Impairments and Functional Limitations:
ADL, IADL, work and leisure impairment
Functional mobility impairment
Limited ROM (typically seen in shoulder abduction and external rotation, elbow extension, forearm pronation and supination wrist flexion and extension, radial ulna deviation, and thumb and finger flexion and extension).
Impaired grip and pinch strength
Hand deformities due to osteophyte formation in the DIP (Heberden nodes) and at the PIP (Bouchard nodes).
Impaired strength
Limited activity tolerance and endurance
Joint pain, stiffness and inflammation that increase with activity
Impaired fine motor control
Impaired hand function
Fall risk

Assessments:
Manual Ability Measure (MAM) (Chen 2010)

Occupational Therapy Intervention:
ADL, IADL, work and leisure training including but not limited to...

• Train in the use of adaptive equipment to improve grasp (built-ups), improve ease of performance (electric can opener), compensate for range of motion loss (dress stick), compensate for weak/absent muscle (universal cuff, jar opener), prevent stress on joints (lever door handle), prevent prolonged grasp (book holder, Dycem), prevent accidents (bath seat, nonskid rugs).
• Instruct in energy conservation strategies and joint protection.
• Instruct in activity balancing (balancing self-care, work, play and rest)

Train in safe and efficient functional mobility (sit to stand; bed mobility skills; transfers; ambulation and wheelchair mobility) during ADL and IADL tasks.

Provide UE, neck and trunk therapeutic activities and exercises to improve ROM and strength.
• Acute flare-ups – instruct in performing gentle range of motion exercises 3-4 times daily followed by icing for 15 minutes.
• For non-acute joints – instruct in the use of superficial heat, gentle self-stretching techniques and strengthening in pain free range.
• Instruct in home program with verbal and written instructions
**Occupational Therapy Toolkit**

**Osteoarthritis**

**Occupational Therapy Intervention:**
Provide splints to rest inflamed joints, maintain proper joint alignment, improve functional control and support weak or painful joints.

- Resting hand splint, wrist cock-up, finger splints, ulnar deviation splint, tri-point proximal interphalangeal joint splint, and thumb spica splint.

Instruct in pain management techniques to improve participation in ADL tasks.

- Teach stress management and relaxation techniques.
- Coordinate medication peak with exercise and activity.
- Educate in use of superficial heat and cold.
- Teach self-massage techniques.
- Provide positioning support devices (back supports, pillows, and splints).

Complete a comprehensive, performance-based home assessment. Recommend and/or provide home and activity modifications.

Provide education about fall risk and prevention strategies.

**Patient and Caregiver Handouts:**
1. Deep Breathing Exercise
2. Energy Conservation
3. Exercise Guidelines for Arthritis
4. Joint Protection
5. Splint/Orthosis Instructions
6. Superficial Cold
7. Superficial Heat
8. Upper Body Active ROM Exercises

**Resources:**
1. Arthritis Foundation - www.arthritis.org/
2. Arthritis Helpbook - www.afstore.org/
3. Arthritis Today magazine - www.arthritistoday.org/