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### Exploring the Role of Physical Activity in SpA

#### Announcer:

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Here's your host, Dr Anisha Dua.

#### Dr Dua:

Physical activity is associated with numerous health-related benefits among patients with chronic diseases. And spondyloarthritis patients can benefit greatly from regular physical activity. But a recent study showed that a majority—over 60%—of patients with inflammatory arthritis reported low to moderate levels of physical activity, and only 27% reached the recommended 7,000 steps per day.<sup>1</sup>

This is ReachMD, and I'm Dr Anisha Dua. Joining me to take a look at the role of physical activity for patients with SpA is Dr Elaine Husni. Dr Husni is an associate professor and director of the Arthritis and Musculoskeletal Center at the Cleveland Clinic. Dr Husni, thanks so much for being here today to talk with me.

#### Dr Husni:

Thanks. So glad to be here on a very important topic that we should talk a lot about, in terms of physical activity.

#### Dr Dua:

I agree. Well, with that, let's get into it. So, we know that physical activity has many health benefits. Can you just set the tone, tell us about some of those benefits?

#### Dr Husni:

So, I think physical activity in itself probably needs a little bit of explanation. So, we talk a lot about exercise, and exercise really means different things to people. It may not always mean getting a gym membership and working out with a trainer three times a week, versus just things that you could do at home, versus things that you could do outside, such as walking or swimming or jogging or weight training.<sup>2,3</sup> So, I think exercise in general, however you are able to access movement, helps to release endorphins and can really improve your mood and combat lots of different mood disorders, such as depression, anxiety, and stress.<sup>4</sup> We also know that physical activity can really help with maintaining your weight and building muscle mass, which is so important for your metabolism, at any age.<sup>4</sup> And then, of course, we were talking earlier about comorbidities, and we know that getting yourself active is also gonna be really important in terms of preventing some of those comorbidities.<sup>3</sup>

#### Dr Dua:

Yeah. No, I totally agree. There's so many different things, when someone says you just need to exercise more, and talking through what that really means, and movement, and different types of activities that can help is such an important thing that we need to talk about more with our patients. So can you tell us a little bit more about physical activity and spondyloarthritis? What are some specific benefits of physical activity in these patients, and are there any obstacles that may make this kind of activity challenging for our patients?

#### Dr Husni:

Yeah, so the most obvious, I think for us, is that our patients usually have joint complaints and so whenever we talk about exercise or

movement, how can you do that when your joints hurt, right?<sup>1</sup> 'Cause you're always afraid to make your joints get worse, and that's probably the number one sort of myth that I do every week in clinic, right? Because they're always wondering that if I'm going to have such bad disease, I probably shouldn't move, 'cause I don't wanna make it worse. And, as we all know, that it's just the opposite, right?<sup>3</sup> We wanna keep people moving, except we have to do this with certain limitations. So, if there's a lot of pain that's associated with exercise, then we have to, like, change the way that we think about movement while that patient's having more high disease activity. So that might mean water-based therapy rather than land-based therapy. That might mean chair yoga instead of doing actual yoga. So, I think there's ways that we can modify movement, but I think it's important to educate the patient around that, especially during times of active disease.

**Dr Dua:**

Yeah, no, that makes so much sense. And just following up with that, you mentioned a few different types of exercises. Are there any things that you specifically recommend for your SpA patients? Like anything that they should definitely do, or anything that should be avoided?

