Spinal Osteoarthritis Doesn’t Have to Be Limiting — Here’s How to Manage It

by KRYSTINA OSTERMEYER

What to Know About Osteoarthritis of the Spine

According to the CDC, an estimated 54.4 million U.S. adults – 22.7% of the adult population – have been told that they have some form of arthritis, such as osteoarthritis, rheumatoid arthritis, lupus, gout, or fibromyalgia. That estimate is expected to rise to 78 million (26%) by the year 2040.

Arthritis and other rheumatic conditions are a leading cause of disability; 1 in 25 working adults between the ages of 18 and 64 have some type of work limitation due to arthritis. Arthritis also limits activity; 44% of those with arthritis had “arthritis-attributable activity limitations” between 2013 and 2015.

Though osteoarthritis of the spine can be limiting, there are ways to make your life more comfortable and not quite as restrictive.

What is Osteoarthritis of the Spine?

Osteoarthritis is the most common form of arthritis. It is also called degenerative joint disease and is also what we attribute to arthritis that occurs with aging.

Osteoarthritis (OA) occurs when the cartilage that surrounds a joint begins to break down or wear away. This causes changes to the bone. Eventually, the bone will begin to breakdown, causing pain and swelling. Sometimes OA can also cause osteophytes, better known as bone spurs.

When OA develops in the spine, the cartilage and discs between the vertebrae break down. Not only does pain occur, but the bone spurs can place pressure on the nerves of the spine, which can cause numbness and weakness of the extremities.

Causes of Osteoarthritis of the Spine

OA is caused when the cartilage between bones breaks down. There are various risk factors that increase the likelihood of getting OA:

- **Age:** Advancing age increases the likelihood of the development of OA.
- **Joint injuries and overuse:** Frequent movements, such as bending, can cause repetitive stress to a joint; a joint injury can also increase the likelihood of the development of OA.
- **Gender:** Women are more likely than men to develop OA.
- **Obesity:** Carrying extra weight places additional stress on the joints, particularly joints that carry weight, such as the hips and knees. Obesity also could have metabolic effects that increase the likelihood of the development of OA.

- **Genetics:** If you have a family member with OA, you are more likely to develop it.
- **Race:** Certain populations are less likely to get OA, such as some Asian populations.

When younger people get OA of the spine, it most typically occurs due to an injury or a genetic defect that involves the cartilage.

Symptoms of Osteoarthritis of the Spine

Common symptoms of OA in general include:

- Pain of the joint
- Stiffness of the joint
- Decreased range of motion and flexibility
- Swelling of the joint

Symptoms that are specific to the spine include:

- Numbness in the extremities
- Weakness in the extremities
- Back pain that is relieved by lying down

Treatment of Osteoarthritis of the Spine

There is no cure for OA. Generally, treatment is conservative and combines a combination of therapies, progressing to more advanced therapies if other treatments fail. The goals of treatment are typically to life a healthy lifestyle while reducing pain and improving function.

Weight Loss

Weight loss is indicated if the person with OA is overweight or obese. As discussed, carrying extra weight places additional pressure on the joint. Reducing weight will, therefore, relieve some of the pressure on the joint.

Once the weight is lost, care should be taken to maintain the weight loss. You may consider asking your healthcare provider for a referral to speak with a registered dietitian (RD) for assistance.

Exercise

Exercise is indicated for most people with OA. Not only does getting active assist with weight loss, but it can also:

- Increase flexibility
- Increase strength
- Improve cardiovascular health
- Improve overall blood flow
- Make it easier to perform activities of daily living

Though your specific exercise program may need to be modified to your specific needs, most exercise programs should include the following:

- **Strength training.** These exercises improve the strength of the muscles that surround the joints and can be performed with body weight, resistance bands, hand weights, or even everyday items such as soup cans.
- **Aerobic exercise.** These exercises improve cardiovascular strength and include walking, biking, and swimming.
- **Range-of-motion exercise.** These exercises improve flexibility.

Adjunctive Therapies

Adjunctive therapies that you may choose to utilize include:

- Acupuncture
- Massage
- Supplements
- Heat and cold compresses
- Transcutaneous electrical nerve stimulation (TENS) unit

Medication

Your healthcare provider may recommend using over the counter (OTC) medications to relieve the pain and swelling associated with spinal OA. Examples include:

- Acetaminophen (Tylenol)
- Aspirin
- Naproxen (Aleve)
- Ibuprofen (Motrin or Advil)

Topical medications may also be applied. Examples include Ben-Gay and Aspercreme. These medications may have short-term relief of pain.

Prescription medications may be prescribed when pain is severe. Mild opioids may be prescribed. Epidural spinal injections, using a steroid, can calm inflammation and pain.

Surgery

Spinal surgery may be performed when other treatment modalities have failed.

OA of the spine can cause spinal stenosis, which is a narrowing of the spinal column. When OA of the spine causes an impairment of bladder and bowel function, this is considered a medical emergency and surgery will likely be required imminently.