

SMART MOVES FOR YOU

21 small, easy steps to help you better manage your osteoarthritis pain.



GET YOUR
HEALTH CARE
PROVIDER'S OK

The information presented in the *Smart Moves Program* is not intended to replace the advice of your health care provider. Before starting the exercise portion, please get your health care provider's approval.

If you only had to do one simple thing to feel better with osteoarthritis (OA), would you do it? Of course. Now, how about doing one simple thing each day over the next 21 days so that you effectively change the way you manage your OA—the way you cope, the way you view the condition, the way you live your life. Research has shown that it takes 21 days to change or begin a habit. So start here.

This simple program gives you the tools and the inspiration to take more control. Greet each day with expert* advice that will help you gain a sense of control over your osteoarthritis pain, maintain your motivation, and discover ways to comfortably engage in the daily activities you love. And you won't be going it alone: At arthritis-smartmoves.com, you can join people just like you sharing their OA struggles and triumphs along the way. Make this the day you commit to a more vibrant life for today and beyond!

Game Plan: define your goals • shift your thinking • find ways to move more • start a journal

The first week of the **SMARTMOVES** Getting Started 21-Day Program is about creating a clean slate. As you set out on a positive approach to managing your osteoarthritis (OA), you'll identify challenges—whether it's coping with osteoarthritis pain or negative thinking—and begin exploring simple, mindful techniques that will help you discover your own motivational powers. Beginning a journal is one important step. Another is taking a closer look at your social circle to be sure you have supportive friends on your side. You'll also set off on an easy-to-follow walking program.

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GETTING STARTED

We're glad you've decided to try the Smart Moves Program. The information presented here should not take the place of your doctor's advice. Before you begin, it's a good idea to share the plan with your health care provider and talk about the best course of action for your own OA condition. He or she may prescribe a combination of lifestyle changes along with the best prescription options for you. The key to finding what's right for you is having a conversation with your health care provider.

CREATE YOUR PERSONAL OSTEOARTHRITIS JOURNAL

There are several good reasons to keep a journal. It can help you:

- Better track your osteoarthritis (OA) symptoms
- Chart your pain levels
- Determine, along with your doctor, your best OA treatment course
- Reduce stress
- Get in touch with your inner self

“Keeping a journal builds awareness of what kind of thoughts are playing in your head,” says Caroline Adams Miller*, author of *Creating Your Best Life: The Ultimate Life List Guide*. “With that awareness, you can teach yourself to stop and see things differently.”

Today's Action Plan: In the space provided, or in a portable notebook, write down everything that you are thinking and feeling as it relates to your osteoarthritis. Regularly rate your pain levels using a scale of 0 to 10, with 0 being a pain-free day and 10 being the worst you've experienced, suggests Helen Grusd, PhD, a clinical psychologist in Beverly Hills, California, who specializes in chronic pain management. Also record key events during your day, both the bad and the good. Finally, keeping track of your daily exercise can be helpful in gauging how certain activities can help you deal with your OA.

Above and Beyond: Go Public

Journaling is a private affair. Another option—a more public one—is to blog. “With blogging you don't just receive the benefits of journaling, but you'll have others responding, offering suggestions,” Adams Miller says. “This kind of journaling also builds relationships and expands your support network.” Blogs are free and easy to set up on sites such as wordpress.com and blogger.com. At arthritis-smartmoves.com, you can follow the journeys of inspirational women who have osteoarthritis.



Use your journal as a quick way to keep track of your OA pain levels. Also record the good things in your day.



Writing my first journal entry feels _____

Today I'd also like to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I accomplished what I set out to do today [].

START A WALKING PROGRAM

Exercise isn't just about managing the pain and stiffness of osteoarthritis (OA). It's also one of the keys of an overall healthy lifestyle, helping you manage your weight, keep cholesterol levels in check, improve your blood pressure, and stave off heart disease and diabetes, among other things. "If you haven't been exercising at all and have OA, the simplest thing to do is walk," says A. Lynn Millar, PT, PhD, author of *Action Plan for Arthritis*. Remember, you're not working against OA, but actually improving it by exercising. Be sure to get your doctor's OK before beginning any exercise program.

Today's Action Plan: With your doctor's OK, commit to taking one 10-minute walk a day, every day. For variety, try different routes (day 1 on local roads; day 2 on a high school track; day 3 in a park or at a beach if possible; day 4 indoors, at a mall or on a treadmill, etc). Pump it up: At the end of the week, if the 10 minutes have felt good, speed up for 2 minutes in the middle of your walk.

Pace Yourself: "Starting at too intense a level may only leave you discouraged," says Millar. Instead, begin easy and work up to a moderate pace, which means you can carry on a conversation with some effort, but without huffing and puffing.

Best Foot Forward: Be sure you have decent walking shoes before you start. You don't need major bells and whistles, but avoid thin-soled shoes or running shoes in favor of well-cushioned walking sneakers.

Q: If my knees hurt from my osteoarthritis, isn't taking it easy better than exercising?

A: Absolutely not, says Millar. Our instinct, when we're feeling pain, is to immobilize the affected part until it feels better. But with osteoarthritis, moving is the best medicine. It's when you don't move that your joints become stiff and sore, which can make the OA pain worse. Soon enough, you're stuck in a vicious circle. Break the cycle by moving, every day. "Movement sends nutrition and lubrication to the joints," says Millar. Why walking in particular? It's a functional exercise: We all have to walk every day, get up from chairs, get in and out of cars, and so on. Starting a daily walking regimen will stave off further deterioration, help you shed pounds or keep you from gaining weight that aggravates your condition, and can raise your spirits.



On my first walk today I felt _____

Today I'd also like to _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I accomplished what I set out to do today [].



Walking and other gentle forms of exercise can help ease osteoarthritis pain. Doing it with friends makes it more fun.

ADJUST YOUR PERSPECTIVE

“Osteoarthritis (OA) may change your life, but it doesn’t have to control how you live,” says Helen Grusd, PhD, a clinical psychologist who’s worked extensively with patients suffering from chronic OA pain. It’s common for these patients to experience anger, bargaining, depression, and eventually acceptance, she says. Knowing that you’ll likely experience these feelings can help you arrive at acceptance and enable you to more effectively manage your pain.

Today’s Action Plan: Accepting means shaking off any shock and disbelief and no longer thinking that life is unfair or mulling over the life you lived before OA. “At some point, you’ll have to mourn the loss of some of the health of your body, accept it, and figure out how it redefines you,” Grusd says. “You’ll reach acceptance when you say to yourself, ‘This is what I have. Now what do I do about it?’” However, accepting that you’ll have to make some lifestyle changes doesn’t mean you’re giving in to the osteoarthritis pain—it just means you’re adjusting your perspective to deal with it. Assessing and accepting also means not dwelling on things you can’t do; it means figuring out what you want to do from now on. “Think of it like a boat at sea,” Grusd suggests. “You have no control over a stormy sea, but you can adjust your sails.”



