

# Taking control of your **Osteoarthritis**

A practical guide to treatments, services and lifestyle choices



# How can this booklet help you?

“This information is based on the latest research and recommendations, and has been reviewed by Australian experts in the field”

This booklet is designed for people who have osteoarthritis.

It will help you understand your condition so that you can better manage your symptoms and continue to lead an active and healthy life.

This booklet offers information and practical advice to help you:

- understand what osteoarthritis is and what it means for you
- work with your healthcare team to reduce symptoms
- choose activities that are appropriate to your situation
- understand how your medicines can help in the short and long term
- find support to cope with the emotional and lifestyle impacts of osteoarthritis

The information inside is based on the latest research and recommendations. It has also been reviewed by Australian experts in the field of arthritis to make sure the contents are current and relevant to your needs. So go ahead — take control of your osteoarthritis!



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# Understanding osteoarthritis

“Osteoarthritis is the most common form of arthritis, affecting nearly 1.5 million Australians”

## What is osteoarthritis?

Osteoarthritis is a condition where cartilage — the spongy, protective tissue in your joints — becomes thin and loses its ability to stretch and bend.

When cartilage becomes thin or is completely worn away, the bones in your joints can start to rub against each other. This leads to the symptoms of osteoarthritis: pain, swelling, stiffness and, in some cases, a feeling that the joint might lock or give way.

Osteoarthritis is the most common form of arthritis, affecting nearly 1.5 million Australians. It can appear at any age, but tends to occur more commonly in women and in people aged over 40 years.

Many people have osteoarthritis without noticing any symptoms. For those people who do experience symptoms, the most common sites are the fingers and the joints that support the weight of your body — your spine (backbone), hips and knees (see the diagram).

Osteoarthritis is not the same as osteoporosis — a condition where the bones become thin and are more likely to break — although sometimes people can have both conditions.



## What causes osteoarthritis?

The cause of osteoarthritis is largely unknown. Different factors can speed up or worsen cartilage loss in different people. Sometimes osteoarthritis is caused by an injury or overuse of the joint, which may result from particular types of work or sport.

Problems with the hips or knees may be worsened by being overweight, which can put too much strain on these joints. A family history of osteoarthritis or other joint problems may make you more likely to develop the condition, especially in the fingers. Growing older also increases the likelihood of developing osteoarthritis.

Whatever the cause, the main problem in osteoarthritis is the damage to your cartilage which can result in pain and stiffness.

“Growing older increases the likelihood of developing osteoarthritis”

“While there is no ‘cure’ for osteoarthritis, early and ongoing treatment can help reduce symptoms”

## How will osteoarthritis affect me?

Osteoarthritis affects different people in different ways. For many people, osteoarthritis will not cause significant problems, or can be easily managed with exercise and medication. Your symptoms may not worsen over time, but sometimes the condition will slowly progress, leading to increased pain and reduced function.

If not managed effectively, the symptoms of osteoarthritis can limit your ability to complete normal tasks or to move about, reducing independence and enjoyment of life. However, only a relatively small number of people have to give up work or home duties on account of their osteoarthritis.

While there is no ‘cure’ for osteoarthritis, early and ongoing treatment can help reduce symptoms and maintain your ability to use the affected joints. Medical management includes medicines, joint injections and lifestyle advice — these are discussed in detail in the following sections. Joint replacement surgery may be an option for people who have significant damage to their joints, particularly their hips and knees.



