

Earlier this year Access Economics was commissioned to review the economic costs of arthritis in Australia. The findings of *Painful Realities: The economic impact of arthritis in Australia in 2007* will enable Arthritis Australia to review its current programs, look for gaps where people with the disease are missing out, and to design new programs for the future.

Vital to future planning is an understanding of projected incidence as well as the financial implications of dealing with the disease. With *Painful Realities* we now have a new benchmark to work with – one that can be shared with governments and key stakeholders. It will also help Arthritis Australia in negotiating future funding.

Of the \$14.8m that the Federal Government has allocated to the Better Arthritis and Osteoporosis Care (BAOC) program for the 2006-2010 period, \$2.2m has been allocated to Arthritis Australia for the delivery of a range of consumer awareness and self-management activities. Arthritis Australia obtains additional funding from private sector and community support.

Arthritis Australia and its affiliated state and territory offices are committed to achieving positive outcomes for Australians with arthritis. With nearly 1 in 5 Australians (3.85 million people) being affected by the disease it is a major, national health issue. It is placing huge strains on the community in terms of the economy, the healthcare system and society at large. The prevalence continues to escalate and, based on current trends, Access Economics estimates that in 2050 the number of Australians living with arthritis will have increased by 83%.

Arthritis is an umbrella term for more than 100 medical conditions that affect the joints, specifically where two or more bones meet. People can be affected in all sorts of different ways but the most common symptoms are pain and swelling & stiffness in one or more joints. The three most prevalent types are osteoarthritis, rheumatoid arthritis and gout.

In 2002 arthritis was made a National Health Priority. Today, its prevalence is higher than any other health priority but, generally, does not attract the serious attention it deserves. It is no longer acceptable to trivialise arthritis, to shrug off the disease as something that affects only 'old people', or to think that nothing can be done to manage pain and improve quality of life.

Urgent attention must be given to reducing the physical, emotional, work-related and economic impacts of arthritis and to implementing a total support system for ensuring all Australians have access to timely awareness, education and health management.

In 2007, the total cost of arthritis to the Australian economy is estimated to be \$23.9 billion, an increase of more than \$4 billion on the cost calculated by Access Economics in 2004. The greatest share of costs (61%) is incurred by those living with the disease, 21% of total costs are borne by the Federal Government due to the high health system and productivity costs, while a further 9% are borne by society.

There are also physical and emotional costs for the person living with arthritis, as outlined in Arthritis Australia's Voice of Arthritis study (2004). The findings reveal that because arthritis can be painful, disabling and long lasting, it can have a negative impact on family, personal and sexual relationships, work and lifestyle choices and can cause financial strain.

All Australians – those living with arthritis, their families and carers, business, healthcare professionals, governments and the wider community – have a role to play in increasing knowledge and understanding of the disease with a view to curbing the incidence and reducing the social and economic strains. Living a lesser quality of life should not be an option.

Community attitudes towards arthritis must change and, while raising awareness is one of the strategies of the BAOC program, there needs to be a concentrated, national effort to make the shift. Basic messages about the disease, the need for proper diagnosis and a management program, can no longer be piecemeal. Instead, Arthritis Australia must work with governments, rheumatologists, GPs and other health professionals in developing a major health campaign that will drive those at risk to seek proper medical attention with a view to managing symptoms and preventing joint damage. In addition, access issues must continue to be addressed to ensure an equitable system, irrespective of where you live and how much you earn. The social and economic benefits are self evident: fewer adverse symptoms = improved quality of life = less national economic burden.