Above and Beyond: Challenge Yourself

Acceptance means you’re mentally ready to manage osteoarthritis, and that’s a great place to start. For some, it may also help to think of the pain as a challenge. “When you look at pain as a challenge instead of a threat, you’ll boost your attitude and keep it from stopping your world,” Grusd says.

To recast your osteoarthritis pain as a challenge, Grusd recommends thinking back to some adversity you have previously successfully overcome and tapping into that mind-set. Visualization can also help. For example, it may help to think of the pain as an opponent in a boxing ring and your attitude as a mighty prizefighter. “Say that to yourself over and over and you’ll find that you’ll have control over your thoughts and how the pain affects you,” Grusd says.



My ideas for redefining my life with OA are _____
_____.

Today I’d also like to _____
_____.

Today I was able to _____
_____.

I’d like to ask my health care provider _____
_____.

On a scale of 0 to 10, I’d rate my OA pain today as a [].

I accomplished what I set out to do today [].

OA doesn’t mean an end to what you love. Instead, you can find ways to adapt and continue doing what you enjoy most, like playing with your grandchildren.



One goal for many people with OA is to be able to continue pursuing their passions.

SET GOALS

Goals give you something to look forward to and help you see progress. When you're focused on something you want to accomplish, the pain of osteoarthritis (OA) can take a backseat to your newfound motivation. "One of the most important things to remember when creating goals related to medical conditions is not selling ourselves short," says *Creating Your Best Life* author Caroline Adams Miller. "We thrive and are proudest when we go outside our comfort zone."

Today's Action Plan: After discussing your goals (especially exercise-related) with your doctor, use your journal to track those goals. Maybe you want to be able to push your grandchild on a swing, pick up your knitting needles again, or be able to spend a weekend sightseeing. Flip forward a few pages to set reminders about working toward your goal. And when milestones are reached, be sure to note it—with a few exclamation points! When you set goals that are a little more difficult, one trick that will help you stay on course is to share your goal with friends. When other people know what you're shooting for, they'll help you reach it, and spreading the word will help you realize that you've made a commitment.

Above and Beyond: Give Yourself Deadlines

Creating deadlines along the way to your goal can help you gauge progress, celebrate successes, and make sure you reach what you've set out to do. Whether it's being able to walk comfortably and proudly down the aisle at your child's wedding or participate in a charity walk, you can set up a schedule for yourself. This mixes short-term goals with long-term goals. The way to do that: Get out a calendar that'll be displayed in a place you'll see every day. Mark the event day, then count the days between today and the event. Halve the number of days you have until the event and mark that date on the calendar. Then create quarters. Then, no matter what your goal is, you can chart your progress. A good rule of thumb: by about the three-quarter mark, you want to do a practice run and be able to complete most of what you're aiming to do.



My goals for the short term are _____

My goals for the longer term are _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].
I will continue to work toward this goal [].

STRETCH TO STRENGTHEN

Stretches improve your flexibility and increase your range of motion. And better flexibility and range of motion mean that you can perform a variety of tasks that many people take for granted but that those with osteoarthritis (OA) may find difficult, such as buttoning a shirt or starting a car.

Today's Action Plan: To your daily routine, add either or both of these movements (with your doctor's approval), created by Ellen Saltonstall, a New York City-based certified yoga instructor and coauthor of *Yoga for Arthritis*. Stretch only as far as feels comfortable.

Wall Dog Pose: Stand facing a wall (you can also use a sturdy chair back or table). Reach your arms out and place palms against the wall, shoulder-width apart, fingers pointing up. Pressing your palms into the wall, walk your feet back a bit, take a deep breath in,



Stiff joints may make any form of exercise seem unbearable. That's where gentle stretches can help. **Check with your doctor before beginning a stretching program to make sure your chosen regimen is right for you.**

and bend forward from the hips. Your back should be straight, your neck relaxed and long, eyes looking down to the floor. Lengthen your entire spine as you press against the wall with your hands, and reach your hips back. This is a mild, gentle pose, but it's a good choice for either before or after a walk, because it stretches your hamstrings (the backs of your thighs), which can become tight.

Cobra Pose: Lie facedown on a mat or folded blanket. Keep your legs together, the tops of your feet on the mat. Place your hands about four inches to the sides of the middle of your chest, palms flat, elbows and shoulders lifted away from the floor. Inhale, and slowly raise your chest/upper body as high as you feel comfortable (as shown below), keeping your palms on the floor. Hold for a moment, breathing, then exhale as you slowly lower down. This gently stretches and strengthens the spine and opens up the muscles in your chest, which often get tight.

Q: Is yoga a smart idea for someone with osteoarthritis?

A: "Yoga provides a full range of movement done slowly and carefully," says Saltonstall. The flexibility and strength that result may help reduce pain in arthritic joints. "The more flexible you become, the more you enjoy moving—not just when you do yoga, but in daily life," Saltonstall says. If you're considering yoga, look for Anusara or Iyengar styles, both of which emphasize alignment. To find classes near you, go to iyat.org or inyaus.org.



My goals today are _____

Trying these two stretches felt _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].

I will continue to work toward this goal [].



It's helpful to have several different ways to distract you from your OA pain. Reading is one example.

BUILD A PAIN-MANAGEMENT TOOLBOX

Think of managing your osteoarthritis (OA) as being a master mechanic—with the right tool for the right job, you can handle anything. Because pain is subjective, relief can vary from individual to individual. And OA pain can be a sneaky adversary.

“Knowing your pain levels and being in tune with your body allows you to keep it from escalating,” says Beverly Hills–based clinical psychologist Helen Grusd, PhD. “When it starts passing the midway point, about at what you’d rate as a 6, then you should start working to bring it down. Like dealing with a fever, it’s harder to manage pain when it’s higher. It’s easier to start as soon as you feel it start increasing.”

Also, a relief trick that works one day may be less effective the next day. That’s why Grusd recommends having a variety of techniques at your disposal—just like that mechanic’s toolbox.

Today’s Action Plan: At a time when your osteoarthritis pain level is low (see Day 1 for the scale), brainstorm some ways to get your mind off your aches, and take steps to have them at the ready at the next sign of discomfort. Distraction is a primary tool Grusd has often suggested to her patients. Watching a funny movie, listening to favorite music, taking a bubble bath, reading a chapter in a book, going for a walk, and calling a friend are all good examples. And because OA pain relief is related to feeling in control, another technique Grusd recommends is taking charge over some other aspect of your life. Do something that will make you feel like you’re on the ball. A couple of suggestions: organize a girls’ night out, or download all those pictures from your camera. Another way to push away pain is through guided imagery, which uses visualization and suggestion. For example, with the help of a live or recorded guide, the patient might visualize osteoarthritis pain as a ball that’s slowly shrinking, which may diminish the effect of the pain. A study found that those who used such guided imagery had a significant reduction in pain and mobility difficulties after completing a 12-week program.



