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# SP667-Arthritis Foundation Self Help Program - Take Control of Your Arthritis With Exercise

The University of Tennessee Agricultural Extension Service

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#### Who Can Participate?

This program is designed specifically for people with arthritis. Anyone who routinely experiences joint pain, stiffness and/or limited range of motion is invited to attend. The program is also appropriate for anyone who wants to learn joint-safe exercises.

### Who Leads the Program?

You will learn from Family and Consumer Sciences Extension educators who have successfully completed the Arthritis Foundation Training Program. They are certified and approved by the Arthritis Foundation to teach this program.

The instructors match the class routines to the fitness levels of the participants, so that those needing modified or seated movements are just as welcome as those who desire a more intense routine. The joint-safe exercises are demonstrated by the instructors.

To learn more about this program or about arthritis, visit
University of Tennessee Extension's Health and Safety Web site
at http://fcs.tennessee.edu/healthsafety/ashp.htm
or the Arthritis Foundation's Web site at
http://www.arthritis.org.

### How Do You Sign Up?

Signing up is easy. Complete the registration form and mail it with your check or money order to your county Extension office. Or call the office to register and drop the registration form and fee off at the office.

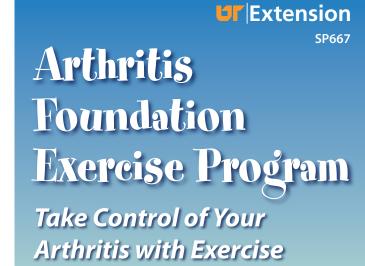
#### Where and When is the Next Program?

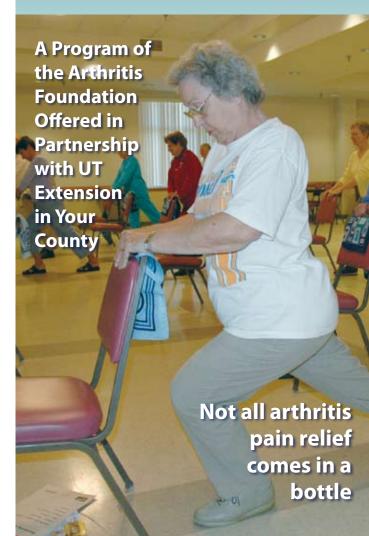
THE UNIVERSITY of TENNESSEE

Family and Consumer Sciences

6-0247 3M 5/06 R12-5310-079-002-06

Programs in agriculture and natural resources, 4-H youth development, family and consumer sciences, and resource development. University of Tennessee Institute of Agriculture, U.S. Department of Agriculture and county governments cooperating. UT Extension provides a cutal proporties.







## Can People with Arthritis Exercise?

Yes! For years there has been the myth that people with arthritis should not exercise because it would injure their joints. Today, the medical community agrees that moderate physical activity can improve your health without hurting your joints. Developed by physical therapists specifically for people with arthritis, this program provides low-impact, joint-safe exercises that will keep your joints flexible, muscles strong and help reduce the pain and stiffness associated with your arthritis. With less pain, you will be able to reduce your need for pain medication.

#### What are the Benefits?

The Arthritis Foundation Exercise Program offers several advantages over generalized community exercise programs. It is designed specifically for persons with arthritis, taking into consideration the pain, fatigue and decreased strength and motion that often accompany the disease. The program includes accommodations for individual limitations and does not encourage activities that might aggravate, rather than relieve, arthritis symptoms. To assure safe performance of the exercises, instruction about basic principles of arthritis exercise, correct body mechanics and joint protection are included.

Benefits of participating in the program include:

- Reduced pain
- Improved overall health status
- Increased flexibility and range of motion
- Increased energy
- Better, more relaxed sleep
- Improved outlook
- Decreased depression
- Decrease in doctor and emergency room visits

## How is the Program Structured?

This exercise program is designed to help you feel better with your arthritis. The 60-minute sessions typically meet one to two times per week. The program includes range of motion, muscle strengthening and/or endurance exercises, body mechanics lectures and relaxation techniques. The routines can be quickly learned to easily practice at home. The low-impact class may be taken either standing or sitting.

While the Arthritis Foundation Exercise Program provides participants with a fun, safe exercise program to stay fit, it should not replace treatment prescribed by your doctor or physical therapist.



#### **Registration Form**

| last name                 |             |
|---------------------------|-------------|
|                           |             |
| first name                |             |
| street                    |             |
| city                      | _ state zip |
| dity                      | _ state zip |
| work telephone number     |             |
|                           |             |
| nome telepnone number     |             |
| e-mail address (optional) |             |
|                           |             |
| course name               |             |
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| dates                     | fee         |
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| method of payment         |             |
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| date                      | receipt no  |
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