

BRFSS Brief

Number 1602

The Behavioral Risk Factor Surveillance System (BRFSS) is an annual statewide telephone survey of adults developed by the Centers for Disease Control and Prevention and administered by the New York State Department of Health. The BRFSS is designed to provide information on behaviors, risk factors, and utilization of preventive services related to the leading causes of chronic and infectious diseases, disability, injury, and death among the noninstitutionalized, civilian population aged 18 years and older.

Arthritis

New York State Adults, 2013

Introduction and Key Findings

Arthritis describes over 100 diseases and conditions that affect joints, the tissues that surround joints, and other connective tissues. Depending on the specific form of the disease, the pattern, severity and location of symptoms can vary. The most common form of arthritis is osteoarthritis. Other frequently occurring forms include rheumatoid arthritis, gout, lupus, and fibromyalgia. Symptoms include pain, aching, stiffness, and swelling in or around the joints. Some forms of arthritis, such as rheumatoid arthritis and lupus, can involve the immune system, affect multiple organs and cause widespread symptoms.¹

An estimated 52.5 million U.S. adults (about 1 in 5) report doctor-diagnosed arthritis, the most common cause of disability in the nation. Arthritis limits the activities of 22.7 million Americans, preventing them from being able to climb stairs or walk more than a short distance, and impacting the type or amount of work they are able to do, if they can work at all. Arthritis also frequently occurs with other chronic conditions. About half of U.S. adults with heart disease (49%) or diabetes (47%) also have arthritis. Physical inactivity is a risk factor for other chronic conditions which often occur with arthritis, making it harder to manage these conditions.¹

Although there is no cure for arthritis, there are many ways people can manage and reduce the symptoms of arthritis. In addition to medical treatments (such as medication or surgery), self-management of arthritis symptoms can help people with arthritis reduce pain, improve or maintain function, stay productive and lower health care costs. Key self-management activities include: learning arthritis management strategies, being active, maintaining a healthy weight, seeing a doctor and avoiding joint injury.¹

Key Findings

In New York State (NYS), adults who report being told by a doctor or other health professional that they have arthritis are more likely to be women and of older age. Of the approximately 3.8 million adults in NYS living with arthritis, 1.5 million are ages 65 years and older. The prevalence of arthritis among adults living with limitations (56.4%) is more than three times greater than the prevalence among adults living without limitations (16.4%). Arthritis is also directly associated with body mass. Compared to adults not considered overweight or obese, a higher percentage of obese adults report having arthritis, 36.2% versus 18.0%. In addition, the prevalence of arthritis is significantly higher among adults who have one (non-arthritis) chronic condition (30.1%), and adults who report having two or more (non-arthritis) chronic conditions (52.1%).

BRFSS questions

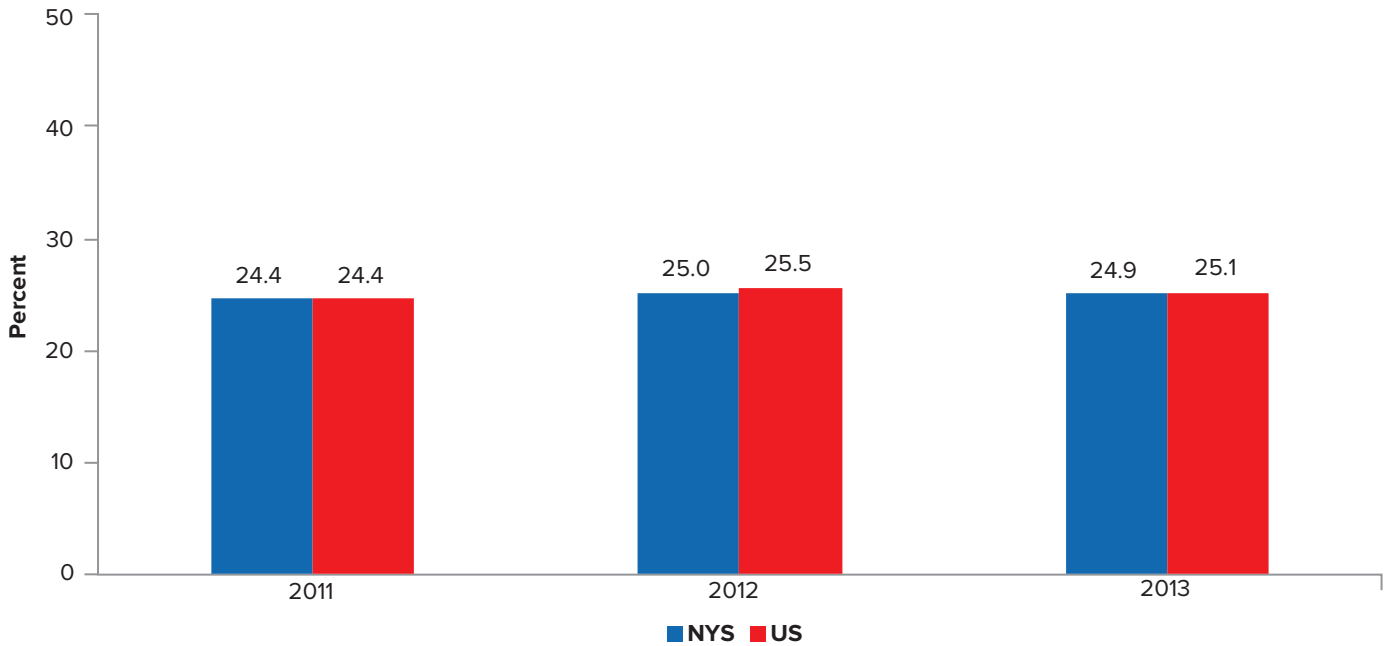
1. Have you ever been told by a doctor or other health professional that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