My goals today are _____

_____.

My personal OA pain-management toolbox will include _____

_____.

Today I was able to _____

_____.

I’d like to ask my health care provider _____

_____.

On a scale of 0 to 10, I’d rate my OA pain today as a [].

I reached my goal for the day [].
I will continue to work toward this goal [].

SIZE UP SOCIAL SURROUNDINGS

Behaviors and moods are contagious. When you have osteoarthritis (OA), it's important to seek out people with positive attitudes, suggests Patience White, MD, vice president of public health for the Arthritis Foundation.

"In general, people who have a positive outlook on life tend to do better in dealing with their health problems than those who don't," she says. "If you think you are going to feel better, then chances are better that you will."

Having a positive attitude, she explains, often means you're more willing to become actively involved in self-management of your arthritis. "And that has been shown to improve arthritis outcomes," she says.

Unfortunately for some, the reverse can also be true. Hang around pessimists and you'll likely pick up those sentiments. "If you don't believe anything can make a difference in your treatment, then you'll be less likely to try self-management approaches that can improve your arthritis," White says.

Today's Action Plan: Determine who in your circle of friends and family may be bringing you down. How? Author Caroline Adams Miller recommends a quick test: ask someone if he or she can come up with three nice things that have happened through the day. If the person can't, that's a bad sign. Another clue: Pessimistic folks tend to think that luck is random and that bad things always happen to them.

Q: How do I deal with negative people who have to be in my life no matter what?

A: There are some negative people you can't just quit talking to (we don't get to choose family, after all). To help you keep looking on the brighter side of things, seek out a peer discussion group. Your doctor may know of some helpful support groups, or you can join the conversations online at arthritis-smartmoves.com. Another tip Adams Miller suggests: when you have good news, share it first with someone who's enthusiastic, not that person who's a black hole. You're more likely to get a positive boost from someone who's interested and excited, as opposed to someone who may rain on your parade. For additional information on managing your OA, visit fightarthritispain.org.



My goals today are _____

The best people for me to turn to when I need to lift my mood are _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].

I will continue to work toward this goal [].



Being able to rely on good friends who are upbeat and supportive can help you stay positive about your osteoarthritis.

Game Plan: move your body more • change your outlook • assess your physical surroundings • try something new

Now that the seeds of change have been planted and you have discussed your plans with your doctor, this week is about nurturing your new goals and finding ways to maintain motivation. Hopefully your daily walks have given you a boost of self-confidence. Use your osteoarthritis (OA) journal to record how you feel before, during, and after your walks. Then, if you find yourself coming up with reasons not to lace up your sneakers, you'll be able to glance at your notes and find the momentum you need to keep moving. Over the next seven days you'll also tap into your creative side and look for ways to make your home and work spaces more comfortable.

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MOVING FORWARD

As you continue the Smart Moves Program and become more active, check in with your health care provider and keep him or her updated on your progress and the goals you've set for yourself. Remember, the information in this plan should not take the place of talking with your doctor about how to manage and treat your OA. Opening the lines of communication with your doctor is key to narrowing in on the right course of treatment for you.

BUILD YOUR STRENGTH

The stronger your muscles are, the better protected your joints are from degeneration. Remember to check with your doctor before beginning any exercise program (including performing these specific moves), and consult with an exercise professional before starting a weight-training regimen. acefitness.org is a good place to find someone who's versed in the needs of osteoarthritis (OA) patients.

Today's Action Plan: With your doctor's OK, try these two simple, at-home moves, designed to build upper- and lower-body strength, says Kathleen Rothstein*, MA, an exercise physiologist at the Cleveland Clinic. Add these in after your daily walk, every other day. Be sure to stop if any exercise hurts.

Upper Body: Wall Push-Ups. Stand with feet a few inches apart, about a foot and a half away from a wall. Reach your palms out flat onto the wall at shoulder height and shoulder-width apart. Keeping your upper body in a straight line (imagine yourself as a plank from shoulders to feet) and your feet still, bend your elbows and press into the wall, then back up again, keeping your feet still. Start with one set of 8 repetitions; build up to 15.



Doing some form of exercise every day (once your doctor approves) can help you feel more in control of your OA.



My goals today are _____

Trying these two strength moves felt _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].

I will continue to work toward this goal [].

Lower Body: Chair Squats. Position a chair behind you (this is optional, but can be useful to "aim" toward as you squat). Keeping your back straight, bend your hips and knees and squat down and back, as though you're going to sit—but don't actually settle onto the chair—then come back up.

Tips: Be sure you're squatting back, and keep your knees in line with your heels. Also maintain good posture. As you squat, glance down; you should still be able to see your toes. Benefits: this will strengthen quads and hamstrings, which will protect your knees as you increase your walking program. Start with 8 repetitions; build up to 15.

Q: I have osteoarthritis; I can't lift weights, can I?

A: Yes, you can—and you should, says exercise physiologist Rothstein. Resistance training helps strengthen the muscles that support your joints. This kind of exercise works in two ways: first, any time you move your body, you help reduce joint pain and stiffness by easing inflammation. Second, it stabilizes joints. Because OA may challenge how much weight you can lift, it's best to have your doctor or a physical therapist outline an appropriate regimen for you.

MAKE COMFORT A PRIORITY

Everyday activities can contribute to pain, and you may not even realize it. What's a quick way to tell if your posture may be affecting your osteoarthritis (OA) pain? Concentration. "Pain impacts your memory and ability to organize things," says Michael Feuerstein, PhD, MPH, director of the clinical psychology program at the Uniformed Services University of the Health Sciences in Bethesda, Maryland. "If you're working on a document or even just sending an e-mail and you can't concentrate, that may be pain from poor posture."

Today's Action Plan: Check your work area, home, and car for comfort.

At work:

- Use a swivel chair to increase ease of movement.
- Check that there is a 1-inch gap between the edge of the chair and the back of your knees.
- Keep your feet flat on the floor; use a footrest if necessary.
- Use a chair with armrests; adjust height so arms are bent at a 90-degree angle.
- Take frequent breaks from sitting and typing or holding the phone.
- Use a lumbar pillow for support, and don't hunch your shoulders.

In the car:

- Use seat-belt extenders so you don't have to twist to latch them.
- Consider purchasing a remote ignition starter.
- Back yourself into the car by sitting first, then swinging your legs in (garbage bags placed on the seat can help).
- Use bigger side-view and rearview mirrors.

At home:

- Ask your pharmacist for a special tool designed to make it easier to open bottles.
- Keep step stools handy to help with reaching and to move from a sitting to standing position.
- Carry "mini" loads of laundry or trash, and keep the items close to your body.
- Push, don't pull, when sweeping or vacuuming.
- Take frequent breaks when cooking or doing repetitive motions.

Q: Can certain types of shoes affect osteoarthritis pain?

A: Unfortunately for the style-conscious, those high heels can increase the pressure on the part of the knee where OA pain often occurs by about 23%. This means that regularly wearing high heels could increase the pain from degenerative changes in the knee joint. Your best bet is to look for flatter shoes with flexible soles.



