



PRO-FIT HEALTH DIGEST

Evidence-Based Physiotherapy | Exercise | Wellness | Prevention

Vol 6

OCTOBER 2026

World
Arthritis Day
Special Edition

Healthy Joints, Active Life

Move Better. Live Fuller.
At Every Age.



World
Arthritis Day
12 OCTOBER

2026 CAMPAIGN THEME

**ACHIEVE
YOUR DREAMS**
#RMDreams

*Different lives.
Different dreams.
One shared hope:
to achieve them.*



KNEE



HIP



HAND



SPINE



SHOULDER

INSIDE THIS ISSUE

Trusted Information. Real People. Practical Solutions.



Understand Arthritis

Types, warning signs
& what happens
inside your joints



Move for Stronger Joints

Exercise, strength
& everyday activity



Food & Lifestyle

Indian foods,
supplements &
traditional wisdom—
what does the
evidence say?



Do I Need Joint Replacement?

When conservative
care is enough —
and when surgery
may be appropriate



EXPERT VOICE

Orthopaedic
specialists answer
the questions
patients actually ask



MY JOINT JOURNEY

Real patients.
Conservative care,
joint replacement
& life after arthritis

From Pain and Limitations...



Difficulty walking



Stiffness



Loss of confidence



Less independence

...to More Possibilities



Move better



Stay active



Do what you love



Live independently

*Arthritis
is a journey.
So is life.
Keep moving
forward.*

Move Well. Live Well. Stay Independent.

Your Partner in Every Step of Recovery



“Healthier
Joints
Brighter
Tomorrows”



CONTENTS

MOVE
BETTER
LIVE
FULLER



1		From the Editor's Desk Healthy Joints, Active Life: Moving Beyond the Pain	1
2		Arthritis — Is It Really Just “Wear and Tear”?	2
3		What Type of Arthritis Could It Be? recognising patterns of OA, RA, gout and inflammatory arthritis	3
4		Your Joint Is Not Finished pain can change, strength can improve, movement can return	4
5		What Food May Be Harming Your Joints?	5
6		Move, Don't Protect Too Much “My joints hurt. Should I exercise or rest?” + pain as a messenger	6
7		REAL PATIENT JOURNEY — Knee Arthritis Managed Conservatively Story of Mr. Chidambara Jois	7
8		The Right Exercise for Arthritis mobility, strength, aerobic activity, balance/function and exercise dose	8
9		Your 10-Minute Joint Health Routine	9
10		My X-Ray Looks Bad. Should I Be Worried? treating the person, not merely the picture	10
11		Do I need Joint Replacement? Making the Right Decision at the Right Time for the Right Reasons.	11
12		EXPERT VOICE / ASK THE ORTHOPAEDICIAN Q&A with Dr (Air Cmde) Vikas Kulshrestha	12
		12A Meet the Expert.	12A
		12B Do I really need Knee Replacement?	12B
		12C When is the Right Time?	12C
		12D Prepare Well, Recover Well, Return to Life	12D
		12E Final Questions: A Broader Prospective	12E
13		Before & After Joint Replacement prehab → surgery → early recovery → rebuilding → return to life	13
14		REAL PATIENT JOURNEY of Mrs. Latha Kumar My Knee Replacement Story — life before TKR, decision, fears, surgery, rehabilitation milestones and life now	14
15		Arthritis Beyond Osteoarthritis different diseases, different causes, different treatment	15



16		Rheumatoid Arthritis (RA) when the immune system attacks the joints	16
17		Gout — More Than Just “High Uric Acid”	17
18		Inflammatory Arthritis & Spondyloarthritis PsA, axial SpA/ankylosing spondylitis and other inflammatory arthritides	18
19		The Joint-Friendly Indian Plate balanced Indian eating for joint and general health	19
20		Joint Supplements: What Does the Evidence Really Say?	20
21		Ayurveda, Siddha & Traditional Remedies Tradition Meets Evidence	21
22		Weight, Metabolic Health & Your Joints compassionate, non-stigmatising approach to health, strength and body composition	22
23		Arthritis Is a Family Journey parents, children, communication, support and independence	23
24		Make Your World Joint Friendly Small Changes. A Safe Easier More Independent You	24
25		Track, Review and Stay on Course symptom/activity tracker, meaningful goals and reviewing progress	25
26		Arthritis — Myth vs Fact	26
27		Your Joint Health Self-Check scored checklist, red flags and preparation for consultation	27
28		Healthy Joints Need Healthy Communities apartments, workplaces, senior groups, accessible public spaces and early awareness	28
29		WE CARE — From Treating Illness to Building Wellness Pro-Fit’s philosophy: Wellness • Evidence • Compassion • Active Living • Recovery • Empowerment	29
30		Moving for a Brighter Tomorrow Pro-Fit services, care across the lifespan, TECAR & PEMF, clinic identity and closing message	30
31		Appendix 1 - PLAFS	31



LESS PAIN
MORE FREEDOM



STAY ACTIVE
DO WHAT YOU ENJOY



LIVE INDEPENDENTLY
WITH CONFIDENCE



BETTER
YEARS AHEAD

People. Care.
Possibilities.

