



ARTHRITIS PROGRAM FY 2018 APPROPRIATIONS FACT SHEET CENTERS FOR DISEASE CONTROL AND PREVENTION

| FY 2016 | FY 2017 President's Budget | FY 2017 House | FY 2017 Senate | FY 2018 Request |
|-------------|----------------------------|---------------|----------------|-----------------|
| \$9,599,000 | \$11,000,000 | \$11,000,000 | \$11,000,000 | \$16,000,000 |

Arthritis is a leading cause of disability in the United States. It limits the activities of 22.7 million Americans, by preventing them from doing things like being able to climb stairs or walk more than short distances. 43% of the working adult population with arthritis (aged 18-65 years) report symptoms that may limit the type or amount of work they do, or may prevent them from working at all. People can manage and reduce the symptoms of arthritis through self-management programs, physical activity, and weight loss. But effective interventions for arthritis are drastically underutilized. CDC provides leadership, technical expertise, and cutting-edge science in collaboration with state health departments, national organizations, and universities to improve the health and well-being of people with arthritis.

Basic Facts about Arthritis

- Arthritis affected 52.5 million Americans in 2010 - 2012, over one in five adults, reflecting a net increase of about 1 million people per year. By 2040, that number is expected to rise to nearly 77.7 million. Nearly two-thirds of people with arthritis are under 65 years old.
- About half of adults with diabetes (47%) or heart disease (49%) and one-third of obese adults also have arthritis. Physical activity is a crucial element of managing these conditions, and arthritis presents unique barriers to increasing physical activity, thus compounding these chronic diseases.

Cost of Arthritis

- Arthritis costs the U.S. \$128 billion per year, nearly \$81 billion in direct medical costs and \$47 billion in lost earnings. These costs are expected to increase substantially because of the aging population and increases in obesity and physical inactivity.
- State costs due to arthritis range from \$121 million in Wyoming to \$8.4 billion in California.

Quality Of Life Can Be Improved For People with Arthritis

- Effective interventions for arthritis are drastically underutilized. Self-management education programs have been demonstrated to improve health status and increase health behaviors, while physical activity has significant benefits for people with arthritis. In addition, weight control and injury prevention addressed in these programs can lower risks and improve symptoms.
- More widespread use of evidence-based interventions by increasing access and availability could improve the quality of life for millions of people with arthritis.
- Early diagnosis and management can decrease disability associated with arthritis.

CDC's Arthritis Program

- CDC currently funds 12 states to implement and disseminate effective public health approaches to address arthritis. For example, using CDC state arthritis funding, the Utah State Department of Health is partnering with the University of Utah Community Clinics to deliver the Chronic Disease Self-Management Program (CDSMP) through a system of more than 12 clinics.
- CDC works with national partners to disseminate evidence-based programs through national networks and systems of care. Since 2011 the YMCA, through a partnership with NACDD and the CDC, began to offer

the evidence-based EnhanceFitness™ intervention to adults with arthritis in YMCAs in 8 states and is now offering this intervention nationwide through its national network of state associations and local branches. As of October 2015, EnhanceFitness™ has been disseminated to 204 sites in 36 states. CDC and NACDD are also partnering with the National Recreation and Parks Association to implement the AF Exercise Program and Walk with Ease in local park agencies to increase the reach of these interventions. Thus far these interventions have been offered in more than 44 local parks and recreation agencies, with plans to expand.

- CDC conducts surveillance and epidemiological analyses to assess the burden of arthritis, including the impact on different population groups and those that may be underserved. CDC also conducts research to evaluate new modes of physical activity and self-management awareness and promotion for people with arthritis to ensure the newest state of the science and the maximum reach for effective programs.

With the launch of the National Public Health Agenda for Osteoarthritis in early 2010, CDC and stakeholders have a continuing commitment to improving quality of life for people with arthritis. Using proven strategies of self-management education, physical activity, injury prevention and weight management, public health can help achieve healthier lives for millions of Americans. With an increase of \$5 million over the FY 2017 level, CDC's Arthritis program would be able to:

- Improve access and availability of proven interventions for people with arthritis by funding a total of 15 state health departments and 5 national organizations to disseminate effective public health approaches through large systems of care, worksites, and national networks with local sites for implementation.
- Advance the cause of the National Public Health Agenda for Osteoarthritis to elevate OA as a national health priority by leveraging public and private funding through the Osteoarthritis Action Alliance.

For more information, visit: <http://www.cdc.gov/arthritis/>

Contact: Amy Souders, Cornerstone Government Affairs. (202) 488-9500 or asouders@cgagroup.com