

Arthritis: What Should be Done after the Year of Bone and Joint Decade?

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Arthritis is among the most common chronic diseases and comprises the leading cause of disability worldwide. Osteoarthritis (OA) and rheumatoid arthritis remain the major problems. The greatest incidence of arthritis and other musculoskeletal diseases is expected to be high in most of the developing countries including Thailand.¹ (Fig 1) In the COPCAORD study, the prevalence of symptomatic OA of the knees in the Thai rural area was 11.3%.² This number was equal to the worldwide estimation of 9.6% in men and 18% of women aged >60 years.³ Longer life expectancy and a geriatric population have led to an increasing incidence of OA. The World Health Organization (WHO) estimates that OA will be the fourth leading cause of disability by 2020⁴.

The healthcare and economic burden of arthritis has been recognized by the United Nations (UN) and WHO, therefore, the Bone and Joint Decade 2000-2010 has been subsequently endorsed. This is a well-known,

non-profit organization comprised of National Action Networks in 60 countries around the world. Its mission is to raise public awareness about arthritis, provide knowledge and improve the quality of life for all affected individuals worldwide. The Bone and Joint Decade Foundation in Thailand, has taken an active role participating in this network since 2000. Many useful events in collaboration with other health organizations including the Thai Rheumatism Association have ensured that a number of Thai patients with arthritis and their caregivers could be aware of the vast support network available to them. However, most healthy Thai individuals were not interested in participating in these activities. To achieve the primary goal of the UN and WHO, the scope of "Prevention" should be more focused than "Treatment". To be successful in "Prevention", we need more alertness and participation from healthy Thai individuals.

The arthritis problem is more complicated than simply the disease itself, but also the irrational drug behavior of the Thai population. The self-medication rate is very high in Thailand. Many kinds of medications can be obtained over-the-counter without any prescription.⁶ Nonsteroidal anti-inflammatory drugs (NSAIDs) and steroids are two main pain-killer medications to relieve arthritis used by the community drug stores. Over-consumption of medications is another problem supported by the 2002 Thai Drug System Report.⁷ It was found that Thailand's drug expenditure was 50-100 percent higher than in other developed countries including the United States, Canada and Japan.⁷ In a survey presented in 2007, the patients per physicians ratio in Thailand was 2,700.⁸ This number implied the inadequacy of health care in our country and may be one of the main reasons for self-medication. Because the risk of gastrointestinal and cardiovascular adverse effects associated with NSAIDs in the geriatric population who frequently suffer from OA, the indirect cost from treatment complications is expected to be increased. The steroid ingredient in herbal medicine widely available in our country may make preexisting osteoporosis in geriatric patients with OA worse. To limit the total medical expenditure in OA patients, both direct and indirect costs should be considered.

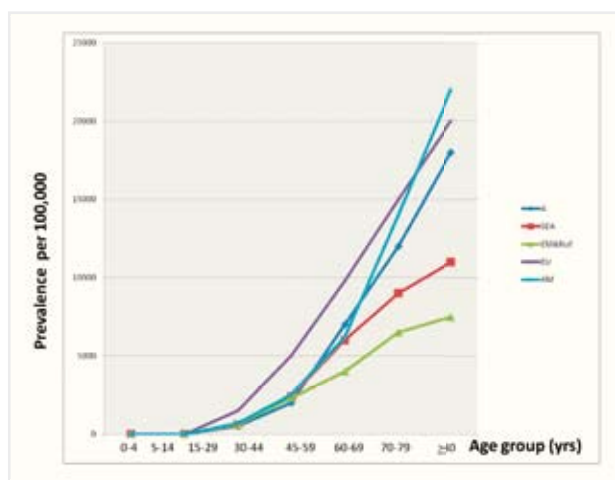


Fig 1. Prevalence of osteoarthritis of the knee, by age group and region.

(A regions = developed countries in North America, Western Europe, Japan, Australia and New Zealand. AM = developing countries in the Americas. EM & NAF = countries in the Eastern Mediterranean & North African regions. EU = developing countries in Europe. SEA = countries in the South-east Asia.) Adapted from Symmons D, et al.⁵

The burden of arthritis in Thailand is high and is expected to be more significant in the next decade and arthritis contributes substantially to poor health-related quality of life, disability and increased direct and indirect medical costs. The year of Bone and Joint Decades will end in the year 2010, but the primary aim of the UN and WHO still cannot be reached or even closed. The magnitude of the arthritis problem seems to be bigger than the one we thought it was. Health care providers should be sufficient and efficient to take care of Thai patients. All medications should be prescribed by physicians and should not be bought over-the-counter. Herbal medicines should be controlled for their effective ingredients and safety by the Thai Food and Drug Administration, Ministry of Health. More active participation from the healthy Thai population is essential. This proactive role cannot be achieved if there is no support from the Thai government. To make the health care reform "All for Health and Health for All" become real, is it the time to promote the arthritis problem as one of our National Agenda or Health policy?

REFERENCES

1. Lidgren L. The bone and joint decade and the global economic and healthcare burden of musculoskeletal disease. *J Rheumatol Suppl.* 2003 Aug;67:4-5.
2. Chaiamnuay P, Darmawan J, Muirden KD, Assawatanabodee P. Epidemiology of rheumatic disease in rural Thailand: a WHO-ILAR COPCORD study. *Community Oriented Programme for the Control of Rheumatic Disease. J Rheumatol.* 1998 Jul;25(7):1382-7.
3. Murray CJ, Lopez AD, Black R, Mathers CD, Shibuya K, Ezzati M, et al. Global burden of disease 2005: call for collaborators. *Lancet.* 2007 Jul 14;370(9582):109-10.
4. Woolf AD, Pfleger B. Burden of major musculoskeletal conditions. *Bull World Health Organ.* 2003;81(9):646-56.
5. Symmons D, Mathers C, Pfleger B. Global burden of osteoarthritis in the year 2000. In: Geneva: World Health Organization; 2003.
6. Charupatanapong N, Rascati KL. Self-medication practice in Thailand. *J Pharmacoepidemiol.* 1992;2:13-34.
7. The Committee of Drug System Analysis of Thailand. *Thai Drug System.* Bangkok: The Agricultural Co-operative Federation of Thailand, Ltd; 2002 July. [Thai].
8. The Patients Per Doctor Map of the World. 2007. Available from: <http://bigthink.com/ideas/21237>.