My goals today are _____

The key areas I need to rearrange include _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].

I will continue to work toward this goal [].



Modifying your work space and certain areas of your home can help you minimize your OA pain.



Look for fun ways to help you make big lifestyle changes. For example, gardening can help you get more exercise.

Today's Action Plan: To counteract that response, you might use a self-questioning technique that focuses less on the overall goal and instead emphasizes how you choose to achieve it. For example, if the goal is getting more exercise, you might concentrate on choosing ways you'd prefer to exercise rather than the whole notion of needing exercise. When you give yourself options, not mandates, you're more likely to follow through, Jensen says. Combine your favorite activities to create diversity. For example, exercise choices could include gardening (making a few extra trips to and from the potting shed) and biking with your spouse. Remember, whatever activity you choose, be sure to clear it with your doctor first.

Above and Beyond: Tap Into Core Values

Sometimes it's tough for people to become motivated, even when the goal is to become healthier and manage pain. Jensen recommends looking inward to help make these major changes. "Instead of just thinking about improving your health, think about all of the benefits you will obtain from exercise," Jensen says. "What will exercise help you do that is truly important to you?" Tap into your core values by asking yourself some questions such as: what's important to me about being a grandmother? Am I being a good model for others? How do my decisions affect others? What do I want to accomplish?



My goals today are _____

_____.

Some of the options I can give myself to meet my goals are _____
_____.

Today I was able to _____
_____.

I'd like to ask my health care provider _____

_____.

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].
I will continue to work toward this goal [].

INTERVIEW YOURSELF

As you're moving from setting your goals to implementing them, you may benefit from motivational encouragement. After all, making major lifestyle changes can be difficult, even when you're not dealing with osteoarthritis. As a next step, it may help to ask yourself basic motivational questions, suggests Mark Jensen, PhD, professor and vice chair for research of the department of rehabilitation medicine at the University of Washington. The type of self-questioning Jensen recommends is based on "Motivational Interviewing" and allows individuals to establish goals without feeling forced into a specific behavior. "It's human nature to want to feel a sense of freedom and choice," Jensen says. "When something restricts that freedom—even when it's in someone's best interest, such as losing weight—the immediate reaction is often to oppose the idea."

ADD TIME

OK with your 10-minute daily walk? Your goal this week is to add on time and intensity—but only with your doctor's approval. The reason: Guidelines from the American Council of Sports Medicine say that ultimately we all should aim for a minimum of 30 minutes of cardiovascular exercise (like walking) per day for overall good health. This plan will help you gradually increase your endurance.

Today's Action Plan: The timing of your walk will depend on your schedule, so you have two choices: either tack on 3 to 5 minutes per daily walk, or add a second, 5-minute walk at another time during the day.

Intensity Tip: Pick up the pace a bit, so that you're just about out of breath and are breaking a sweat.



As your body becomes accustomed to walking, you can gradually lengthen your jaunts and pick up the pace.

Feeling Bold?: Toward the middle of this week, break up your routine by speeding up even more. Warm up for the first couple of minutes, then go faster for a block or so (if you're walking in a park, pick a landmark, like a bench or tree, to aim for), then slow to your regular pace. Do this several times during each of your walks, increasing frequency and intensity as the week passes.

Above and Beyond: Adding Hills

On one or two of your daily walks this week, add in a short, easy hill. This will give you a boost in intensity without putting further stress on your joints. Try to plan your walk so that you reach an uphill slope on a street about midway through your walk. If it bothers you—that is, if you feel pain after your walk—skip it next time. Tip: if you go for an uphill climb, try to arrange your route so that you won't have to walk down the same hill; downhill walking puts more strain on your joints.



My goals today are _____

After walking an additional 5 minutes I felt _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].

I will continue to work toward this goal [].



Don't let your OA diagnosis stop you from trying something new. The cliché is true: It's never too late to learn.

DO SOMETHING NEW

It's time to step away from any preconceived limits of osteoarthritis (OA) to discover new worlds. "Think about something you have always wanted to do," says clinical psychologist Helen Grusd, PhD. "Doing something new means you're taking charge and control over aspects of your life that you can."

Today's Action Plan: Come up with a new skill you'd like to learn. Scour community boards at the public library or continuing education bulletins from the local college and see what grabs you—tackle a foreign language, take a flower arranging course, or pick up a hobby like bird-watching.

In doing so, you may be exposed to new social circles, which can provide additional support and be an incentive to get out and be active. Your new activities don't have to be long-term goals, like learning Japanese. You can experiment and even do something silly. Never tried golf? Take a lesson. Want to tap into your inner kid? Head to the playground, or grab a hula hoop for a few swirls.

Above and Beyond: Find Hidden Creativity

Talents you may have forgotten or never knew about can surface if you explore your creative side. Along with bringing something nice to hang on your wall, artistic endeavors may also help ease pain. Some studies of those suffering from chronic pain have found that concentrating on art can help diminish pain. "As you're managing your [OA], you may suddenly discover parts of yourself that you didn't know about," Grusd says. "Often, you'll slow down and [have] time to reflect and awaken aspects of yourself that lay dormant."



My goals today are _____

_____.

Things I've always wanted to try include _____

_____.

Today I was able to _____

_____.

I'd like to ask my health care provider _____

_____.

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].
I will continue to work toward this goal [].



Try photographing things that make you smile. You can add the pictures to your pain-management toolbox from Day 6.

CONDUCT A GRATITUDE INTERVENTION

As you're working to change your lifestyle, now would be a good time to think about all the little things that have gone right. When you're thankful in your daily life, you'll feel better about yourself and be more apt to stay positive and continue to be motivated. "Unhappy people tend not to notice when good things happen to them," says author Caroline Adams Miller. "A way to find that happiness is a gratitude intervention, where you actively acknowledge things you're thankful for."

Today's Action Plan: Ideally your daily journal includes things that you're thankful for. If it doesn't, start now. In addition, carve out a few minutes today to write a thank-you note to someone who's had a positive impact on your life. "You can always find something to be grateful for," Adams Miller says. "It may mean being more mindful of little things you may not have noticed before, but counting your blessings instead of burdens will make you feel more positive." She suggests writing a letter like this a few times a year.

Not too keen on writing letters? Another way to express thanks is with prayers of gratitude, which don't have to be religious. Sort of like deep meditation, saying or mentally reciting these prayers can help you achieve a state of happiness.

Above and Beyond: Explore Multimedia Happiness

Other forms of media can help you find your sunny side. For example, you could photograph things that make you happy during your day. Then, later, if you're not feeling as good, you can take a look at those photos for a boost. Adams Miller recalls one patient who created a quilt with each square representing something she'd overcome in her life.



My goals today are _____

Some people and things I'm thankful for include _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].

I will continue to work toward this goal [].

PUMP IT UP

As you head into Week 3, your goal is to increase your walking time and intensity.