## How will my doctor diagnose osteoarthritis?

Doctors assess many factors to help them decide whether a person has osteoarthritis. Your GP or rheumatologist may:

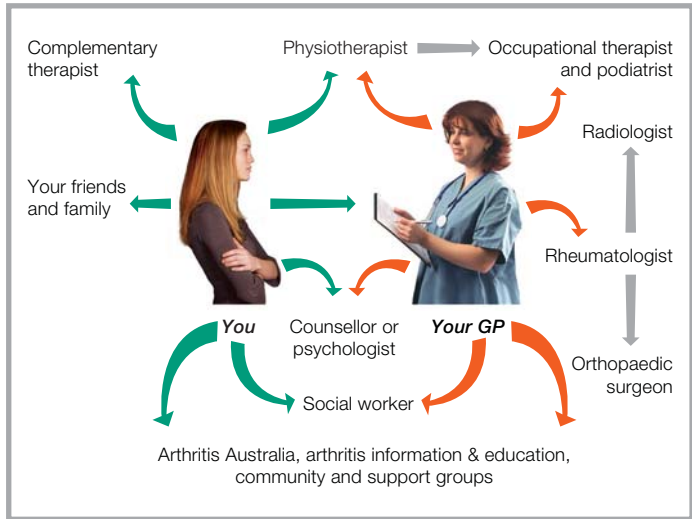
- talk to you about your symptoms, including where and when you feel joint pain, and whether the pain feels better or worse when you move
- ask if there is any family history of joint problems, and whether or not the sore joint has been previously damaged at work or during sport, for instance
- carefully examine your sore joints, which may include moving them and feeling or listening for any signs that the bones are rubbing against each other
- send you to a radiologist for an x-ray of the affected joints
- drain some fluid from your joint if it is swollen and send a sample of the fluid for analysis

“Doctors assess many factors to help them decide whether a person has osteoarthritis”

# Who can help?

“The best approach is a team approach to manage osteoarthritis”

Osteoarthritis can be effectively managed. The best approach is a team approach, which involves you and your healthcare professionals together with support from family, friends and community organisations.



## How can you help?

Remember, you are the most important member of your healthcare team. By understanding your condition and how to stay on top of it, you can carry on living a normal life. Osteoarthritis doesn't have to get in the way of working, driving, sex, pregnancy or parenting. Believing that you can improve your condition isn't just wishful thinking: it actually helps reduce your symptoms. People who believe that they are in control of their osteoarthritis — and become actively involved in managing it — report less pain and better function than people who are less involved.

Understand how your treatments will help and how to get the most out of them. Your healthcare team can address your concerns and provide practical advice. Contact your State/Territory Arthritis Office on 1800 011 041. They can provide information and introduce you to support groups, exercise programs and other arthritis management services.

“Understand how your treatment will help and how to get the most out of them”

# Working with your GP

“If you don't have a regular GP, speak to your local practice or medical centre”

## How can my GP help?

Your GP is an important partner in managing your osteoarthritis. They can also help you to access other services and health professionals. Your GP will probably make the initial diagnosis of osteoarthritis and may refer you to a rheumatologist if required.

Once your osteoarthritis is fully assessed, your GP or rheumatologist may prepare a care plan to manage the services and treatments you require. They may prescribe medicines and other lifestyle changes to improve your symptoms, and will also see you regularly to check on your treatment and its progress.

Your GP may employ a practice nurse, who may coordinate your care and access to services.

## How do I find a GP?

If you don't have a regular GP, speak to your local practice or medical centre.

## When should I see my GP?

- You should visit your GP least every 3–4 months once your treatment is underway
- Visit your GP immediately if you notice a sudden worsening in symptoms or disability, or if other joints become affected



# Seeing a rheumatologist

## How can a rheumatologist help?

**Rheumatologists** are doctors who specialise in problems of the joints such as osteoarthritis. Your GP may refer you to a rheumatologist if:

- the cause of your symptoms is unclear
- your symptoms are not improving or are worsening
- you require an injection into your knee joint
- you and your GP are unsure if you will require surgery
- you and your GP wish to seek advice about newer treatments

While your GP may have prescribed some medicines to reduce pain, the rheumatologist might also recommend other medications to control your symptoms.

Because every person's osteoarthritis is different, your specialist will probably select different treatments over time to find the best one for you.