**Dr Husni:**

Yeah, I think that's a great question. I usually like to meet patients where they are. So, I think no one is going to argue with you that exercise and movement is good. But I think how somebody stays motivated to do this, and I think having a more consistent exercise routine, or movement routine, is probably much more helpful than for us to just do, spurts of exercise for a couple weeks at a time, and then stop for a month, right? So you really wanna do something that they can stick with. So, I think if somebody has never really exercised much before, then I think supervised exercise would be really helpful. To have someone be there to see what they're doing, and to really start them on an exercise routine. If someone's already been used to exercising somewhat, but just sort of falling off a little bit, then we wanna mix it up a little and talk about different types of exercise that might keep them engaged. So, it may not always be weightlifting, but you know, they could join a dance class, they could participate in different weight training groups, and that sometimes mixes up things. And then, there's some people that just don't have the time, and they need to do something that is home-based, that's easy, that they don't have to like leave work and go somewhere else to do and they can do something successfully at home. And now, with the advent of all these Zoom, thanks to our pandemic, I think people can really access so many things on Zoom, so sometimes if they can't even really move too much, I do recommend, you know, something like Qigong, which is just a much lighter movement, which just kinda keeps your joints and body moving.<sup>2</sup>

**Dr Dua:**

Yeah, no, those are really great suggestions. I know I've often sent my patients to a physical therapist, right? And we send them on their way and hope that they feel better. Can you just expand a little bit on the idea of an exercise prescription and ways that we might be able to help our patients, who maybe haven't had as much experience with different types of physical therapy, to help them incorporate things that are safe and some of the modalities that you just mentioned?

**Dr Husni:**

Yeah, I think the biggest lesson that I've learned from our physical therapists, our exercise physiologists, and just talking to our sports medicine folks. I think it's the regular exercise that really helps our patients. So finding something that you can do on a more consistent basis, that fits your lifestyle, is probably more important than just signing up for that yoga class only and just doing it for three months and be done. So, I think you have to be realistic with yourself and your time, and where you can do it. I think finding a buddy to exercise with, I think, is always very helpful as well because I think lots of us need motivation. I think exercise is usually the first thing that goes when things come up in your life, so I think having a buddy keeps us accountable, and I do think that kinda meeting where the patient is really an important message.

And really to empower the patient that they're not gonna be hurting themselves if they do a regular exercise routine, and to have it supervised if they are worried. Or if they have an excessive amount of pain, to bring it up during your subsequent visits so that you can address those points as well.

**Dr Dua:**

So, we've talked a little bit about the importance of physical activity and maintaining something that's sort of more regular, as opposed to spurts of excessive exercise and high intensity. But let's talk a little bit about lifestyle factors and some holistic approaches to care for spondyloarthritis patients. Before we get into some of that, are there any final thoughts that you wanna share about exercise and spondyloarthritis, and what our rheumatology colleagues can do to encourage our patients to adopt healthier behaviors overall?

**Dr Husni:**

Yeah, I think we are really understanding more the benefits of exercise, so I don't think it's optional. I do think that we really need to support and empower our patients to think about exercise just like brushing your teeth. You know, something that you should be doing,

and if you aren't able to find the right type of exercise that we need to connect them with either local community programs, a trainer, something that we can teach them at home through Zoom. So I think because of such the enormous, sort of, spectrum of ways that we can interact with others to teach us about exercise, there's really, like, no excuse to not exercise. And then I think to support them through, because I can only tell you that every week I'm addressing, you know, "But this hurts when I exercise so I prefer not to exercise," and really to kinda help them through those myths.

**Dr Dua:**

So, Dr Husni, is there anything new on the horizon, or any exciting research that's been done, looking at physical activity and how it might impact our spondyloarthritis patients?

**Dr Husni:**

Yes, I know that there have really been a lot more exploration in the role of actual physical activity in patients with autoimmune disease, and in terms of specifically for SpA patients, maybe a little bit less. But we do know that regular exercise can sometimes even change gene expression.<sup>5</sup> So I do think that we need more research in this area, but I'm really excited to see some of the preliminary data show us that exercise is not just simply releasing endorphins, but there can be meaningful things on a molecular level, that we will hopefully learn more in the future.

**Dr Dua:**

Yeah. No, absolutely. That's a great way to round out our discussion on this topic. I want to thank you, Dr Husni, for helping us to better understand the impact of physical activity for our patients with SpA and giving us some insights on ways to help move them along that pathway, and in a safe and healthy way. It was really great speaking with you today.

**Dr Husni:**

Thank you so much.

**Announcer:**

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