to improve his voice. The Alexander technique increases your awareness of body position and movement, eliminating bad habits of posture, muscle tension and movement. It's really a 're-education' method rather than a therapy, and practitioners call themselves teachers.

Is it safe?

The Alexander technique may be helpful in preventing problems such as low back pain and repetitive strain injury (RSI). While there is little published research on the Alexander technique for arthritis, many people report that it's helpful and is safe.

Aromatherapy

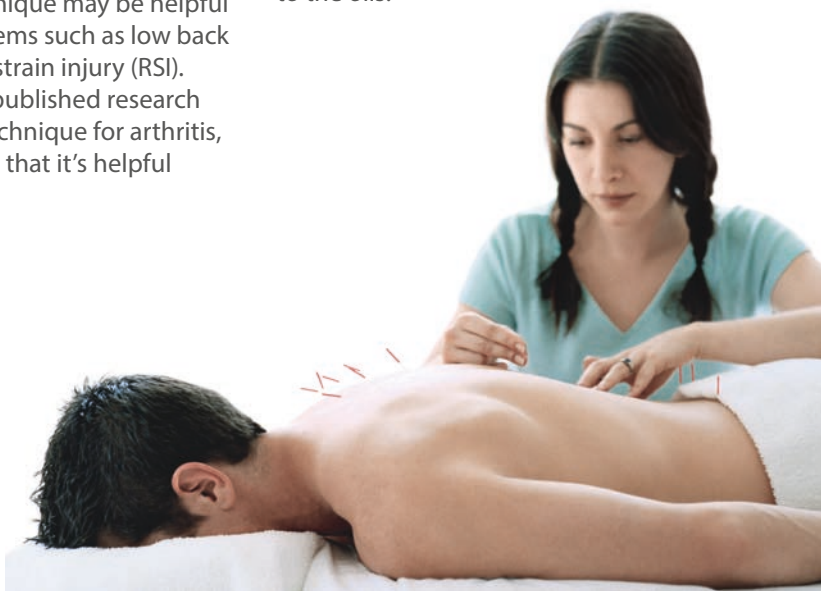
What is it?


Aromatherapy is the therapeutic use of scented essential oils. The oils may be inhaled, used in the bath or massaged into the skin. When used for massage they're diluted in a carrier oil.

Many different oils can be used. For back pain, for instance, an aromatherapist might select lavender or marjoram to relieve muscle spasm, or ginger if there's a circulatory problem. Other oils such as rosemary or peppermint are thought to have stimulating properties.

Is it safe?

The oils are very concentrated and should never be applied to the skin undiluted. They may be harmful in large quantities, particularly to pregnant women. In practice aromatherapy is very safe, apart from occasional allergic reactions to the oils.





**In homeopathy,
only tiny doses
of the active
ingredient
are used.**

There's little evidence that aromatherapy is effective for arthritis, although there is some evidence that it's beneficial in other painful conditions and helpful for anxiety. Many people with chronic pain report that an aromatherapy massage gives relief for several weeks.

Copper bracelets

What are they?

Many people with arthritis wear copper bracelets for pain relief or to reduce stiffness. However, there's no scientific or medical evidence that copper bracelets offer any benefit. Copper in the bracelet can't be absorbed into the joint in any way and there's no evidence that arthritis is caused by shortage of copper in the body.

Are they safe?

There's no current research supporting the use of copper bangles, but they're perfectly safe to use.

Diet and nutritional supplements

A good diet is essential for health, and many complementary and alternative therapists advise on diet. Dietary changes can help many people with arthritis, both inflammatory types and osteoarthritis.

i See Arthritis Research UK booklet
Diet and arthritis.

As well as having a healthy, balanced diet, getting additional nutrients from food supplements may help if you

have arthritis. In this section we'll have a look at some of the supplements that are available.

Omega-3 fatty acids for inflammatory arthritis

Omega-3 polyunsaturated fatty acids EPA and DHA (found naturally in oily fish, for example, pilchards, sardines, mackerel, salmon) can be helpful for inflammatory arthritis (including rheumatoid arthritis, reactive arthritis, psoriatic arthritis and ankylosing spondylitis, but not gout). Quite large amounts of omega-3 are needed for the best effect, so a concentrated fish oil supplement providing 3 g of EPA and DHA (i.e. total EPA + DHA) is available.

Fish oils act quite slowly, so you may want to try them for three months to see if you notice any benefit. Some people find high doses of fish oils upset their stomach. If this is a problem you could try taking two or three smaller doses during the day. Or try eating oily fish instead – at least twice a week (but not more than four times a week). However, please note that if you have gout, oily fish should generally be avoided.

If you're vegetarian, or fish oil disagrees with you, other types of omega-3 fatty acids may be found in flaxseed oil, rapeseed oil and walnuts, but it's uncertain whether they're as beneficial as the EPA and DHA found in fish oil.