## Your GP or rheumatologist may also refer you to

- other therapists for further advice on appropriate exercise and activities
- an orthopaedic surgeon to assess your need for additional treatment such as joint replacement surgery

“Because every person's osteoarthritis is different, specialist may select different treatment over time to find the best one”



“GPs may refer you to a rheumatologist and stay in touch to coordinate your care”

## How do I find a rheumatologist?

Your GP can refer you to a rheumatologist — they will then stay in touch to coordinate your care

- Your GP may recommend a rheumatologist
- You can also visit the Australian Rheumatology Association website at [www.rheumatology.org.au](http://www.rheumatology.org.au) to find a rheumatologist (but you will still need a referral from your GP)

## When should I see my rheumatologist?

- Your rheumatologist may initially want to see you every 2–3 weeks to work out how well you are responding to treatment
- You may also need to return to the rheumatologist if your symptoms continue despite your treatment, or if the pain or loss of function in your joints causes major interference in your life

# Other health professionals

## How can other therapists help?

Many people with osteoarthritis visit a **physiotherapist** (physio). These practitioners will show you exercises to do at home to strengthen and stretch the muscles in your joints and improve your function. They will also show you pain relief techniques to use at home, including the use of heat packs and walking sticks, to keep your joints as flexible and pain-free as possible.

You might also visit an **occupational therapist** (OT), or they may come to your home or work. OTs can provide advice on how to do things in a way that reduces joint strain and pain. They may also suggest changes to your house, like adding handrails, or aids, such as splints, that can make life easier and protect your joints.

A **podiatrist** can help take care of your feet. They may find ways to reduce the pain in your toes, knees or hips, perhaps by providing shoe inserts or advice on footwear.

See the section on **Seeking support** if you would like information on health professionals who can help you to cope with the emotions you may be feeling, such as psychologists and counsellors.

“People with osteoarthritis may visit a physiotherapist, occupational therapist or a podiatrist”



“You may be referred to one or more therapists soon after your diagnosis of osteoarthritis”

## How do I find a health professional?

- Your GP or specialist can provide a referral, or you can contact a private therapist directly
- For physiotherapists, visit the Australian Physiotherapy Association website ([apa.advsol.com.au](http://apa.advsol.com.au)) or look under ‘Physiotherapist’ in the Yellow Pages
- For occupational therapists, visit the Australian Association of Occupational Therapists website ([www.ausot.com.au](http://www.ausot.com.au)) or look under ‘Occupational Therapist’ in the Yellow Pages
- For podiatrists, visit the Australasian Podiatry Council website ([www.apodc.com.au](http://www.apodc.com.au)) or look under ‘Podiatrist’ in the Yellow Pages

## When should I see a health professional?

- You may be referred to one or more therapists soon after your diagnosis of osteoarthritis by your GP or rheumatologist
- Ask your GP or rheumatologist about seeing a health professional if you notice your physical condition or abilities change

# Healthy moves for your joints

While healthcare professionals can offer a range of treatments for your osteoarthritis, there are many things you can do too. The Australian Government's Healthy Active website provides straightforward suggestions for good eating and activity levels — visit [www.healthyactive.gov.au](http://www.healthyactive.gov.au).

Quitting smoking is an important first step to help your joints — call the Quitline on 13 18 48 or visit [www.quitnow.info.au](http://www.quitnow.info.au). Talk to your doctor or other care team members before making changes.

## Eating well

What foods are good or bad for osteoarthritis?

There is very little evidence that particular foods are good or bad for people with osteoarthritis — there is certainly no diet proven to 'cure' it. Eating a balanced diet that is low in saturated fat, sugar and salt, but high in fruit, vegetables and cereals is good for most people. This can help you lose weight (if required), which may reduce the strain on your joints — especially your hips and knees.

The Australian Government publishes a useful guide to healthy eating called Food for Health — you can find it at [www.nhmrc.gov.au/publications/synopses/\\_files/n31.pdf](http://www.nhmrc.gov.au/publications/synopses/_files/n31.pdf).