FROM THE EDITOR'S DESK

Healthy Joints, Active Life

Moving Beyond the Pain

Dear Readers,

Arthritis is much more than a diagnosis on an X-ray. It touches everyday moments — climbing the stairs, sitting cross-legged, using an Indian-style toilet, travelling, working, caring for our families and participating in the things that give life meaning.

Over the years, I have seen how pain, stiffness and loss of function can slowly limit not just movement, but confidence, independence and dreams. But I have also seen something equally powerful — people who, with the right knowledge, guidance and support, learn to adapt, stay active and continue to live fulfilling lives.

At Pro-Fit Physiotherapy, our goal cannot simply be to make a joint hurt less. We must help the person live better — with greater mobility, confidence and participation, at every age.

This October edition of PRO-FIT Health Digest brings together evidence-based information, practical advice, expert perspectives and real patient journeys. Whether you are living with arthritis, caring for someone who is, or simply want to protect your own joint health, I hope you will find this issue informative, encouraging and useful.

Let us move beyond the pain — towards a healthier, more active and more independent tomorrow.

Warm regards,

Raja Guru

Dr. Raja Guru (PT)
Consultant Physiotherapist
Pro-Fit Physiotherapy
A Venture of Ansuera Medcare Solutions LLP



“ Our goal cannot simply be to make a joint hurt less. We must help the person live better.

— Dr. Raja Guru (PT)



**WORLD
ARTHRITIS DAY 2026**
12 OCTOBER

ACHIEVE YOUR DREAMS
#RMDreams

Different people. Different joints. Different challenges.
Different dreams. Arthritis is a journey. So is life.
Keep moving forward.



Move Better. Live Fuller. Stay Independent.

Trusted Information. Real People. Practical Solutions.

ARTHRITIS — IS IT REALLY JUST “WEAR AND TEAR”?

*Different Joints.
Different Causes.
A Brighter Tomorrow.*

Not all arthritis is the same — and your joints are more than worn-out machinery.

It is common to think that joint pain simply means our joints have “worn out” with age. But in reality, arthritis is an umbrella term for many different conditions. Some are related to wear and tear, while others are caused by the immune system, crystals or other factors. Understanding the difference helps you get the right treatment and stay active for longer.



OSTEOARTHRITIS (OA) More than just “wear and tear”

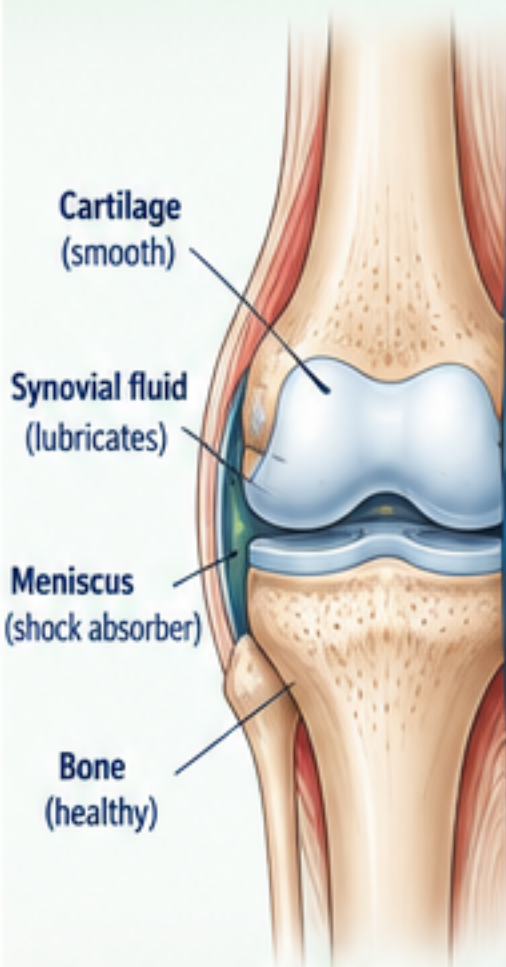
- The whole joint can change over time — cartilage, bone, synovium, muscles and other tissues.
- Often linked to age, previous injury, excess weight and joint overloading.
- Leads to pain, stiffness and reduced function, but is not simply due to cartilage “wearing out”.