! It's important not to confuse fish oil with fish liver oil. Lots of people take cod liver oil for osteoarthritis, but there's no evidence that it makes a difference to the condition. Also large doses of fish liver oil would potentially result in an overdose of vitamin A – this is particularly dangerous in women who are pregnant or might become pregnant because too much vitamin A could be harmful to an unborn baby. If you want to increase your intake of omega-3 fatty acids, we recommend taking pure fish oil rather than fish liver oil.

Vitamin E

There's some evidence to suggest that vitamin E can play a part in the treatment of arthritis by preventing damage in the cells of the bones and joints. It may also have anti-inflammatory properties.

It's important to include vitamin E in your diet, especially if you're taking a lot of fish oil. However, high doses (more than 400 mg of vitamin E a day) should be avoided. Vitamin E is found in a wide variety of foods. Rich dietary sources of vitamin E include plant oils (including soya, wheat and olive), wheatgerm, sunflower seeds, nuts and avocado.

Selenium

Mild selenium deficiency is quite common and it's been suggested that deficiency may result in a more rapid progression of arthritis, although there's doubt about this. Selenium is usually derived from yeast for medicinal purposes. It's available as part of most vitamin or mineral supplements and is also available on its own in the form of capsules.

Vitamin D

We get most of our vitamin D from the action of sunlight on the skin, particularly during the summer months. Slight vitamin D deficiency is quite common in the UK, especially in winter and particularly if you have dark skin, rarely go out or cover most of your skin. A lack of vitamin D can lead to the development of osteomalacia (soft bones) and osteoporosis. The effect of vitamin D supplements on the progression and pain of knee osteoarthritis is currently being evaluated. The vitamin D content of most foods is low, but the best sources are oily fish, particularly herrings (e.g. grilled), salmon (fresh and tinned) and mackerel, and eggs. Some foods are fortified with vitamin D, such as margarine, various breakfast cereals and powdered milk. The best source of vitamin D is exposure to sunlight. From June to August, 15 minutes a day of sun exposure with your arms exposed to the elbows is generally enough. Dark skin needs more, and more exposure is needed in winter.

Glucosamine sulphate and chondroitin for osteoarthritis

Many people take glucosamine sulphate tablets with or without added chondroitin for osteoarthritis. Cartilage contains substances related to glucosamine and chondroitin, and taking supplements of these natural ingredients may nourish damaged cartilage. Research results are mixed but suggest that some people may benefit from this therapy.

Research suggests glucosamine sulphate is more likely to be helpful than glucosamine hydrochloride. If you're thinking of trying glucosamine we suggest taking 1500mg per day of glucosamine sulphate. You may want to try glucosamine and chondroitin supplements for three months, and if your joint pain is much improved you can choose to continue with them.

If you have an allergy to shellfish, there are vegetarian or shellfish-free forms of glucosamine available.