“Eating a balanced diet that is low in saturated fat, sugar and salt, but high in fruit, vegetables and cereals is good for most people”



“Regular physical activity helps to reduce pain, strengthen muscles, maintain joint function and improve sleep and overall health”

For help in working out the best things to eat, you can ask your GP to refer you to a dietitian or contact one directly via the Dietitians Association of Australia — call (02) 6163 5200 or visit [www.daa.asn.au](http://www.daa.asn.au).

## Fish oils

Current research suggests eating foods rich in Omega-3 fats can help reduce inflammation in some forms of arthritis. While these effects have not been studied in osteoarthritis and are modest compared with medicines, omega-3 fats do not have serious side effects. Foods rich in omega-3 fats include oily fish like sardines and salmon, plus canola oil and walnuts. If you cannot eat these foods regularly, daily fish oil supplements that provide around 2.7 g of omega-3 (EPA plus DHA) may be a useful substitute.

## Keeping active

What exercise should I be doing?

Regular physical activity benefits everyone, whether or not they have osteoarthritis. It helps to reduce your pain, strengthen your muscles, maintain joint function and improve your sleep and overall health.



Inflammation in your muscles, tendons and other tissues may make it harder for you to stand up straight, turn and bend, or take a deep breath. Your physio can suggest suitable exercises to stretch and strengthen your muscles. These exercises will improve your posture and help to maintain flexibility. You should aim to do this stretching program every day, or at least five times per week.

In addition to your stretching exercises, it is important to do at least 30 minutes of moderate exercise on most days of the week for your general fitness. You can do this either in one go or break your exercise into smaller efforts (for instance, three 10-minute or two 15-minute blocks per day).

Activities that are likely to be good for your fitness include walking, swimming, water exercise, low-impact aerobics, and riding a bike or exercise bike. Your physio can also suggest specific exercises and stretches that are appropriate for your situation.

Ask your physiotherapist to create a special exercise program you can do at home or at the local gym or swimming pool.

Ask your State/Territory Arthritis Office about appropriate exercise programs in your local area, including community groups, swimming pools, sports centres or gyms who run programs specifically for people with arthritis.

“Physios can suggest specific exercises and stretches that are appropriate for your situation”



“It’s normal to feel some pain in your muscles when you start an exercise program”

## What if it hurts to exercise?

The level and type of exercise you will be able to do varies from person to person — while some people can aim to keep or improve their fitness through exercise, others may be aiming to remain mobile.

It’s normal to feel some pain in your muscles when you start an exercise program, or change to different types of activity. However, if pain feels unusual or severe, or lasts for more than 2 hours after you have stopped an activity, it is probably best to avoid or change that activity. Applying a heat or cold pack to a sore joint may ease swelling and/or pain.

Try to plan your exercise for times when you are experiencing the least pain — generally when you are least tired and your medicine is having maximum effect.



# Making the most of medicines

## Will medicine cure my osteoarthritis?

At present there is no 'cure' for osteoarthritis. Some people may not need medicines for their osteoarthritis, or may only need to use medications at times when symptoms are troublesome. However, for people whose osteoarthritis is constantly painful or is slowly worsening, finding the right medicines can help reduce pain, maintain the function in your joints and improve your quality of life.

## What is the right medicine for me?

All medicines have risks and benefits, so before you start treatment talk to your doctor about how each medicine should be helping you and what risks it might have. Make sure your doctor knows about any other health problems that you or your family members have, as this can help them choose the best medicine for you.

You should also make sure that you understand what side effects the medicine might have, including what to do or who to speak to if you experience any unwanted effects from your medication. Many arthritis medicines need to be taken regularly to work properly and should not be stopped suddenly — talk to your doctor if you have concerns about side effects, safety or cost.

“For people with constantly painful or slowly worsening osteoarthritis, finding the right medicines can help reduce pain, maintain the function and improve quality of life”

“For stronger pain, a group of medicines called NSAIDs can help”

Each person responds differently to arthritis medicines, which means that you will need to work with your GP or rheumatologist to find the best medications and doses for you. This can take time, but by finding the most effective medicines with the least side effects you can hope to really make a difference in controlling your osteoarthritis.

