Living with Inflammatory Arthritis

Exercise, Flare-Ups, and Protecting Your Joints

1 What Is Inflammatory Arthritis?

Unlike osteoarthritis — which results from wear and tear on cartilage — inflammatory arthritis is an immune-mediated condition. The immune system mistakenly attacks the joint lining (synovium), causing inflammation, pain, swelling, and, over time, joint damage. The three most common types are Rheumatoid Arthritis (RA), Psoriatic Arthritis (PsA), and Ankylosing Spondylitis (AS).

Type	Main Joints Affected	Key Features
Rheumatoid Arthritis (RA)	Hands, wrists, feet, knees	Symmetrical pattern; morning stiffness lasting more than 30 minutes
Psoriatic Arthritis (PsA)	Fingers, toes, spine	Associated with skin psoriasis; often asymmetric joint involvement
Ankylosing Spondylitis (AS)	Spine, sacroiliac joints	Improves with movement; stiffness typically worse with rest

2 Exercise and Inflammatory Arthritis

Regular exercise is one of the most evidence-based treatments available for inflammatory arthritis. It reduces pain, improves physical function, supports mental wellbeing, and — contrary to older advice — does not worsen joint damage when performed appropriately.

> Rest was once routinely recommended for inflammatory arthritis. The evidence now clearly shows that appropriate exercise reduces systemic inflammation, improves joint health, and helps protect cartilage and bone over the long term.

Exercise Type	Benefits	Guidance
Low-impact aerobic (walking, swimming, cycling)	Reduces systemic inflammation; improves cardiovascular health and energy	Aim for 150 min/week at moderate intensity
Strengthening	Protects joints by strengthening surrounding muscles; reduces joint load	2–3 times per week; avoid heavy loading during acute flares
Range of motion	Prevents stiffness; maintains joint mobility and daily function	Daily, gentle movement — especially important in the morning

3 Managing Flare-Ups

Flares are periods of increased disease activity — joints become more inflamed, painful, and stiff. Knowing how to adjust your activity during and after a flare helps you recover faster and maintain your progress.

During a Flare	After a Flare Settles
Reduce exercise intensity — but don't stop entirely	Gradually return to your normal programme
Gentle range-of-motion exercises only	Rebuild strength and endurance progressively
Apply heat or cold as advised by your clinician	Discuss flare triggers with your clinician
Rest the most affected joints between movement sessions	Monitor for any new joint changes or symptoms

4 Protecting Your Joints

Joint protection principles help reduce long-term damage and day-to-day pain. Small changes to how you move and use your joints can make a significant difference over time.

Principle	Example
Distribute load across larger joints	Use the palm of your hand rather than fingers to open jars or push doors
Avoid sustained grip or pinch	Take regular breaks from gripping tasks; use adaptive equipment where available
Maintain good alignment	Orthotics and supportive footwear help reduce foot and ankle joint stress
Pace your activity	Alternate heavy and light tasks; avoid remaining in one position for too long

5 Key Takeaways

KEY TAKEAWAY 1

Exercise is medicine — not a risk. Appropriate, regular exercise reduces inflammation, protects joints, and improves quality of life in inflammatory arthritis. The key word is appropriate: work with your clinician to find the right type, intensity, and frequency for you.

KEY TAKEAWAY 2

Flares are manageable — not a reason to stop. Reduce intensity during a flare rather than stopping completely. Gentle movement helps maintain joint mobility and speeds recovery. Return to your normal programme gradually once the flare settles, and track what may have triggered it.

KEY TAKEAWAY 3

Small daily habits protect your joints long-term. Joint protection isn't only about big decisions — it's about the dozens of small ways you use your joints each day. Pacing, posture, and adaptive tools all add up to meaningful protection over months and years.