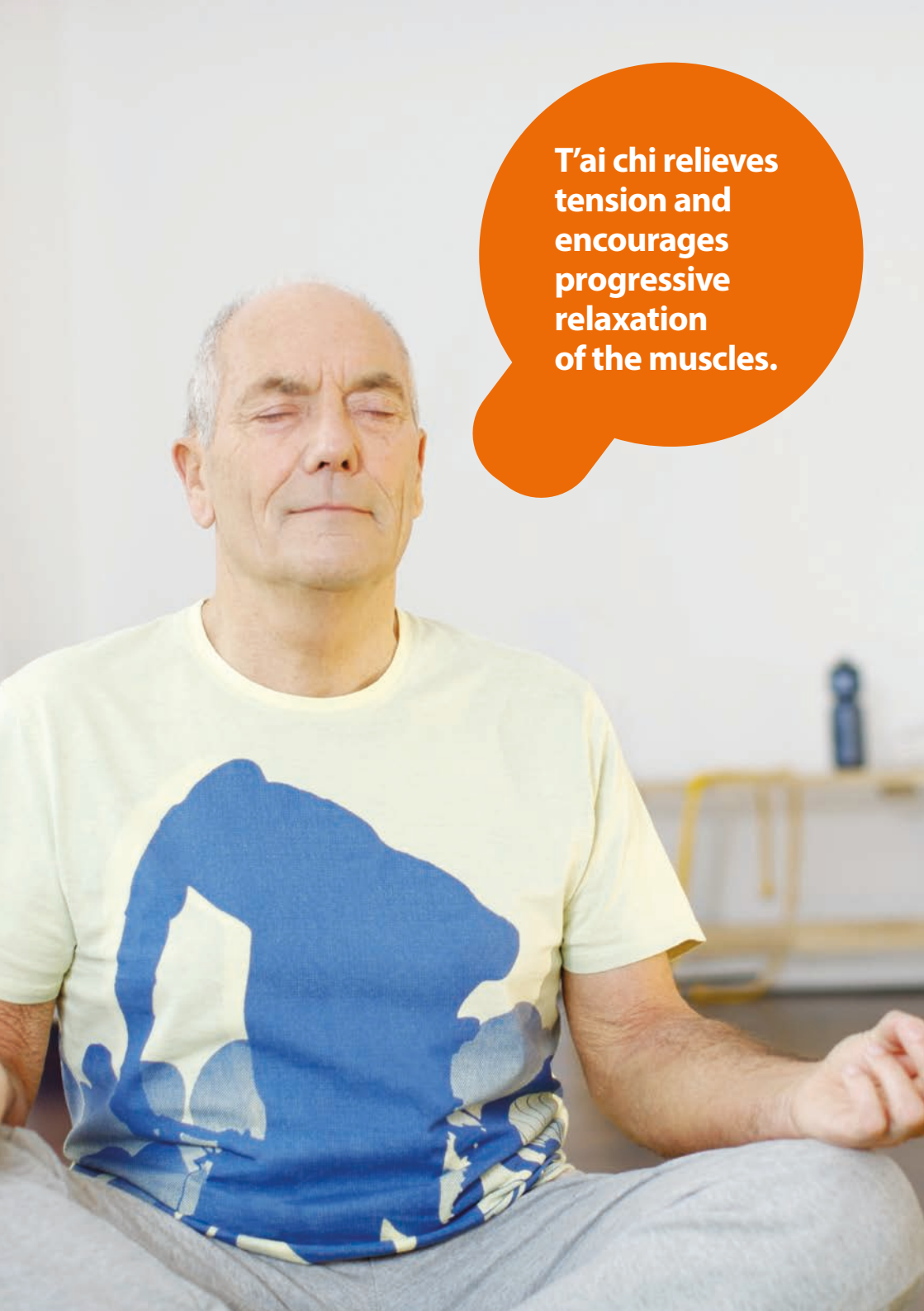
❗ Glucosamine can increase the level of sugar in the blood, so if you have diabetes it would be useful to discuss glucosamine with your doctor before you start to take it. You should also speak with your doctor if your blood sugars seem to be rising after starting glucosamine.

If you're taking warfarin your blood-thinning control (international normalised ratio or INR) may be affected, so make sure you have regular blood checks and discuss glucosamine with your doctor.

Exclusion diets

Some people find that certain foods aggravate their arthritis and avoid those foods. The only way to be sure that you have a food intolerance is by dietary 'exclusion and challenge' where you leave out a certain food from your diet for several weeks. This is followed by a 'challenge', where you reintroduce the food to see if it causes a reaction.





**T'ai chi relieves
tension and
encourages
progressive
relaxation
of the muscles.**

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If your arthritis is related to a food allergy you'll notice a flare-up of your symptoms within a few days. It's important to cut out each food you're testing completely and re-introduce them one at a time. It's better, if possible, to eat a balanced diet, rather than to rely on nutritional supplements. For instance, for most people dairy products (milk, cheese, yogurt, but not butter) are by far the biggest dietary source of calcium, which is essential for strong bones. If you don't eat dairy products you need to consider where you get calcium from.

Are they safe?

For more information on the above and many more supplements and alternative medicines, see our special report. This report has a detailed safety and effectiveness scoring system for each product.

i See Arthritis Research UK report
Complementary and alternative medicines for the treatment of rheumatoid arthritis, osteoarthritis and fibromyalgia.

Healing

What is it?

Healing may take many forms, such as faith healing, the 'laying on of hands', spiritual healing, lay healing, 'distance' ('absent') healing and Reiki. Healing often has close links with specific belief systems, which may be religious, spiritual, social or cultural.

In a typical healing session, the healer will try to assess your 'energy field' and then try to pass energy to your body by way of a gentle touch or by sweeping their hands close to your body. Distance healing tries to achieve this at a distance, through thought, meditation or prayer.

Is it safe?

Healing practices are safe to try, and many are non-contact. But be aware that some do involve light touching, tapping or the 'laying on of hands', which could cause discomfort if you have painful joints.

Herbal medicine

What is it?

Herbal medicine is the use of plants and plant extracts to treat disease. Many modern drugs were originally extracted from plant sources, even if they're now made synthetically. Whereas conventional medicine now tries to use only the active ingredient of a plant, herbal remedies use the whole plant. Herbalists argue that the mixture of chemicals in the whole plant work together to give a better effect (called synergy) than a single active ingredient.

Some of the most promising herbs for arthritis, all of which are supported by some research, are devil's claw (made from a plant which grows in Namibia), Boswellia (from the frankincense tree) and rosehip.

Massage can reduce your anxiety and stress levels, relieve muscular tension and fatigue, improve circulation and thus reduce pain levels.