Your condition may also change over time, including which joints are affected, how much pain or disability you experience, and whether you have symptom-free periods. This means that you may need to change or add medicines over the course of your treatment — you may not be on the same medicine forever.

### How will the medicines help?

Many people with osteoarthritis find that their pain can be managed by regular use of pain-relieving medicines (analgesics) such as paracetamol. You may also find short-term relief from analgesic creams that can be rubbed into the painful joints.

For stronger pain, a group of medicines called NSAIDs (anti-inflammatory drugs) can help, and they also reduce swelling and stiffness. A certain type of anti-inflammatory drugs called COX-2 inhibitors are effective in reducing arthritis pain and may be less likely to cause stomach problems. If pain is severe, strong pain-relieving medicines such as opioids may be used.

## What side effects do these medicines have?

To understand more about your medicines and any risks or side effects that they may have, read the Consumer Information Medicine (CMI) leaflet that is available from your doctor or pharmacist. CMI leaflets provide easy to understand information including what the medicine is for and how it is used; things to consider before using the medicine; and possible side effects and what to do if they occur. Speak to your GP or specialist, especially if you have concerns about the long-term effect of medicines, how they might affect your pregnancy plans (whether you are male or female), or whether they should be taken during pregnancy or breastfeeding.

The Australian Rheumatology Association and Arthritis Australia publish medicine information sheets. Call the Arthritis Information line on 1800 011 041 for copies or visit [www.rheumatology.org.au](http://www.rheumatology.org.au) or [www.arthritisaustralia.com.au](http://www.arthritisaustralia.com.au).

“CMI leaflets provide easy to understand information about risks or side effects of medications”

# What other treatments can help?

“Tell your GP and specialist about other treatments you are thinking about using”

## What other treatments can I take to ease osteoarthritis?

There are many promises made for non-medical ‘cures’ or treatments to ease arthritis — some of these may work but many have not been proven to help. Glucosamine and/or chondroitin supplements may help to reduce symptoms of osteoarthritis, particularly by relieving pain. However, because glucosamine is often made from prawn or lobster shells, it should be avoided by anyone with an allergy to shellfish.

Acupuncture has been shown to help reduce knee pain in osteoarthritis.

Because herbal, homeopathic, Ayurvedic or Chinese medicines may affect the treatments prescribed by your doctor, please tell your GP and specialist what other treatments you are thinking about using.



## Are joint injections helpful to 'fix' joints?

Apart from replacing the affected joint by surgery, there is no treatment that can restore the lost cartilage in your joints. However, some joint injections may help reduce symptoms and improve movement, particularly in the knee. An injection of corticosteroid medication into the joint during a 'flare' can provide short-term pain relief and help you return to an exercise program or normal activity.

The rheumatologist may also inject a liquid called hyaluronan, which helps to 'lubricate' your joint to stop the bones rubbing against each other. Joints should be treated gently for a few days after each injection, but otherwise the risk of infection or damage to the joint is relatively small.

“An injection of corticosteroid medication into the joint during a 'flare' can provide short-term pain relief”

## When should I think about joint replacement surgery?

For people whose osteoarthritis causes them constant pain or significantly limits their movement despite treatment and exercise, joint replacement surgery may be an option. This means having surgery to remove your own joint (usually a knee or hip) and replacing it with an artificial one made of metal and hard-wearing plastic.

If you feel that you need to have a joint replaced, talk to your doctor who can refer you to an orthopaedic surgeon (a doctor who operates on joints). The surgeon will assess whether joint replacement is likely to work for you, including how fit you are and any other medical conditions that might rule out surgery.

Your orthopaedic care team will also talk to you about possible risks associated with joint replacement surgery, as well as what you can do to give your new joint the best chance of long-term success.