[If “yes” to #1]

2. Are you now limited in any way in any of your usual activities because of arthritis or joint symptoms?

For current surveillance purposes, arthritis is defined as being “doctor-diagnosed,” i.e., a “yes” response to question #1

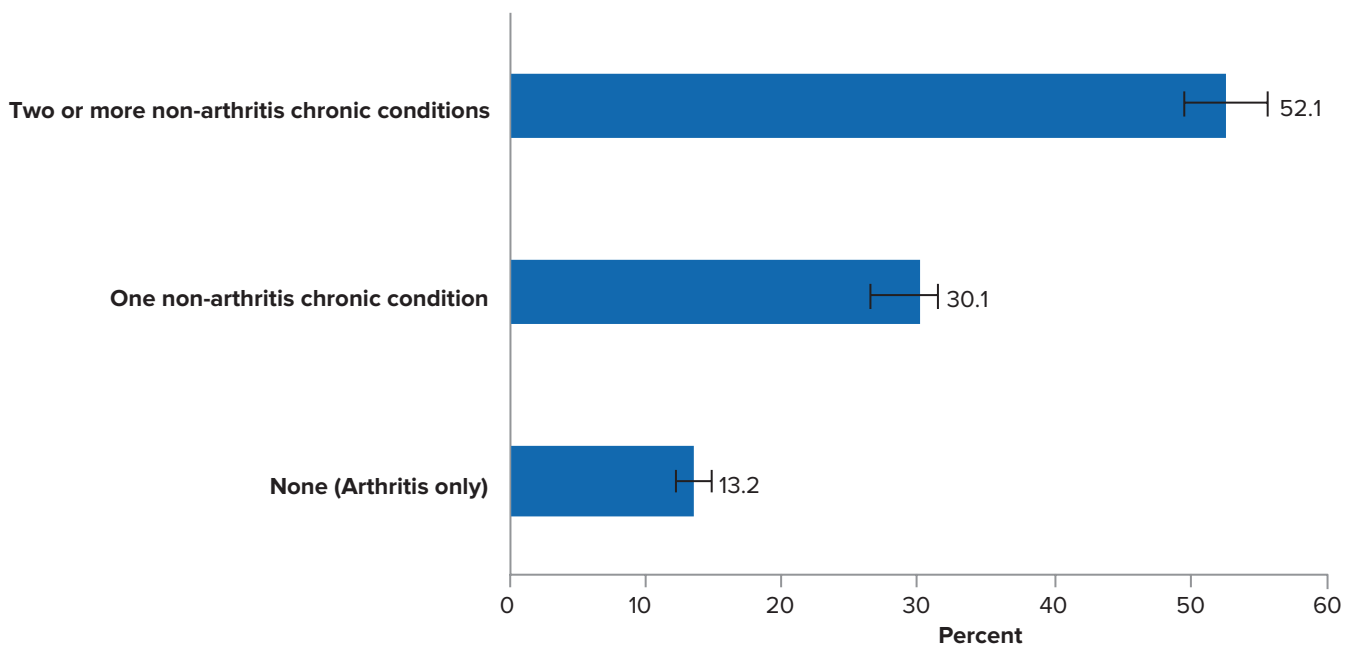
Figure 1. Arthritis^a prevalence among New York State and U.S.^{} adults, BRFSS 2011 - 2013**



a Those ever told by a doctor or other health professional that they had some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia.

