

# Clinical Link Newsletter



Created and Distributed by the Mary Pack Arthritis Program

A Newsletter for health professionals working with people with arthritis

September 2008

## Editor's Message

The Mary Pack Arthritis Program is continuing to look at how we can improve services and resources to you, our ACE members. To that end, I would like to thank everyone who participated in the recent ACE member's survey. Your feedback will be invaluable to us as we look at where and how to best focus our energies. This edition of the Clinical Link Newsletter will outline the new initiatives that have already been implemented, as well as the winner of the \$35 Chapters gift certificate. In our upcoming edition in December, I will provide a summary of the survey findings, as well as a description of what our ACE team will do to address your suggestions for improving our services to you.

Paul Adam, Rheumatology Liaison & Outreach Services Coordinator [Paul.Adam@vch.ca](mailto:Paul.Adam@vch.ca)

## Welcome to our Newest ACE Members

A very warm welcome to all of our new PT and OT ACE members who attended this past spring's Assessment and Management of Rheumatic Diseases course in Vancouver. Our new PT members include:

Valerie Gray - Vancouver  
Natalie Grant - Vancouver  
Karen Skarpnes - Prince Rupert  
Richard Rafuse - Port Hardy  
Karen Newby - North Vancouver  
Niamh Gilfeather-Bailey - Vancouver  
Heather King - North Vancouver  
Lucas Arione - Richmond  
Sue McInnis - Enderby  
Shirin Kazemi - Vancouver

And our newest OT members include:

Charlene Wohlgemuth - Vanderhoof  
Harjit Jassal - Maple Ridge  
Wilfredo Valdez - Kitimat  
Jennifer Cullen - Enderby  
Linda Warwick - Port Moody

Stephanie Chung - Richmond

This year we also had one OT attendee from Alberta and another from the Northwest Territories.

## Clinical Tips

Jackie Harris, OT at our Penticton Arthritis Service, offers the following useful clinical tips.

**New Products** - Are you looking for an alternative to Birkoplast for toe props? Oto Sil is cheaper, has a longer curing time so it is easier to use than Birkoplast, and it is available in a variety of colours. Oto Sil is available from [www.otohearing.com](http://www.otohearing.com). Although the product is designed for ear moulds, it also works well for the toes. Another good product to consider is Minado MC by Etonic. This leather shoe has good extra depth and comes with a rocker sole. Finally, many hardware stores now carry a water-based contact cement that is available in either blue

or white. Although there is little difference between the two, the white is less noticeable. This product can be used when fabricating splints or orthotics and is as good as, if not better than the smelly, regular contact cement.

**Holding Playing Cards** - Do you know someone who has trouble holding onto cards while playing a game (especially bridge, when there are 13 cards to hold)? A patient at the Mary Pack Arthritis clinic let us know that she uses an unused scrubbing brush turned upside down on the table in front of her to display her cards, which allows her to keep her hands free. A great little idea.

**Splinting Tip** - When using adhesive Velcro, the 'hook' piece often peels off of the splint after many uses because it tends to get lifted by the 'fuzz' when the strap is undone. To help with this problem, a Micro Jet heat gun can be used to melt the two or three most distal rows of hooks. Once melted, the strap can no longer pull on the distal edge of Velcro hook so it will stay in place longer. It is important to shield the rest of the Velcro from the heat using a piece of thermoplastic so that the rest of the Velcro still catches.

If you have any questions that you would like answered, please contact [Paul.Adam@vch.ca](mailto:Paul.Adam@vch.ca). We'll get you an answer right away, but if you're willing, we'll also share the Q&A with others in the next newsletter.

## **Provincial Arthritis Services Document**

I have recently emailed everyone a copy of the Provincial Arthritis Services document. This document outlines inpatient and outpatient adult and pediatric services and resources that are offered throughout the province by the Mary Pack Arthritis Program and other providers. In addition, information on admission criteria how to refer clients to these services is also included.

I will be updating this document as services and programs change and will keep the most recent copy available on the Arthritis Resources Guide of BC web site ([www.argbc.ca](http://www.argbc.ca)) in the practitioner resources under News Archives.

## **News, Resources and Upcoming Events from The Arthritis Society**

### **BC Events Calendar**

<http://www.arthritis.ca/local%20programs/bcyukon/events/default.asp?s=1>

The Take Charge: Early Intervention for Osteoarthritis and Arthritis Self Management Program are being offered in many communities throughout BC this autumn, please use the link above to access these dates and locations.

In addition The Arthritis Society is offering a range of workshops and education sessions on the following topics:

- Understanding Arthritis
- Living Well with Ankylosing Spondylitis
- Chronic Pain Management
- Living Well With Arthritis
- Living Well With Arthritis: Joint Protection
- Oh My Aching Back
- Healthy Eating and Weight Management
- Fibromyalgia
- My Feet Are Killing Me
- Core Stability
- Tips For Long Distance Travel

These workshops are available at several times and locations across BC. Please check out the TAS BC Events Calendar link above.