KEY TAKEAWAY

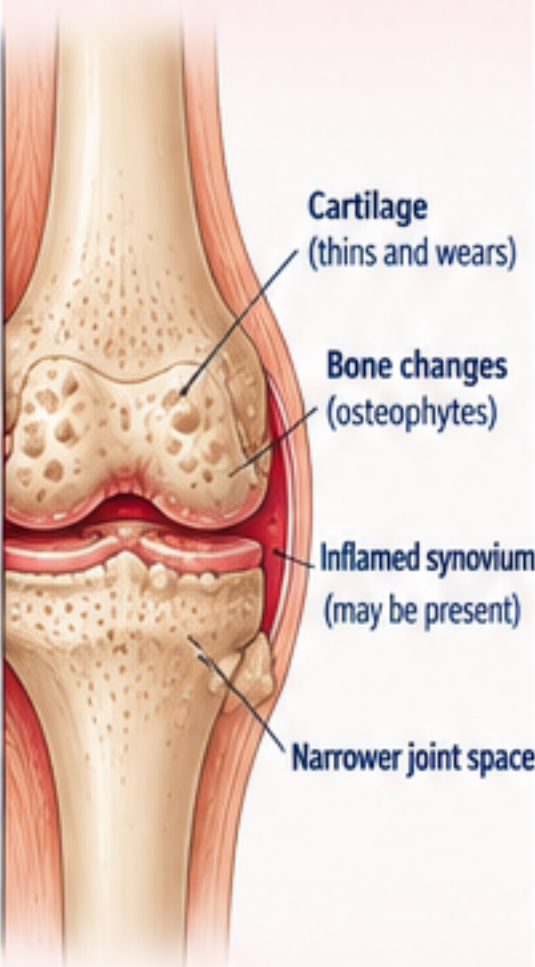
- ✓ “Wear and tear” is an oversimplification.
- ✓ Not all arthritis is due to ageing.
- ✓ Different types of arthritis have different causes, treatments and long-term outlooks.
- ✓ With the right care, most people with arthritis can stay active and live well.

A HEALTHY JOINT



Healthy joint moves smoothly

A JOINT WITH OSTEOARTHRITIS



Joint with osteoarthritis may be painful and stiff



RHEUMATOID ARTHRITIS (RA) An autoimmune condition

- Caused by the immune system attacking the joint lining (synovium).
- Can affect many joints, often symmetrically (both sides).
- May also affect other organs.
- Early diagnosis and treatment are important to prevent long-term damage.



GOUT Crystal-induced arthritis

- Caused by the buildup of urate crystals in the joint.
- Often leads to sudden, severe attacks of pain, redness, warmth and swelling.
- Commonly affects the big toe, but can affect other joints too.



OTHER ARTHRITIS & RMDs A broader family of conditions

- Includes psoriatic arthritis, ankylosing spondylitis (axial spondyloarthritis), reactive arthritis and more.
- Each condition has different causes, patterns and treatments.
- Arthritis is a spectrum, not a single disease.



MYTH

“My X-ray says my knee is worn out, so the more I use it, the faster it will deteriorate.”

REALITY

Imaging changes and symptoms do not always match. Appropriate physical activity and strengthening are important parts of osteoarthritis management. Movement, when guided properly, is usually safe and helpful.



PAIN ≠ DAMAGE ALONE

Many factors influence how much pain you feel.



All of these can influence how much pain you feel



PRO-FIT PEARL

A joint with arthritis is not necessarily a “finished” joint. It is a joint that may need better understanding, appropriate loading, stronger muscles and the right treatment.



WHEN SHOULD I SEEK MEDICAL ADVICE?

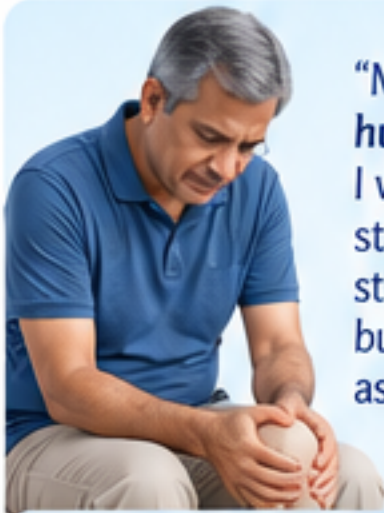
- Persistent joint swelling, especially if the joint feels hot or red.
- Prolonged morning stiffness (e.g. > 30 minutes).
- Repeated severe attacks of joint pain (e.g. gout).
- Several joints becoming involved.
- Fever, unexplained tiredness or feeling unwell.
- Rapidly worsening pain or loss of function.