After recovery from the surgery — which usually takes a few months — the new joint should result in a less painful and more mobile joint for at least 10 years.

# Seeking support

## Why me?

It's perfectly normal to wonder why you have developed osteoarthritis, and to feel angry, sad, frightened or confused about it. By taking control of your osteoarthritis and working with your healthcare team, you can approach the condition with a positive attitude. However, sometimes the condition can get you down, especially if pain, stiffness or disability are affecting your everyday life.

It may also feel as though people around you — even close friends or family — don't understand what you're going through.

## Who can help?

There are many people who can help you deal with the emotional side of osteoarthritis. Your first step is to try to talk honestly with your partner, parents or children about how you feel. Give them a chance to talk too — they might have worries or feel that they don't know enough about your osteoarthritis and how it is affecting you.

Visit your GP if you are worried that unwanted feelings are too strong or have been there for a long time. Your GP may be able to suggest ways of coping, or may prescribe medicines if you are especially worried or depressed.

“Your first step is to try to talk honestly with your partner, parents or children about how you feel”



“There are many resources available to help people with osteoarthritis”

They may also refer you to a counsellor or psychologist, who can talk to you about your worries, feelings and moods, then suggest practical ways to work through them.

If you want to contact a psychologist directly, call the Australian Psychological Society on 1800 333 497 or visit [www.psychology.org.au](http://www.psychology.org.au).

### What other assistance is available?

There are many resources available to help people with osteoarthritis. Your doctor may put you in touch with a social worker, who can help explain the financial and health services that are available to you. These can include any pensions or allowances that you might be entitled to, plus any financial assistance such as Health Care Concession Cards or low-cost treatment programs.

Your local council, community health centre, community group or religious organisation may also offer programs that include practical advice, activities, social networks or just someone to talk to. There are also Independent Living Centres in each state that provide advice on products and services, including aids and devices, that can help with day-to-day activities — look under ‘independent living’ in your local White Pages.

Contact your State/Territory Arthritis Office to find out about their wide range of resources, management programs and support groups: call 1800 011 041 or visit [www.arthritisaustralia.com.au](http://www.arthritisaustralia.com.au).

## What about information from websites?

The web can be a useful source of information and support. However, not everyone who puts information on the web is a qualified health practitioner. Some organisations make unrealistic promises in order to sell their products.

Treatment options and practices from overseas may also not be relevant or approved in Australia. Always check information from the web with a trusted member of your healthcare team. The Australian Government's HealthInsite ([www.healthinsite.gov.au](http://www.healthinsite.gov.au)) is an excellent starting point for web searches, as every site that HealthInsite links to has been checked for quality and accuracy of information.

“Always check information from the web with a trusted member of your healthcare team”



# Glossary of terms

Analgesic	an-al-jee-zik	A medicine that helps relieve pain, such as paracetamol.
Cartilage	car-ta-lij	The spongy tissue inside your joints that helps stop the bones rubbing against each other.
Corticosteroid	core-tick-o-ster-oyd	A type of medicine that is very effective in reducing symptoms in the joints.
COX-2 inhibitor	cox-too	A group of medicines which reduce pain and inflammation, and may be suitable for some people as an alternative to NSAIDs.
Dietitian	die-et-ish-un	A health professional who can recommend what foods you should and shouldn't eat.
NSAID	en-sayd	A group of medicines known as non-steroidal anti-inflammatory drugs. These can reduce inflammation, swelling and joint stiffness.
Occupational therapist	OT	A health professional who looks at your activities at home or work, then suggests changes or devices to make everyday life easier on your joints.
Opioids	O-pee-oyds	A type of medicine used for severe pain.
Osteoarthritis	os-tee-o-are-thry-tiss	A condition where the cartilage between your bones wears away, causing pain and reduced function in affected joints.
Osteoporosis	os-tee-o-pore-o-siss	A condition where the bones become thinner or weaker, which may cause them to break more easily.
Physiotherapist	fizz-ee-o-ther-a-pist	A health professional who uses treatments to keep your joints mobile, and can suggest exercises and devices for you to use at home.
Podiatrist	po-die-a-trist	A health professional who can suggest changes to the way you walk or provide special shoe inserts, to take the strain off your joints and reduce pain.
Rheumatologist	roo-ma-tol-o-jist	A doctor who is a specialist in treating problems of the joints such as osteoarthritis.

