The pain, stiffness and swelling from osteoarthritis (OA) can limit function and mobility and diminish quality of life. These symptoms may impinge on the ability to perform daily and work routines such as writing or typing, standing or sitting for long periods, bending and walking, or going up and down stairs.

OA is a chronic condition in many individuals who also have heart disease, diabetes, and obesity and can make it difficult for people to get the physical activity they need to be healthy and successfully manage each of these costly conditions.

WHY OA MATTERS

- **OA is one of the most common causes of work loss**, costing the U.S. economy more than $100 billion annually.

- Costs from **absenteeism due to OA are at least $11.6 billion** due to an estimated three lost workdays per year. The estimate does not include presenteeism, where employees may be on the job but not able to be as productive due to OA, leading to a reduction in productivity.

- OA does not affect only older adults. **Over half of adults with OA are of working age (18–64 years old).**

- **OA is the second most costly health condition treated in U.S. hospitals.** In 2013, this cost was $16.5 billion, or 4.3% of the combined cost for all hospitalizations. It covered about 21 million ambulatory care visits and 3 million inpatient hospitalizations for people with OA and related disorders.

- Each year, **employers’ short-term disability insurance policies experience an average of 1.7 new claims for OA per 1,000 covered lives.** Short-term disability claims for OA incur an average of 54 lost workdays, at an average cost of $11,400 in wage replacements and paid employee benefits.

- **Opioids and benzodiazepines are prescribed for 27% of people with OA,** despite the high risk of adverse side effects and drug addiction plus a lack of evidence supporting the effectiveness of this approach. **One in 14 of these working adults has OA-related medical or pharmacy claims.**
ACT NOW!

Take these actions to help make a positive difference in the health and productivity of your employees and to realize cost savings. Look for opportunities to assure equity in access and delivery of your interventions.

1. **Expand workplace wellness programs** to include evidence-based self-management education and physical activity programs that improve health, manage weight, increase mobility, and reduce social and economic costs of OA and other musculoskeletal conditions.

   **CDC Workplace Health Promotion**: Sound, actionable information, vetted by the CDC and experts, to help employers launch or expand a workplace health promotion program. Includes a worksite health scorecard to help employers assess their workplace health strategies and interventions.

   **CDC Work@Health Program**: An employer-based training program aimed at improving the organizational health of participating employers and certified trainers. Emphasizes strategies to reduce chronic disease and injury risk to employees and to improve overall worker productivity.

2. **Create environments and policies to support on-site physical activity, nutrition, and weight management**, including classes, counseling, cafeteria selections, walking paths, and groups, as well as flextime, reimbursement, and incentives to encourage participation.

   **OA Action Alliance (OAAA) Website**: Downloadable handouts and other valuable resources for individuals with OA and their caregivers, businesses, healthcare providers, community organizations, and policymakers.

   **Community-based programs, recommendations, and resources to address OA**: An online library of resources to help implement arthritis lifestyle management programs, including how to make the case for them.

   **Walk With Ease Registration Portal**: The online registration portal for the Arthritis Foundation’s Walk With Ease program. Employees can sign up for free through OAAA, or employers can purchase their own portal.
Develop partnerships with public health, healthcare, and community-based organizations to enhance the well-being of employees, the community, and the population as a whole.

Leveraging Partnerships to Develop a Sustainable Approach to Increasing Adoption of Arthritis-Appropriate, Evidence-Based Interventions with Employers: Step-by-step approach and lessons learned for developing partnerships between employers, public health, and other organizations to increase opportunities for arthritis care developed by the National Association of Chronic Disease Directors (NACDD).

Montana Department of Public Health Worksite Walking Program: A public health/worksite success story to expand an evidence-based walking program.

Increase use and acceptance of existing efforts to address and evaluate individual workplace risk factors to prevent injury, onset, and progression of OA.

CDC National Institute for Occupational Safety and Health – Total Worker Health in Action: Policies, programs, and practices that integrate protection from work-related safety and health hazards with promotion of injury – and illness – prevention efforts to advance employee well-being.

Occupational Health and Safety Administration’s (OSHA) Ergonomics Resources: Information about potential problems that can arise in various work settings and solutions for minimizing the musculoskeletal impact of various activities or working positions.

This publication was supported by Cooperative Agreement Number 1 NU58 DP006262-05 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.