These herbal medicines can be found in health food shops and chemists, but if you consult a medical herbal practitioner you'll probably be prescribed a mixture of herbs, often in liquid form, tailored to your needs. This may include herbs which are thought to have anti-inflammatory and painkilling properties, and others which may improve energy or aid relaxation and sleep, or even just to make the mixture taste better!

Is it safe?

Generally speaking, herbal remedies are safe but they can sometimes cause side-effects. These side-effects can include stomach upsets, sleeplessness and pains in the muscles or joints. Some herbal remedies may also interact with your prescribed medication. If you're thinking of using these remedies, always buy them from a trusted manufacturer to make sure they're a quality product, and discuss their use with your doctor first.

! A new system for regulation of traditional herbal medicines was introduced in May 2014. This is administered by the government agency, the MHRA. It requires that herbal medicines marketed in the UK have a history of traditional use, are of good quality and are safe.

Homeopathy

What is it?

Homeopathy (from the Greek words meaning similar suffering) is based on the idea of treating like with like. So for a hot and tender joint a homeopath might prescribe apis, made from bee-sting venom, which can cause hot and tender swellings. The controversial aspect of homeopathy is its use of extremely dilute medicines (sometimes called remedies).

Homeopaths often advise changes in lifestyle, which could include changing your diet, more relaxation or exercise.

Two randomised controlled trials have suggested that homeopathy may be effective in reducing the number of tender points and the level of pain in fibromyalgia, although the evidence isn't conclusive. There is limited evidence for the effectiveness of homeopathy in osteoarthritis and rheumatoid arthritis. However, some people do report that their pain and symptoms are eased by homeopathic remedies.

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Is it safe?

Homeopathy is generally safe, although sometimes the right medicine can cause an 'aggravation' – a temporary flare-up of symptoms. However, this is usually seen as a good sign. Allergic reactions (e.g. a rash) have been reported in some cases.

Dosage hasn't been well studied. Patients should follow the dosage recommended by the homeopath or the homeopathic pharmaceutical company.

Magnet therapy

What is it?

It has been suggested that magnets can be helpful for pain relief, including low back and knee pain. Magnets can be used in different ways, including bracelets, magnets taped to joints and various magnetic devices, including mattress pads.

Is it safe?

Unfortunately the evidence is too patchy to make clear recommendations on the kind of magnet therapy that might help you. But it's very safe, so it may be worth experimenting – although you'll have to weigh this up with the cost of the products.

Manipulative therapies: chiropractic, osteopathy and manual medicine

What are they?

Manipulative therapies include chiropractic, osteopathy and manual medicine. They're used mainly for musculoskeletal problems, including spine, neck and shoulder disorders; joint, posture and muscle problems; sciatica; sports injuries; whiplash; and repetitive strain injury.



There's quite good evidence that hypnotherapy techniques can help with pain and associated symptoms such as anxiety.

The best-known manual therapy technique is the 'high-velocity thrust' – a short, sharp movement, usually applied to joints in the spine, which often produces the sound of a joint 'cracking' – but many other methods are also used.

These therapies are carried out by health professionals, particularly osteopaths and chiropractors, but some doctors and physiotherapists also use them. All of these groups are legally registered health professionals in the UK. Manual therapy should include advice on exercise and lifestyle as well as hands-on manipulative therapy.

Are they safe?

You shouldn't use manipulative therapies if:

- you have a circulatory problem affecting the spine
- you have osteoporosis

- you have malignant or inflammatory spine conditions
- you have recent fractures or dislocations
- you're on anti-clotting or blood-thinning drugs (for example, warfarin, heparin).

The most serious risks of manipulation are stroke and spinal cord injury after manipulation of the neck; however, these serious problems are very rare. Slight discomfort at the site of manipulation for a few hours afterwards is quite common.

Massage

What is it?

Massage is a manual technique which uses a variety of rhythmic strokes, kneading or tapping to move the muscles and soft tissues of the body. Massage can be stimulating or sedating, vigorous or gentle, and can include the whole body or only part. Oils, creams, lotions or talcum powder may be used.

Massage can reduce your anxiety and stress levels, relieve muscular tension and fatigue, improve circulation and thus reduce pain levels.

Is it safe?

Massage is generally safe and relaxing, and a trained massage therapist will always follow strict guidelines to avoid causing injury.

Psychological therapies: relaxation, hypnosis and cognitive therapies

What are they?

There are many forms of psychological therapies. They can be divided into those which focus on relaxation and those which focus on patterns of thinking and feeling (cognitive therapies).

The purpose of relaxation is to reduce the effects of stress and fatigue. Learning how to relax your muscles and get the tension out of your body can be very helpful for painful conditions such as inflammatory arthritis.

Hypnosis is a deeply relaxed state, induced by a practitioner, in which you're given therapeutic suggestions to encourage changes in behaviour or relief of symptoms. Hypnosis for someone with arthritis might include a suggestion that the pain can be turned down like the volume of a radio.