# Useful resources

## Australian resources

For access to quality online information about rheumatoid arthritis, start at HealthInsite

[www.healthinsite.gov.au](http://www.healthinsite.gov.au)

For advice on healthy eating and appropriate exercise, visit Healthy Active

[www.healthyactive.gov.au](http://www.healthyactive.gov.au)

For advice on quitting smoking, contact the Quitline

[www.quitnow.info.au](http://www.quitnow.info.au)  
Ph: 13 18 48

To find a specialist, contact the Australian Rheumatology Association

[www.rheumatology.org.au](http://www.rheumatology.org.au)  
Ph: (02) 9256 5458

To find a physiotherapist, contact the Australian Physiotherapy Association

[apa.advsol.com.au](http://apa.advsol.com.au)  
Ph: 1300 306 622

To find an occupational therapist, contact the Australian Association of Occupational Therapists

[www.ausot.com.au](http://www.ausot.com.au)  
Ph: (03) 9415 2900

To find a podiatrist, contact the Australasian Podiatry Council

[www.apodc.com.au](http://www.apodc.com.au)

To find a dietitian, contact the Dietitians Association of Australia

[www.daa.asn.au](http://www.daa.asn.au)  
Ph: (02) 6163 5200

To find a psychologist, contact the Australian Psychological Society

[www.psychology.org.au](http://www.psychology.org.au)  
Ph: 1800 333 497

## International resources

The public area on the website of the American College of Rheumatology contains many useful resources

[www.rheumatology.org/public](http://www.rheumatology.org/public)

The UK Arthritis Research Campaign also provides a wide variety of information for people with arthritis

[www.arc.org.uk](http://www.arc.org.uk)

Please keep in mind that some issues and treatments from overseas may not be relevant in Australia.



### My contact details

My name:

Telephone:

### My GP

Name:

Telephone:

### My specialist

Name:

Telephone:

### My support team

Name:

Telephone:

Name:

Telephone:

### My medicines

Name	Dosage	Instructions



## Arthritis Australia

- Arthritis Australia is a not-for-profit organisation that provides support and information for all Australians affected by arthritis
- Contact your State/Territory Arthritis Office to find out about the range of awareness and education programs, support services and resources available

**Freecall anywhere in Australia: 1800 011 041**

**[www.arthritisaustralia.com.au](http://www.arthritisaustralia.com.au)**

### **Arthritis ACT**

Level 2B Grant Cameron Community Centre  
27 Mulley Street Holder ACT 2611  
PO Box 4017 Weston Creek ACT 2611

### **Arthritis New South Wales**

Unit 1.15 32 Delhi Rd  
North Ryde NSW 2113  
Locked Bag 2216 North Ryde NSW 1670

### **Arthritis Northern Territory**

6 Caryota Court  
Coconut Grove NT 0810  
PO Box 452 Nightcliff NT 0814

### **Arthritis Queensland**

1 Cartwright Street  
Windsor Qld 4030  
PO Box 2121 Windsor Qld 4030

### **Arthritis South Australia**

118-124 Richmond Rd  
Marleston SA 5033

### **Arthritis Tasmania**

127 Argyle Street  
Hobart Tas 7004  
GPO Box 1843 Hobart Tas 7001

### **Arthritis Victoria**

263-265 Kooyong Road  
Elsternwick Vic 3185  
PO Box 130 Caulfield South Vic 3162

### **Arthritis Western Australia**

17 Lemnos Street  
Shenton Park WA 6008  
PO Box 34 Wembley WA 6913



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