Today's Action Plan: Walk at least 15 minutes, and add a second, 10-minute walk at another time of day. You'll want to now do this second walk every other day.

And don't forget about warming up and cooling down. "Spend the first several minutes of your walk at an easy pace to let muscles warm up," says author and physical therapist A. Lynn Millar, PhD. Same goes for the last few minutes, as a cool-down. Gentle stretches and range-of-motion moves (see Day 17 for specific moves) can be done before or after your walk.

Tip: If you've been doing strength-training moves too, good for you. Millar also recommends wall sits. This simple exercise will build leg strength for walking, and protect your knees from possible injury.



Jotting down your daily walks as an "appointment" in your calendar can help you keep the commitment you've made to yourself.

To do: Stand with your back against a wall, feet about two steps' distance from the wall. Slide down until you're in a sitting position, with your thighs parallel to the floor (no more than a 90-degree angle). Hold for a few seconds, then come up. The support of the wall means that you can hold the pose for longer than if you were doing ordinary squats. Do as many as you like, increasing repetitions as you feel stronger.

Above and Beyond: Picking Up the Pace

Our walking program is geared toward patients with osteoarthritis (OA) who are beginning an exercise routine. However, you may have been more active before your diagnosis, or kept up your exercise regimen since then. Or you may have found that you were able to accelerate through this program quickly, without adverse effects like pain. If that's the case for you, talk with your doctor about how you might adjust your exercise routine.



My goals today are _____

Adding in a second walk today felt _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].
I will continue to work toward this goal [].

Game Plan: prepare for the unexpected • get flexible • stay focused • interact with new people

Congratulations! You've made it past the midway mark. Now's a wonderful time to look back on the positive changes you've made. Glance through your journal and literally highlight the highs. Chances are your walks are getting longer and you feel a little better about yourself and your osteoarthritis (OA). Give yourself a much-deserved pat on the back before going back to some of the areas you'd still like to work on improving. As you head into the last stretch, we'll give you the tools you need to recover from any minor setbacks and keep your momentum moving in the right direction.

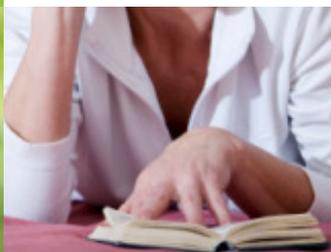
15

Brace for Daily Changes



16

Recover From Slipups



17

Stave Off Stiffness



18

Help Others, Help Yourself



19

Stay Upbeat



20

Keep Moving!



21

Maintain for the Long Run



CLOSER TO YOUR GOAL

As you begin the last week of the Smart Moves Program, we hope you've learned some tips about living more comfortably with your OA. We urge you to check in once again with your health care provider to review this plan and discuss your next steps. The information presented here is not intended to take the place of talking with your health care provider about how to manage and treat your OA. If you have any questions about your condition, or if you would like more information about lifestyle changes and prescription therapies that may help ease your osteoarthritis pain, talk to your doctor. Together, you can find what will work best for you.

BRACE FOR DAILY CHANGES

Kind of like the weather, the aches from osteoarthritis (OA) can vary from day to day. “With chronic pain, there’s often a persistent, sort of background level of pain—say at about a level 4—that varies a little up and down,” says Michael Feuerstein*, PhD, MPH. “You should be aware of the factors that make it better or worse.” Stress from work, family, or even irritations like driving in heavy traffic can make pain worse. These stressors trigger chemicals in the brain that can intensify pain. On the other hand, if you reduce stress, you may be able to better control the daily ebb and flow of pain.

Today’s Action Plan: One simple method of stress reduction that Feuerstein recommends is progressive muscular relaxation, which is like a form of meditation. First, find someplace quiet where you can be alone for about 10 minutes, lying down if possible. Then, beginning at your head and moving down, tense, then relax, different muscle groups. As you clench and release those muscles, breathe deeply. “This mindful meditation approach calms your mind from rushing and helps you rethink and not feel so overwhelmed,” Feuerstein says. Another method of knocking down stress is to deal directly with the source. For example, if there has been some sort of conflict with a friend, don’t let sour feelings fester. Resolve the situation as soon as possible to remove that stress, Feuerstein recommends.

Q: How do past experiences affect osteoarthritis pain management?

A: Your past behavior predicts how you’ll likely behave in the future. Your past brushes with pain can also be a source of strength. Think about a time you successfully dealt with pain; it can give you a road map to contend with the effects of OA, says Feuerstein. “If you can gain some sense of control of an aspect of your life that is being interfered with by pain, you can enhance your ability to deal with it,” Feuerstein says.



Because stress can trigger OA pain, it’s good to have ways to relax and refocus. Mindful meditation is one way to relax.



My goals today are _____

After trying this relaxation technique I felt _____

Other ways I can relax include _____

Today I was able to _____

I’d like to ask my health care provider _____

On a scale of 0 to 10, I’d rate my OA pain today as a [].

I reached my goal for the day [].

I will continue to work toward this goal [].

RECOVER FROM SLIPUPS

It's going to happen: Every once in a while, you'll miss your usual walk or just feel drained of motivation. "There's a difference between a setback and failure, a lapse and a relapse," says clinical psychologist Helen Grusd, PhD. "When people are trying to make major lifestyle changes, the vast majority have some sort of lapse. Be patient and realize that any step toward a goal is good."

Today's Action Plan: Grusd recommends a strategy of "falling forward." Examine your slip and ask yourself what can be learned from the experience. Look through your journal and see if there were any factors that may have led to a more challenging day. Perhaps your stress level was higher that day. Or maybe you rushed out the door and didn't have a good breakfast.

"Rarely is success a straight line," says author Caroline Adams Miller. "There is always going to be a shortcoming—you just need

to recognize it and learn from detours. Give yourself a break. You're making positive changes, and that's challenging."

Also, don't let any mess-ups derail your schedule and deadlines. Miss a day or even two of exercise? Just step back into your schedule and don't worry about the missed time, says Grusd.

Q: Help! I just can't reach my goal.

A: There's a fine line between quitting and realizing you have an unworkable goal and moving on. "Continuing to bang your head against the wall" won't get you anywhere, Adams Miller says. "But when you disengage appropriately and set a different but related goal, you'll continue moving forward." Adams Miller recommends recasting the goal, scaling back, and continuing on. For example, if you missed a week of walking, don't give up your program. Start again with an even shorter outing with a friend to keep your mind off the goal slipup.



If you're having a hard time reaching your goals, use your journal to help you set smaller, more manageable ones.



My goals today are _____

_____.

One thing I can learn from a recent setback is _____

_____.

Today I was able to _____

_____.

I'd like to ask my health care provider _____

_____.

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].

I will continue to work toward this goal [].