**Median percent; includes data from all states, DC, and territory values.

Figure 2. Arthritis prevalence^a by multiple chronic conditions category^b, 2013 BRFSS



a Those ever told by a doctor or other health professional that they had some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia.

b Non-arthritis chronic conditions include diabetes, history of cancer, heart disease, stroke, high blood pressure, or asthma.

Note: Errors represent 95% confidence intervals

Arthritis^a among New York State Adults, 2013 BRFSS

	Arthritis ^a [n=8,979]		If arthritis, % with activity limitation due to arthritis or joint symptoms ^b	
	% ^c	95% CI ^c	% ^c	95% CI ^c
New York State (NYS)	24.9	23.8-26.0	51.8	49.1-54.5
Sex				
Male	20.4	18.8-21.9	49.5	45.1-54.0
Female	29.0	27.4-30.7	53.2	49.8-56.7
Age (years)				
18-44	7.9	6.6-9.2	46.9	38.1-55.7
45-64	32.1	30.0-34.2	57.1	53.0-61.3
65-74	51.1	47.5-54.7	48.8	43.7-53.8
75+	58.3	54.5-62.1	46.6	41.0-52.1
Race/ethnicity				
White non-Hispanic	28.5	27.1-30.0	48.9	45.8-52.0
Black non-Hispanic	25.5	21.8-29.2	48.9	40.1-57.6
Hispanic	19.0	16.3-21.7	66.5	58.7-74.3
Other non-Hispanic	14.6	11.0-18.3	54.0	40.1-67.9
Annual household income				
< \$25,000	30.5	28.0-33.0	61.3	56.4-66.1
\$25,000-\$50,000	25.8	23.2-28.3	47.1	41.3-52.9
> \$50,000	19.6	18.0 - 21.1	46.2	41.6-50.7
Missing ^d	26.9	23.6-30.2	49.2	41.7-56.6
Educational attainment				
Less than HS	34.8	30.7-39.0	58.3	50.4-66.3
HS or GED	27.6	25.3-29.9	53.2	48.4-58.1
Some Post HS	24.0	21.9-26.1	50.1	45.1-55.1
College grad	18.0	16.6-19.3	45.4	41.2-49.6
Body Mass Index (BMI) category^e				
Neither overweight nor obese	18.0	16.3-19.7	46.3	41.1-51.5
Overweight	24.7	22.8-26.7	47.9	43.2-52.5
Obese ^e	36.2	33.5-38.8	59.4	54.8-64.1
Leisure-time physical activity^f				
Yes	21.8	20.5-23.1	46.7	43.4-50.0
No	34.7	32.0-37.3	59.9	55.4-64.5
Region				
NYS excluding NYC	27.8	26.3-29.4	50.2	46.9-53.5
NYC	21.0	19.3-22.7	54.7	49.9-59.5
Limitation status^g				
Limitation	56.4	53.3-59.4	76.8	73.4-80.1
No Limitation	16.4	15.3-17.5	27.7	24.3-31.0
Health care coverage				
Private	21.2	19.6-22.8	47.1	42.9-51.3
Medicare	52.3	49.0-55.6	52.1	47.9-56.4
Medicaid	27.8	23.2-32.4	66.2	56.8-75.6
Other Government Assistance Plans	25.5	19.1-31.9	53.7	39.5-67.9
Other Sources	29.2	23.5-35.0	48.8	37.4-60.3
Not insured	9.6	6.7-12.5	47.1	31.8-62.4
Non-arthritis chronic conditions^h				
None (Arthritis only)	13.2	11.9-14.5	45.7	40.3-51.1
One non-arthritis chronic condition	30.1	27.7-32.4	50.8	46.0-55.5
Two or more non-arthritis chronic conditions	52.1	49.0-55.1	57.4	53.1-61.7

^a Those ever told by a doctor or other health professional that they had some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia.

^b If ever told by a doctor or other health professional that they had some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia.

^c % = weighted percentage; CI = confidence interval.

^d "Missing" category included because more than 10% of the sample did not report income.

^e Obesity is defined as a BMI of 30.0 or higher.

^f Any leisure-time physical activity during the past month.

^g All respondents who report activity limitations due to physical, mental, or emotional problems OR have health problems that require the use of special equipment.

^h Non-arthritis chronic conditions include diabetes, history of cancer, heart disease, stroke, high blood pressure, or asthma.

References

1. Centers for Disease Control and Prevention (CDC). *Arthritis: Addressing the Nation's Most Common Cause of Disability - At A Glance 2015*. Retrieved on December 3, 2015 from <http://www.cdc.gov/chronicdisease/resources/publications/aag/pdf/2015/arthritis-aag-508.pdf>

Program Contributions

New York State Department of Health
Bureau of Chronic Disease Evaluation and Research
Bureau of Community Chronic Disease Prevention

Order Information

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