Do you have any particular expertise that you'd like to share with arthritis patients in your community. If so, please contact the TAS regional coordinator in your area:

North/Vancouver Coastal - Shona Reid - [sreid@bc.arthritis.ca](mailto:sreid@bc.arthritis.ca)

Fraser Region - Trish Silvester-Lee -  
[tsilvester-lee@bc.arthritis.ca](mailto:tsilvester-lee@bc.arthritis.ca)  
Interior/Okanagan - Trudy Battaglio -  
[tbattaglio@bc.arthritis.ca](mailto:tbattaglio@bc.arthritis.ca)  
Vancouver Island - June Painter  
[jpainter@bc.arthritis.ca](mailto:jpainter@bc.arthritis.ca)

The Arthritis Society can assist your efforts in a number of ways including providing presentation materials, making room arrangements, and advertising your speaking engagement.

### **New Clinical Handbook**

Occupational and Physical Therapy for Children with Rheumatic Diseases is a new handbook that was published earlier this year. This handbook was edited by two veteran Vancouver Pediatric Rheumatology Clinic health professionals, Gay Kuchta (Occupational Therapist) and Iris Davidson (Physiotherapist).

This handbook features over 230 full-colour images and reproducible resources for patients and their care providers, and is a valuable resource for health professionals working with children with arthritis. To view a sample chapter, visit

[www.radcliffe-oxford.com/books/samplechapter/2331/Kutch%20section%206-619de580rz.pdf](http://www.radcliffe-oxford.com/books/samplechapter/2331/Kutch%20section%206-619de580rz.pdf)

### **MPAP Annual Interdisciplinary Staff Day**

Twenty ACE members were able to attend our one-day interdisciplinary conference on the topic of, *What's New in Osteoarthritis*. Sessions at this event on June 5th included:

Future of Biomarkers in OA Diagnosis and Prognostication - Dr. John Esdaile

The Impact of Obesity on OA - Dr. Simon Huang  
Lifetime Physical Activity, Malalignment and OA - Mr. Chuck Ratzlaff

Upper Limb Surgery: Future Innovations and Common Complications - Dr. Erin Brown

Health Literacy in BC: Current Status and Suggestions for Improvement - Dr. Irving Rootman

If you were unable to attend this event, podcasts of 4 of the 5 speakers are now available on the Arthritis Resources Guide of BC website at:

[www.argbc.ca/practitioner/professional-resources/podcasts](http://www.argbc.ca/practitioner/professional-resources/podcasts)

All 5 Powerpoint presentations are available at:

[www.argbc.ca/practitioner/professional-resources/presentations](http://www.argbc.ca/practitioner/professional-resources/presentations)

### **Changes to the Travelling Occupational Therapy Service (TOTS) Clinics**

This autumn we will be providing our first TOTS clinic in Lillooet and our second clinic in Quesnel. It is planned that both communities will continue to receive TOTS clinics over the foreseeable future. As we now have ACE-trained occupational therapists in Golden and Revelstoke, these communities are no longer receiving TOTS clinics. We are hoping to add Prince George in the Spring of 2009, as well as resuming service in Williams Lake. Physician referrals are required for patients to be seen at these clinics.

### **ACE Members Survey**

A big THANK YOU to the 42 individuals who completed a survey questionnaire. Your feedback will be invaluable to us as we look at our improving the services that we provide to you. Stayed tuned for the December Clinical Link Newsletter for a summary of what you told us and how we are planning on acting on your recommendations.

Everyone who completed a questionnaire and who emailed me to say that they had done so had their name entered in a draw for a \$35 Chapters gift certificate. And the winner is Harjit Jassal, occupa-

tional therapist on the arthritis program at Ridge Meadows Hospital in Maple Ridge - your gift certificate is in the mail and you should receive it in the next few days.

## Useful Citations

American College of Rheumatology Ad Hoc Group on Use of Selective and Nonselective Nonsteroidal Antiinflammatory Drugs. Recommendations for use of selective and nonselective nonsteroidal antiinflammatory drugs: an American College of Rheumatology white paper. *Arthritis & Rheumatism (Arthritis Care & Research)* August 2008;59(8):1058-1073.

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### **Change in the Mary Pack Arthritis Program PT ACE Coordinator Position**

Marie Westby is returning to the Mary Pack Arthritis Program as the PT ACE coordinator now that she is wrapping up her doctoral studies. I would like to thank Susan Carr, who has done a wonderful job in

this role over the past couple of years. For anyone who wants to get in contact with Marie, she can be reached at [Marie.Westby@vch.ca](mailto:Marie.Westby@vch.ca) or by calling (604) 875-4111 ext. 68834.