Relaxation therapies include:

- visualisation, which involves achieving a relaxed state through picturing healing images
- autogenic training concentrates on experiencing physical sensations, such as warmth and heaviness, in different parts of the body in a learnt sequence.

Cognitive therapies involve talking and aim to change negative patterns of thinking, feeling and behaving.

The most widely used cognitive therapy is cognitive behavioural therapy (CBT).

It cannot resolve your problems, but can help you manage them in a more positive way by breaking them down into smaller parts. It encourages you to examine how your actions affect the way you think and feel. CBT is often helpful in long-term health conditions including arthritis. CBT may be done on a one-to-one basis, in a group or with a computer programme.

Are they safe?

There's quite good evidence that these techniques can help with pain and associated symptoms such as anxiety.

Traditional and meditative therapies: meditation, t'ai chi, qigong and yoga

What are they?

Most of these therapies have ancient roots in Asia. They combine meditation, special movements or postures and breathing exercises. They are usually done in a group, and the social contact with like-minded people can itself be helpful.

Yoga originated in India about 5,000 years ago. It uses breathing exercises and postures – movements designed to increase strength, balance and flexibility – to boost physical and mental wellbeing. It can be helpful for low back pain, depression and stress.

T'ai chi (also called t'ai chi ch'uan) originates in ancient China but is now practised around the world as a health-promoting exercise. **Qigong** is a similar method, also with Chinese origins, which combines physical postures, breathing

techniques and focused intention. Both can help with stress, balance and mobility and increase muscle strength.

Meditation involves concentration on breathing or a sound (called a mantra) which you repeat to yourself. Mindfulness-based stress reduction (MBSR) is a modern therapy with roots in Buddhist meditation. It helps you pay more attention to the present moment: to your own thoughts and feelings and the world around you. It can help with pain, anxiety and sleep problems. There are now MBSR apps for mobile devices which some people find helpful.

Are they safe?

There's quite good evidence that these techniques can help with pain and associated symptoms such as anxiety. Some may also help with movement and flexibility. They are safe, although you should take care when attempting some of the more extreme yoga positions.

Wax bath therapy

What is it?

Wax therapy, which uses a bath of molten paraffin wax, is one of the most effective ways of applying heat to improve mobility by warming the connective tissues.

Wax therapy is mainly used on the hands and is often used by hand therapists in a hospital setting along with an exercise programme. Advice can be given on where to purchase wax baths privately.

The aims of wax bath therapy are to provide pain relief and comfort through

the use of heat, to assist with muscle relaxation and to relieve stiffness and help improve movement before exercise.

Is it safe?

Paraffin wax bath therapy is safe, although you should take great care with home kits not to heat the wax too much. You shouldn't use wax bath therapy if you have cuts, open sores or inflammatory skin conditions.

Are these therapies right for me?

It's hard to say for sure whether complementary and alternative therapies would work for you, as everyone responds differently to the treatments. Many of these therapies require your active participation and a certain amount of belief in the possible outcome. This is called the placebo effect – the psychological hope and belief that a treatment will help.

A lot of scientific research is aimed at finding out whether changes in patients' conditions are due to natural variations in the condition, or due to what are called 'non-specific effects' such as a belief that the treatment will work. However, if you find that complementary and alternative therapies work for you then this may be a more important consideration than how or why the therapy works.

There are some key points to consider if you're thinking about using complementary and alternative medicine.

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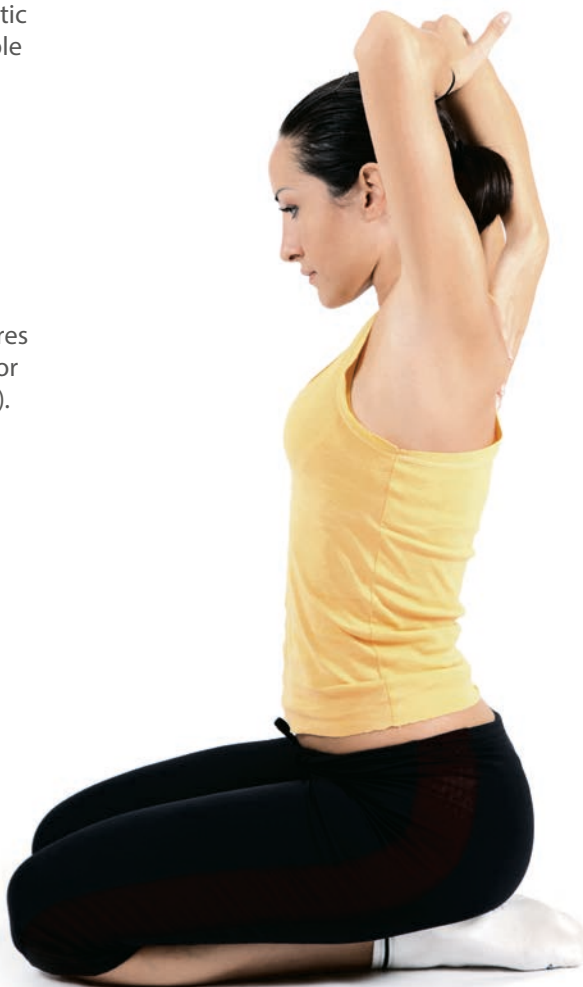
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- **What am I hoping to achieve?**
Pain relief? More energy? Better sleep?
Reduction in medication?
- **Who is the therapist?** Are they
qualified, registered and insured?
- **Am I happy with the therapy?** It's not
much use going to an acupuncturist
if you have a needle phobia! Or seeing
a therapist who's going to advise drastic
lifestyle changes that you won't be able
to stick to.
- **Are there any risks – are they safe?**
- **What are the financial costs?**
- **Is there any evidence for
their effectiveness?**