STAVE OFF STIFFNESS

Range-of-motion exercises are an excellent way to keep joints afflicted with osteoarthritis (OA) from stiffening throughout the day. These moves, done on a daily basis, take your joints through their usual function, or range of movement, by gently using the muscles around them. Every time you move a joint, you're "pushing" fluid and nutrition into it, lubricating and keeping the joint as healthy as possible, says author and physical therapist A. Lynn Millar.

Today's Action Plan: Make a point of doing these simple moves every day —with your doctor's approval:

Sky Stretch: Stand, feet shoulder-width apart. With one hand on hip, reach other hand up, arching torso slightly to the side. Alternate sides.

Diagonal Shoulder Stretch: Stand as above. Put one hand in front of your body, on the opposite hip bone, then sweep it forward and up, in a smooth, continuous arc, up and slightly back from your shoulder. Alternate sides.

Shoulder Rolls: Sitting or standing, bring your shoulders forward, up to your ears, slightly back, and down, and try to press your shoulder blades together in back. Hold briefly, then repeat.

Neck Stretch: Sitting or standing, bring your right ear toward your shoulder, and hold for 5 to 10 seconds. Repeat on the other side.

Sitting Hip Rotation: Sit in a chair with your knees bent, slide your left foot back under the chair, and swing your right foot back and forth, left to right, like a pendulum. Repeat on the other leg.

Above and Beyond: Jump In!

Water-based exercise, whether it's swimming or a water aerobics class, seems like a perfect fit for people with OA. And for good reason: warm water helps muscles relax and stretch for greater flexibility and range of motion, and there's zero impact on affected joints. A 2007 Australian study confirmed this theory: people with OA who took a 12-week hydrotherapy class experienced less pain and greater physical functioning.

Tip: If you can, participate in a water aerobics class specifically geared toward people with osteoarthritis; the water will be warmer than usual to ease joint movement.



My goals today are _____

After trying these stretches I felt _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].

I will continue to work toward this goal [].



Try taking a water aerobics class to help you better manage your OA.

HELP OTHERS, HELP YOURSELF

Volunteering to help others, especially those with osteoarthritis (OA) pain, can be a boost to you. Research has found that just two hours of volunteering a week can provide health benefits to the body and mind. In addition, Michael Feuerstein, PhD, MPH, says interaction with others who have chronic pain may lead you to find additional ways of coping with the pain that you may not have thought of before. “Volunteer work can be a good distraction for someone with chronic pain—get them moving and out of the house,” he says. “Also, when volunteering with others suffering from chronic pain, it may give someone the chance to find a role model who has been through the same situation and really understands.”



It's good to have one or more people you know you can turn to when you need to “unload” about your OA.

Today's Action Plan: Research volunteer opportunities that appeal to you. Some good places to start include your local church or synagogue, schools, or community center. Or, through organizations such as the Arthritis Foundation (arthritis.org), you can connect with others who have similar experiences and are dealing with the same OA issues.

Above and Beyond: Build a Support Network

You may think your friends and loved ones don't want to hear about your osteoarthritis, but chances are they'd be more than happy to lend an ear. Feuerstein and others say it's important to have one or two “go-to” pals whom you're comfortable opening up to. Ask them ahead of time if they'd be willing to have you “unload” to them every once in a while. And let them know what kind of help you're seeking. For example, if you really want to just vent, tell them that so they know you're not expecting advice or solutions. Just be sure to return the favor. For more ways to build a support network, go to arthritissmartmoves.com.



My goals today are _____

_____.

Some places and ways I'd like to volunteer include _____

_____.

Today I was able to _____

_____.

I'd like to ask my health care provider _____

_____.

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].
I will continue to work toward this goal [].



Something as simple as getting some sunshine may help ease the blues.

STAY UPBEAT

Chronic pain may lead some to feeling blue or resentful, notes Michael Feuerstein, PhD, MPH. One of the first recommendations Feuerstein makes to his patients who tell him they're starting to feel down is good old-fashioned exercise, like the walking plan in this program. "A workout can help manage mood and can reduce your body's reaction to stress," says Feuerstein, who helps people with chronic conditions cope with the corresponding emotional impact. Continued exercise can also lead to increased levels of pain tolerance.

Today's Action Plan: To stay upbeat in the face of osteoarthritis (OA), examine any recent changes of mood. To help pinpoint triggers, Feuerstein recommends paying particular attention to journal entries made immediately before bad feelings arise. One thing to check is the amount of sun you're getting each day. Researchers have found that a daily dose of sunshine can help beat back the blues.

Q: Why do baby steps help with pain management?

A: Often, the pain of OA is unpredictable. One day you may wake up feeling fine; on another, your pain levels spike. The randomness can be confounding. "Feeling helpless is the worst thing when dealing with chronic pain," says Helen Grusd, PhD. "It's important to feel a sense of control. Even if it's excruciating and you're able to reduce it by a small step, you'll feel so much better." While she cautions that it's not possible to immediately knock down pain from 10 to 0, it can be lowered small steps at a time. Even reducing level 10 pain to a 9½ can make you feel like you can better handle it. Each of those baby steps can lead to another as your sense of control increases, according to Grusd.



My goals today are _____

After looking back at previous journal entries I've spotted the following pattern(s) _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].

I will continue to work toward this goal [].

KEEP MOVING!

Any exercise program is only as good as it makes you feel—and it has lasting benefits only if you keep it up!

Today's Action Plan: First, reflect back on how you felt at the start of this 21-day program. Now compare it to today. Do you have a more optimistic outlook? Are you looking forward to your daily walks? Do you return from them with more energy, not less? Congratulations! Our advice? Don't stop now! You can keep up with the walking regimen from the third week (see Day 14), or add more time, bursts of speed, intensity. (Remember, if you start to feel pain, that's your signal to stop.

Be sure you have your doctor's approval to try any new exercise.) Some ideas to keep you motivated:

Seek support: If you don't already walk with a friend, neighbor, or your spouse, see if anyone's interested in joining you. "A big predictor of whether we keep up an exercise program is level of support," says author A. Lynn Millar.

Try hiking: Look into a hiking class, often offered through an adult education program. Ask if a class might be tailored to your ability and your osteoarthritis (OA).

Head to the mall: Many shopping malls have hours set aside for walkers; this can be a good way to walk safely in a temperature-controlled environment, without crowds.

Consider a treadmill: Whether you have one at home or join a gym or the local YMCA, treadmills can be valuable for bad-weather days.

Q: Should I avoid outdoor exercise in hot weather?

A: The short answer? Not because of your osteoarthritis, but you do need to take special precautions, especially if you're unaccustomed to regular exercise. First, keep yourself well-hydrated. Drink two glasses of water an hour before you head out, and drink more after you return. In warmer weather, you run a greater risk of heat injury, especially if you have been sedentary for a while, or have another medical condition. Sedentary people are less adept at regulating body temperature by perspiring, so take it slow (or exercising indoors) until you are in better condition. Avoid exercising in the middle of the day if possible.



My goals today are _____

Compared to Day 1, I'm now feeling _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].

I will continue to work toward this goal [].