### **What We Know About Behaviour Change - Maintaining Change**

This is the final article in a 4-part series on behaviour change. I'm certain that most of us at one point in our lives or another have had the experience of starting an exercise program or a diet with the best of intentions, only to find that after several weeks or months of hard work that we 'fall off of the wagon', so to speak. This is not unusual and there are several reasons why it occurs both to ourselves and our patients.

What I have written in each of the previous articles on the stages of behaviour change is that at each stage, an individual typically weighs the pros or benefits of doing the behaviour vs. the barriers or negative consequences of doing the behaviour. At many of the earlier stages, these decisions are based on perceptions or fears - i.e., what the individual thinks the benefits and barriers are going to be. At the maintenance stage of behaviour change, the primary barriers focus on the actual or experienced negative consequences.

For example, a person may think that it is going to be relatively easy to avoid the temptations of cakes and cookies when starting a new diet, but it is only in undertaking the diet that the real difficulties in doing so become apparent. This difference between real and imagined difficulties can sorely test one's motivations. Other aspects of reality that can get in the way of maintaining behaviour change are a lack of time, the negative impact of one's disease (e.g., participating in exercise can increase arthritis pain at the onset), or negative feedback from family or friends.

Changes in routine can also make it difficult to maintain the change in behaviour. For example, a vacation away from home or a flare of one's disease can cause a temporary lapse in behaviour and once a

lapse occurs it is easy to become discouraged and to lose one's motivation to get back to doing that exercise program. Another barrier that can lead to frustration is if the goal that is set is too high and thus one feels a sense of failure in not being able to achieve one's goals.

Obviously, it is important to help our clients to set realistic goals that align with personal preferences. Work with your client to identify what the goal is, when it will be done, who can he or she do it with, and where will it be done. Once the goal is set, it can be helpful to ask your client how confident he or she is in achieving that goal, and if not confident, to use that as an indicator that the goal may be unobtainable. Self-confidence in one's goals is also important, as it has been shown that people are more likely to be tenacious in fulfilling their goals, despite obstacles, if they are confident that they can achieve that goal.

It is also helpful to reinforce the understanding that lapses are normal and that rather than becoming disheartened to use the lapse as an indicator that one needs to problem solve what went wrong and to adapt what might cause future lapses.

Finally, contingency planning can be another useful tool to equip clients with the knowledge that they need to manage the problems that can arise in carrying out a new behaviour - e.g., how should your client change her exercise program if her arthritis flares up.

### **Health Literacy - Useful Resources**

At our MPAP Interdisciplinary Staff Education day in June, Dr. Irving Rootman presented a thought-provoking talk that provided many suggestions on how to identify people with low health literacy, as well as tips on how to make verbal and written communication more clear. I would encourage you to check out the podcast of his presentation and/or his Powerpoint presentation, both of which are avail-

able on the Arthritis Resources Guide of BC web site.

He also included in his presentation a list of useful resources that I would like to outline here, as well as some other health literacy resources that I have since found.

Canadian Council on Learning [www.ccl-cca.ca](http://www.ccl-cca.ca)  
Canadian Public Health Association - publications on health literacy  
[www.pls.cpha.ca/en/publications/pubs.aspx](http://www.pls.cpha.ca/en/publications/pubs.aspx)  
National Center for the Study of Adult Learning and Literacy - Health Literacy Environment of Hospitals and Health Centers [www.ncsall.net/?id=1163](http://www.ncsall.net/?id=1163)  
American Medical Association Foundation - Health Literacy Manual for Clinicians  
[www.ama-assn.org/ama/pub/category/8115.html](http://www.ama-assn.org/ama/pub/category/8115.html)  
Clear Language and Design Online Thesaurus  
[www.eastendliteracy.on.ca/ClearLanguageAndDesign/thesaurus/](http://www.eastendliteracy.on.ca/ClearLanguageAndDesign/thesaurus/)  
Dictionary of Plain Language  
[www.techcommunicators.com/pdfs/style-diction.pdf](http://www.techcommunicators.com/pdfs/style-diction.pdf)  
The A-Z of Alternative Words - Plain English Campaign [www.plainenglish.co.uk/alternative.pdf](http://www.plainenglish.co.uk/alternative.pdf)

### **Arthroscopic Surgery for OA Knee Provides no Additional Benefit to Optimized Physical and Medical Therapy**

A recent article in the New England Journal of Medicine describes a randomized, controlled trial that compared arthroscopic surgery with optimized physical and medical therapy to treatment with optimized physical and medical therapy on its own. In this study of 178 patients with moderate-to-severe osteoarthritis of the knee, 92 patients were assigned to receive surgery and 86 patients were in the control group receiving only optimized physical and medical therapy. The conclusion of this study is that arthroscopic surgery of the knee provided no additional benefits to optimized physical and medical therapy.

The reference for this article is as follows:

Kirkley A, Birmingham TB, Litchfield RB et al. A randomized Trial of arthroscopic surgery for osteoarthritis of the knee. *The New England Journal of Medicine* September 11, 2008;359(11):1097-1107.