What do I need to do?

- **Be realistic** – There are no miracle cures
for arthritis (be suspicious of anyone, or
any website, promising a miracle cure).
- **Tell your doctor** – Many people
assume that their doctors will
disapprove, but in fact most doctors
will be interested to find out what
has helped you.
Some therapies, especially herbs, can
interfere with prescription medicines
or cause abnormal blood tests.
It's important that you discuss
their use with your doctor before
starting treatment.
- **Keep taking your prescribed
medication, unless advised
otherwise by your doctor** – If you're
hoping to reduce your prescribed
medication, don't do so suddenly.

The general rule is to continue the prescribed medicine until you start to improve, then gradually reduce it. Some drugs are long-acting, so you may not notice the effects of reducing it immediately. This is another reason to talk to your doctor.



Complementary and alternative therapists

There are two main groups of complementary and alternative therapists: those who **are** legally registered and those who **aren't**:

Osteopaths and chiropractors are legally recognised professionals just like doctors, nurses, occupational therapists and physiotherapists. This means their training is regulated by a body set up by the government and by law they must register with this body in order to practise. They must be insured, and they can be struck off and prevented from practising if they're found to be incompetent or unethical.

There are proposals for legal regulation of medical herbalists and acupuncturists, but at the time of writing these practitioners aren't required to be legally registered. If you consult a practitioner who is not a member of a legally registered health profession, they should:

- have an agreed code of ethics
- be insured in case something goes wrong with your treatment
- be a member of an organisation that promotes self-regulation and doesn't make unreasonable claims about their treatments.

! If you use complementary and alternative medicine, it's important that you discuss this with your doctor

and healthcare team and don't suddenly stop your conventional medicine. You should be suspicious of any complementary and alternative medicine practitioner who advises you to do so.

For potentially progressive conditions such as rheumatoid arthritis we suggest you think of complementary therapies as an add-on to your conventional medicines, not as a replacement for them.

Where can I find a therapist?

There's a list of appropriate organisations and their addresses at the end of this booklet. For therapists not currently required to register by law, such as aromatherapists, Alexander technique teachers, healers, hypnotherapists, nutritional therapists and massage therapists, there's a voluntary regulatory body, the Complementary and Natural Healthcare Council (CNHC).

The CNHC can provide details of therapists registered with them. Contact details are listed at the end of this booklet. For therapies such as acupuncture and homeopathy, you can find practitioners through the British Acupuncture Council and other associations, also listed at the back of the booklet.

Research and new developments

Research into complementary and alternative medicine is continuing all the time. Arthritis Research UK's report on the common oral health supplements taken for rheumatoid arthritis, osteoarthritis and fibromyalgia summarises the main research findings, giving each an effectiveness score from 1 to 5 and categorising them according to their safety. A similar report reviews the research evidence for a range of practitioner-based complementary therapies used in rheumatoid arthritis, osteoarthritis, fibromyalgia and low back pain.

The charity is also funding clinical trials looking at the effectiveness of acupuncture and yoga for low back pain and neck pain.

Research projects are also under way to investigate whether vitamin D and omega-3 fats could be helpful in treating rheumatoid arthritis.

Glossary

Ankylosing spondylitis – an inflammatory arthritis affecting mainly the joints in the back, which can lead to stiffening of the spine. It can be associated with inflammation in tendons and ligaments.

Cartilage – a layer of tough, slippery tissue that covers the ends of the bones in a joint. It acts as a shock-absorber and allows smooth movement between bones.

Chiropractor – a healthcare professional who treats mechanical disorders of the musculoskeletal system, often through spine manipulation or adjustment. The General Chiropractic Council regulates the practice of chiropractic in the UK.

Fibromyalgia – a long-term (chronic) form of widespread pain in the muscles and soft tissues surrounding the joints throughout the body.