To stay motivated and excited about exercising, try changing your routine or setting from time to time.

MAINTAIN FOR THE LONG RUN

The first few weeks will be the toughest, for sure. You might even want to view these past 21 days as a trial period in which you've experimented with what works and what doesn't as you achieve your lifestyle-changing goals. "Like learning to play an instrument, improvement does not happen overnight," says David Seigneur, MS, an American College of Sports Medicine–certified exercise specialist who has managed patients with osteoarthritis (OA). "You have to give yourself time, but improvements will come."

Today's Action Plan: One mistake Seigneur warns against as you move forward is relying only on willpower to keep you motivated to exercise and maintain your new lifestyle. "Anyone who has been on a diet knows that willpower alone isn't enough," says Seigneur, who is based in Pittsburgh. "We as humans are imperfect. Reward yourself." As you continue to maintain your lifestyle changes, he



You deserve a hug for all the hard work you've achieved these past three weeks. Go ahead and congratulate yourself!

suggests giving yourself healthy rewards, such as a movie, as you continue to stay on the right path. Seigneur also recommends setting yourself up for continued success by continually making adjustments that fit your new lifestyle. For example, if you have a time set to pursue a treasured pastime or to exercise, put it in your schedule and stick to it. Think of it as your time, and just say "no" if other demands intrude.

Above and Beyond: Best Yourself

As you go forward, a slight switch in the way you look at your goals may help you constantly improve. Measure your gains against yourself. For example, walk a better time around your usual route. A small journal notation can help. Even something as simple as an arrow pointing up for days you meet or exceed your previous benchmarks can help keep you enthused about your plan.



My goals today are _____

To reward myself for completing the 21-Day Program I'm going to _____

Today I was able to _____

I'd like to ask my health care provider _____

On a scale of 0 to 10, I'd rate my OA pain today as a [].

I reached my goal for the day [].
I will continue to work toward this goal [].

YOU DID IT!

Game Plan: applaud your progress • stay the course • look toward the future



Now's the time to celebrate how far you've come in the last 21 days. Reward yourself by booking a facial, seeing a play, or reserving a table at your favorite restaurant. Whatever you fancy, you deserve it for setting new goals and taking important steps to reach them. And as you strive to make these lifestyle changes a long-term habit, remember that you can log on to [arthritis-smartmoves.com](https://www.arthritis-smartmoves.com) for ongoing support and expert advice. Another thing that might help is to frequently look into the future. Picture yourself doing what you love most—tending your garden, keeping up with your grandchildren, walking your dog. These happy images will help you stay motivated for the days, months, and years to come.

Is your arthritis pain medicine putting you at risk for stomach issues?



Ask your doctor about VIMOVO.

VIMOVO is a prescription medicine that combines a proven arthritis pain reliever with built-in medication that can help protect you from stomach issues common to NSAIDs.

NSAIDs (nonsteroidal anti-inflammatory drugs) can effectively reduce the pain of osteoarthritis. But they may also lead to stomach issues which may keep you from taking the medicine you need.

VIMOVO combines a prescription arthritis pain medication with a built-in medicine that has been proven to reduce the risk of developing stomach (gastric) ulcers.*

Medicine on the outside of VIMOVO helps reduce the risk of stomach ulcers.



Illustration not actual size.

Medicine on the inside of VIMOVO helps relieve arthritis pain.

So if you're worried about potential stomach issues with your arthritis pain medication, ask your doctor about VIMOVO.

* In 6-month clinical studies, compared with enteric-coated naproxen.

Get your VIMOVO prescription for only

\$10[†]
each month

Sign up for a VIMOVO Savings Card today.

† Requires a prescription; subject to eligibility rules; restrictions apply.

Visit SaveOnVIMOVO.com

Approved Uses for VIMOVO

VIMOVO is approved to relieve the signs and symptoms of osteoarthritis, rheumatoid arthritis, and ankylosing spondylitis and to decrease the risk of stomach (gastric) ulcers in patients at risk of developing stomach ulcers from treatment with NSAIDs.

VIMOVO is not recommended as a starting treatment for relief of acute pain. Controlled studies do not extend beyond 6 months.

Important Safety Information

Like all medications that contain nonsteroidal anti-inflammatory drugs (NSAIDs), VIMOVO may increase the chance of a heart attack or stroke that can lead to death. This chance increases with longer use of NSAID medicines, and in people who have heart disease. NSAID-containing medications, such as VIMOVO, should never be used before or after a type of heart surgery called coronary artery bypass graft (CABG). As with all medications that contain NSAIDs, VIMOVO may increase the chance of stomach and intestinal problems, such as bleeding or an ulcer, which can occur without warning and may cause death. Elderly patients are at greater risk for serious gastrointestinal events.

VIMOVO is not right for everyone, including patients who have had an asthma attack, hives, or other allergic reaction with aspirin or any other NSAID medicine, patients who are allergic to any of the ingredients in VIMOVO, or women in late stages of pregnancy.

Serious allergic reactions, including skin reactions, can occur without warning and can be life-threatening; discontinue use of VIMOVO at the first appearance of a skin rash, or if you develop sudden wheezing; swelling of the lips, tongue or throat; fainting; or problems swallowing.

VIMOVO should be used at the lowest dose and for the shortest amount of time as directed by your health care provider.

Tell your health care provider right away if you develop signs of active bleeding from any source.

VIMOVO can lead to onset of new hypertension or worsening of existing high blood pressure, either of which may contribute to an increased risk of a heart attack or stroke.

Speak with your health care provider before starting VIMOVO if you

- Have a history of ulcers or bleeding in the stomach or intestines
- Have heart problems, high blood pressure, or are taking high blood pressure medications
- Have kidney or liver problems

Tell your health care provider about all of the medicines you take including prescription and non-prescription drugs, vitamins, and herbal supplements before starting VIMOVO.

Talk to your health care provider about your risk for bone fractures if you take VIMOVO for a long period of time.

Talk to your health care provider about your risk for developing low levels of magnesium if you take VIMOVO for a long period of time.

The most common side effects of VIMOVO include: inflammation of the lining of the stomach, indigestion, diarrhea, stomach ulcers, abdominal pain, and nausea.

For further information on VIMOVO, please see the brief summary of full Prescribing Information, including Boxed Warnings on adjacent pages.

You are encouraged to report negative side effects of prescription drugs to the FDA.

Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

If you're without prescription coverage and can't afford your medication, AstraZeneca may be able to help. For more information, please visit www.astrazeneca-us.com

Vimovo
(naproxen/esomeprazole magnesium)

375/20•500/20 mg delayed-release tablets

IMPORTANT INFORMATION ABOUT VIMOVO

Please read this summary carefully. It does not take the place of discussions with your doctor about the full Prescribing Information for VIMOVO and whether this drug is right for you.

WHAT IS THE MOST IMPORTANT INFORMATION I SHOULD KNOW ABOUT VIMOVO?