Gout – an inflammatory arthritis caused by a reaction to the formation of urate crystals in the joint. Gout comes and goes in severe flare-ups at first, but if not treated it can eventually lead to joint damage. It often affects the big toe.

Hand therapist – a specialist occupational therapist or physiotherapist who specifically looks at your hands and any functional problems you may be experiencing as a result of your condition. Treatment may include exercises, splinting and advice.

Holistic – an approach to medicine which aims to treat the whole person, including social and psychological factors, rather than just specific disease symptoms.

Occupational therapist – a healthcare professional who helps you to get on with your daily activities (e.g. dressing, eating, bathing) by giving practical advice on aids, appliances and altering your technique.

Osteoarthritis – the most common form of arthritis (mainly affecting the joints in the fingers, knees, hips), causing cartilage thinning and bony overgrowths (osteophytes) and resulting in pain, swelling and stiffness.

Osteomalacia – Osteomalacia, or soft bones, often happens because of a lack of vitamin D. It causes severe symptoms of bone pain and muscle weakness. In Victorian times the condition often affected children and was called rickets, but today osteomalacia usually affects adults, especially the elderly and/or people of South Asian origin.

Osteopath – a healthcare professional who treats spinal and other joint problems by manipulating the muscles and joints in order to reduce tension and stiffness, and so help the spine to move more freely. The General Osteopathic Council regulates the practice of osteopathy in the UK.

Osteoporosis – a condition where bones become less dense and more fragile, which means they break or fracture more easily.

Physiotherapist – a healthcare professional who helps to keep your joints and muscles moving, helps ease pain and keeps you mobile.

Psoriatic arthritis – an inflammatory arthritis linked to the skin condition psoriasis.

Reactive arthritis – a specific type of inflammatory arthritis that usually occurs after a mild infection.

Rheumatoid arthritis – a common inflammatory disease affecting the joints, particularly the lining of the joint. It most commonly starts in the smaller joints in a symmetrical pattern – that is, for example, in both hands or both wrists at once.

Sciatica – pain felt in the leg due to irritation of the sciatic nerve, a major nerve running from the spine to the leg. The pain is usually felt in the buttock, thigh and calf but can go all the way down to the big toe.

Warfarin – a drug used to prevent blood clots from forming or growing larger. It works by ‘thinning’ the blood, making it less ‘sticky’ and reducing the blood’s ability to clot.

Where can I find out more?

If you’ve found this information useful you might be interested in the following Arthritis Research UK booklets:

Conditions

- *Back pain*
- *Fibromyalgia*
- *Neck pain*

Arthritis Research UK

Complementary and alternative medicine for arthritis

- *Osteoarthritis*
- *Osteomalacia*
- *Osteoporosis*
- *Rheumatoid arthritis*
- *Shoulder pain*
- *What is arthritis?*

Therapies

- *Occupational therapy and arthritis*
- *Physiotherapy and arthritis*

Self-help and daily living

- *Complementary and alternative medicines for the treatment of rheumatoid arthritis, osteoarthritis and fibromyalgia* (80-page authoritative report).
- *Practitioner-based complementary and alternative therapies for the treatment of rheumatoid arthritis, osteoarthritis, fibromyalgia and low back pain*
- *Diet and arthritis*
- *Keep moving*
- *Pain and arthritis*

These are all available on the website www.arthritisresearchuk.org or by contacting:

Arthritis Research UK

Copeman House
St Mary's Court
St Mary's Gate, Chesterfield
Derbyshire S41 7TD
Phone: 0300 790 0400
www.arthritisresearchuk.org

Related organisations

The following organisations may be able to provide additional advice and information:

Arthritis Care

Floor 4, Linen Court
10 East Road
London N1 6AD
Phone: 020 7380 6500
Helpline: 0808 800 4050
www.arthritiscare.org.uk

Offers self-help support, a helpline service (on both numbers above), and a range of leaflets on arthritis.

British Acupuncture Council

63 Jeddo Road
London W12 9HQ
Phone: 020 8735 0400
www.acupuncture.org.uk

British Holistic Medical Association

West Barn
Chewton Keynsham
Bristol BS31 2SR
Phone: 01278 722000
www.bhma.org

British Homeopathic Association

Hahnemann House
29 Park Street West
Luton LU1 3BE
Phone: 01582 408675
www.trusthomeopathy.org

British Medical Acupuncture Society

BMAS House
3 Winnington Court
Northwich
Cheshire CW8 1AQ
Phone: 01606 786782
www.medical-acupuncture.co.uk

Royal London Hospital for Integrated Medicine

60 Great Ormond Street
London WC1N 3HR
Phone: 020 3456 7890
www.uclh.nhs.uk/rlhim

British Reflexology Association

Monks Orchard
Whitbourne
Worcester WR6 5RB
Phone: 01886 821207
www.britreflex.co.uk

Complementary and Natural Healthcare Council

83 Victoria Street
London SW1H 0HW
Phone: 020 3178 2199
www.cnhc.org.uk

General Chiropractic Council

44 Wicklow Street
London WC1X 9HL
Phone: 020 7713 5155
www.gcc-uk.org

General Osteopathic Council

176 Tower Bridge Road
London SE1 3LU
Phone: 020 7357 6655
www.osteopathy.org.uk

International Federation of Aromatherapists

20A The Mall
Ealing
London W5 2PJ
Phone: 020 8567 2243
www.ifaroma.org

National Institute of Medical Herbalists

Clover House
James Court, South Street
Exeter EX1 1EE
Phone: 01392 426022
www.nimh.org.uk

NRAS (National Rheumatoid Arthritis Society)

Ground Floor, The Switchback
Gardner Road
Maidenhead SL6 7RJ
Phone: 0845 458 3969
Helpline: 0800 298 7650
www.nras.org.uk

Society of Teachers of the Alexander Technique

1st Floor, Linton House
39–51 Highgate Road
London NW5 1RS
Phone: 020 7482 5135
www.stat.org.uk

Further reading

Complementary and alternative medicines for the treatment of rheumatoid arthritis, osteoarthritis and fibromyalgia. Arthritis Research UK authoritative report. Arthritis Research UK 2009. ISBN 9781901815139. To order a free copy, ring 01904 696 994, or write to Arthritis Research UK at the address given on page 28.

Practitioner-based complementary and alternative therapies for the treatment of rheumatoid arthritis, osteoarthritis, fibromyalgia and low back pain. Arthritis Research UK authoritative report. Arthritis Research UK 2013. ISBN 9781901815139. To order a free copy, ring 0800 389 6692, or write to Arthritis Research UK at the address given on page 28.

Alternative Answers to Arthritis and Rheumatism: The Complete Conventional and Alternative Guide to Treating Chronic Arthritis by Anne Charlish. Reader's Digest Association 1999. ISBN 0762102470. Currently out of print, but second-hand copies available from online shopping websites.

New Medicine: How to Integrate Complementary and Conventional Medicine for the Safest and Most Effective Treatment by David Peters (editor). Dorling Kindersley 2005. ISBN 9781405302838. General book on complementary medicine. Good coverage both of using complementary alongside conventional medicine and of arthritis.

Diet and Arthritis: A Comprehensive Guide to Controlling Arthritis Through Diet by Gail Darlington and Linda Gamlin. Vermilion 1998 (new edition). ISBN 9780091816599.

Medicines and Healthcare Regulatory Agency (MHRA) – Herbal Medicines Advice for Consumers
www.mhra.gov.uk/Safetyinformation/Generalsafetyinformationandadvice/Herbalmedicines/index.htm



We're here to help

Arthritis Research UK is the charity leading the fight against arthritis.

We're the UK's fourth largest medical research charity and fund scientific and medical research into all types of arthritis and musculoskeletal conditions.

We're working to take the pain away for sufferers with all forms of arthritis and helping people to remain active. We'll do this by funding high-quality research, providing information and campaigning.

Everything we do is underpinned by research.

We publish over 60 information booklets which help people affected by arthritis to understand more about the condition, its treatment, therapies and how to help themselves.

We also produce a range of separate leaflets on many of the drugs used for arthritis and related conditions. We recommend that you read the relevant leaflet for more detailed information about your medication.

Please also let us know if you'd like to receive our quarterly magazine, *Arthritis Today*, which keeps you up to

date with current research and education news, highlighting key projects that we're funding and giving insight into the latest treatment and self-help available.

We often feature case studies and have regular columns for questions and answers, as well as readers' hints and tips for managing arthritis.

Tell us what you think

Please send your views to:
feedback@arthritisresearchuk.org

or write to us at:

Arthritis Research UK, Copeman House, St Mary's Court, St Mary's Gate, Chesterfield, Derbyshire S41 7TD

A team of people contributed to this booklet. The original text was written by Dr Peter Fisher, who has expertise in the subject. It was assessed at draft stage by physiotherapist Joe McVeigh, and representatives of the Complementary and Natural Healthcare Council. An **Arthritis Research UK** editor revised the text to make it easy to read, and a non-medical panel, including interested societies, checked it for understanding. An **Arthritis Research UK** medical advisor, Kate Gadsby, is responsible for the content overall.

Get involved

You can help to take the pain away from millions of people in the UK by:

- volunteering
- supporting our campaigns
- taking part in a fundraising event
- making a donation
- asking your company to support us
- buying products from our online and high-street shops.

To get more **actively involved**, please call us on **0300 790 0400** or email us at enquiries@arthritisresearchuk.org

or go to

www.arthritisresearchuk.org



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calls charged at standard rate

www.arthritisresearchuk.org

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