VIMOVO, which contains naproxen [a nonsteroidal anti-inflammatory drug (NSAID)] and esomeprazole magnesium [a proton pump inhibitor (PPI)], may increase the chance of a heart attack or stroke that can lead to death. This chance increases

- with longer use of NSAID medicines
 - in people who have heart disease
- NSAID medicines should never be used right before or after a heart surgery called a coronary artery bypass graft (CABG). NSAID medicines can cause ulcers and bleeding in the stomach and intestines at any time during treatment. Ulcers and bleeding**

- can happen without warning symptoms
- may cause death

The chance of a person getting an ulcer or bleeding increases with

- taking medicines called steroid hormones and blood thinners
- longer use
- smoking
- drinking alcohol
- older age
- having poor health

NSAID medicines should only be used

- exactly as prescribed
- at the lowest dose possible for your treatment
- for the shortest time needed

WHAT ARE THE POSSIBLE SIDE EFFECTS OF NSAIDS?

Serious side effects include

- heart attack
- stroke
- high blood pressure
- heart failure from body swelling (fluid retention)
- kidney problems including kidney failure
- bleeding and ulcers in the stomach and intestine
- low red blood cells (anemia)
- life-threatening skin reactions
- life-threatening allergic reactions
- liver problems including liver failure
- asthma attacks in people who have asthma

Other side effects include

- stomach pain
- constipation
- diarrhea
- gas
- heartburn
- nausea
- vomiting
- dizziness

Get emergency help right away if you have any of the following symptoms

- shortness of breath or trouble breathing

- chest pain
- weakness in one part or side of your body
- slurred speech
- swelling of the face or throat

Stop your NSAID medicine and call your health care provider right away if you have any of the following symptoms

- nausea
- more tired or weaker than usual
- itching
- your skin or eyes look yellow
- stomach pain
- flu-like symptoms
- vomit blood
- there is blood in your bowel movement or it is black and sticky like tar
- skin rash or blisters with fever
- unusual weight gain
- swelling of the arms and legs, hands and feet

These are not all the possible side effects with NSAIDs.

WHAT IS VIMOVO?

VIMOVO is a prescription medicine used to

- relieve signs and symptoms of osteoarthritis, rheumatoid arthritis, and ankylosing spondylitis
- decrease the risk of developing stomach (gastric) ulcers in people who are at risk of developing gastric ulcers with NSAIDs

It is not known if VIMOVO is safe or effective in children under the age of 18.

WHO SHOULD NOT TAKE VIMOVO?

Do not take VIMOVO

- If you had an asthma attack, hives, or other allergic reaction after taking aspirin or other NSAID medicine
- If you are allergic to any of the ingredients in VIMOVO
- If you are allergic to any other PPI medicine
- For pain right before or after heart bypass surgery
- If you are in the third trimester of pregnancy

WHAT SHOULD I TELL MY HEALTH CARE PROVIDER BEFORE TAKING VIMOVO?

Before you take VIMOVO, tell your health care provider about all your medical conditions and all the medicines you take, including prescription and non-prescription, vitamins, and herbal supplements. Talk to your health care provider before taking any other NSAID-containing products.

- Using VIMOVO with other medicines can cause serious side effects
- Talk to your health care provider if you are pregnant or breast-feeding. **NSAID medicine should not be used by pregnant women late in their pregnancy**

HOW SHOULD I TAKE VIMOVO?

- Take VIMOVO at least 30 minutes before a meal
- Swallow VIMOVO tablets whole with liquid. Do not split, chew, crush, or dissolve the VIMOVO tablet
- You may use antacids while taking VIMOVO
- Do not change your dose or stop VIMOVO without first talking to your health care provider
- If you forget to take a dose of VIMOVO, take it as soon as you remember. If it is almost time for your next dose, do not take the missed dose. Take the next dose on time. Do not take 2 doses at one time to make up for a missed dose
- If you take too much VIMOVO, tell your health care provider, go to the closest hospital emergency room right away, or call your Poison Control Center at 1-800-222-1222

WHAT ARE THE POSSIBLE SIDE EFFECTS OF VIMOVO?

Serious side effects may include

- **High blood pressure**
- **Heart problems** such as congestive heart failure, heart attack, or stroke
- **Active bleeding**

- **Serious allergic reactions**
- **Serious skin reactions**
- **Liver problems**
- **Bone fracture**
- **Low levels of magnesium**

Tell your health care provider or get emergency help right away if you have any of the following symptoms

- chest pain, weakness, or slurred speech
- trouble breathing or wheezing
- swelling of face, throat, or body
- severe skin blisters or peeling
- blood in your bowel movement or it is black and sticky like tar
- yellowing of skin or eyes
- seizures, dizziness, or fast heartbeat
- muscle spasms, cramps, or weakness

The most common side effects of VIMOVO include

- inflammation of the lining of the stomach
- indigestion
- diarrhea
- stomach ulcers
- stomach pain
- nausea

These are not all the possible side effects of VIMOVO. Call your health care provider for medical advice about side effects.

You may report side effects to the FDA at 1-800-FDA-1088.

OTHER INFORMATION ABOUT NONSTEROIDAL ANTI-INFLAMMATORY DRUGS (NSAIDS)

- Aspirin is an NSAID medicine but it does not increase the chance of a heart attack. Aspirin can cause bleeding in the brain, stomach, and intestines. Aspirin can also cause ulcers in the stomach and intestines
- Some of these NSAID medicines are sold in lower doses without a prescription (over-the-counter). Talk to your health care provider before using over-the-counter NSAIDs for more than 10 days

NSAID medicines that need a prescription

Generic Name	Trade Name
Celecoxib	Celebrex
Diclofenac	Cataflam, Voltaren, Arthrotec (combined with misoprostol)
Diffunisal	Dolobid
Etodolac	Lodine, Lodine XL
Fenoprofen	Nalfon, Nalfon 200
Flurbiprofen	Ansaid
Ibuprofen	Motrin, Tab-Profen, Vicoprofen* (combined with hydrocodone), Combunox (combined with oxycodone)
Indomethacin	Indocin, Indocin SR, Indo-Lemmon, Indomethagan
Ketoprofen	Oruvail
Ketorolac	Toradol
Mefenamic Acid	Ponstel
Meloxicam	Mobic
Nabumetone	Relafen
Naproxen	Naprosyn, Anaprox, Anaprox DS, EC-Naproxyn, Naprelan, VIMOVO
Oxaprozin	Daypro
Piroxicam	Feldene
Sulindac	Clinoril
Tolmetin	Tolectin, Tolectin DS, Tolectin 600

* Vicoprofen contains the same dose of ibuprofen as over-the-counter (OTC) NSAIDs, and is usually used for less than 10 days to treat pain. The OTC NSAID label warns that long-term continuous use may increase the risk of heart attack or stroke.

For more information, call 1-800-236-9933 or go to www.VIMOVO.com
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Vimovo
(naproxen/esomeprazole magnesium)

375/20•500/20 mg delayed-release tablets

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