Early assessment helps with accurate diagnosis and better outcomes.

WHAT TYPE OF ARTHRITIS COULD IT BE?

Your symptoms can give important clues — but diagnosis needs more than symptoms alone.

Different Symptoms. Different Stories. A Clearer Tomorrow.



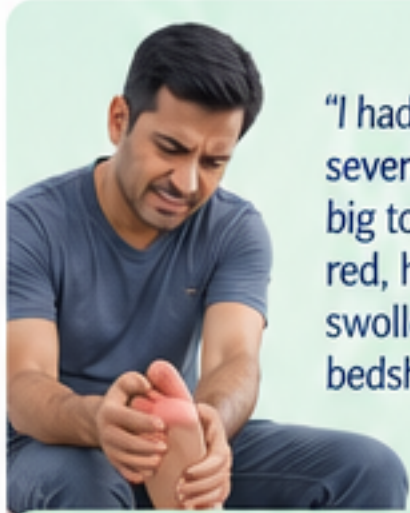
“My knee hurts when I walk or climb stairs. It feels stiff after rest but gets better as I move.”

Could this be Osteoarthritis?



“My hands are stiff for a long time in the morning. Both hands are affected and often swollen.”

Could this be Rheumatoid Arthritis?



“I had a sudden severe pain in my big toe. It became red, hot and swollen. Even a bedsheet hurt!”

Could this be Gout?



“I have back stiffness, and I also have psoriasis on my skin.”

Could this be another type of inflammatory arthritis?

LOOK FOR THE PATTERN

FEATURE	OSTEOARTHRITIS (OA)	RHEUMATOID ARTHRITIS (RA)	GOUT	OTHER INFLAMMATORY ARTHRITIS & RMDs
Common joints affected	Knees, hips, hands (especially thumb base), spine	Small joints of hands and feet (often symmetrical)	Often the big toe, but can affect other joints (knee, ankle, etc.)	Varies — spine (in axial spondyloarthritis), entheses (tendon attachments), hands, feet or other joints
When is stiffness worst?	After rest or inactivity (e.g. in the morning or after sitting)	In the morning	During an acute attack	Often in the morning or after rest (e.g. in axial spondyloarthritis)
How long does morning stiffness last?	Usually short (less than 30 minutes)	Typically longer (> 30 minutes, often 1–2 hours)	May be present during an attack, then settles	Usually longer (> 30 minutes)
Swelling and warmth	Mild, usually not very warm	Common (swollen, warm joints)	Common during attacks (joint very hot, red and tender)	Common (varies by condition)
One joint or many?	Can be one or a few joints (often weight-bearing)	Often many joints (symmetrical)	Usually one joint at a time (though more than one during severe disease)	Varies — can be a few or many joints, or predominantly spine/entheses
Onset and pattern	Gradual, progressive	Gradual, persistent (often flares and remissions)	Sudden, severe attacks	Variable (can be gradual or with flares)
Other symptoms in the body	Usually none	Tiredness, low-grade fever, can affect other organs	High uric acid levels, kidney stones (sometimes)	May have psoriasis (skin), back pain, eye inflammation (uveitis), bowel symptoms (inflammatory bowel disease), etc.



DON'T SELF-DIAGNOSE FROM ONE SYMPTOM

Your history, physical examination, pattern of symptoms and appropriate investigations help establish the diagnosis.

“Many types of arthritis can look similar in the early stages. A proper assessment by a healthcare professional is important for the right diagnosis and treatment.”



THE MORNING-STIFFNESS TEST

When you wake up tomorrow, notice:

- How long does it take before my joints feel reasonably loosened up?
- Which joints feel stiff?
- Does the stiffness improve with movement?

This is not a diagnostic test, but useful information to share with your clinician.



PRO-FIT PEARL

“The name of the arthritis matters — because the right treatment for one type may be completely different from another.”

YOUR JOINT IS NOT FINISHED

Pain can change. Strength can improve. Movement can return.

Same Joints. New Possibilities.

THE PAIN CYCLE

When pain takes control



PAIN
Makes everyday activities difficult.



FEAR OF MOVEMENT
Worry about making it worse.



LESS ACTIVITY
Do less, avoid favourite activities.



WEAKER MUSCLES
Muscles become weaker and stiffer.



MORE DIFFICULTY
Daily tasks become harder, and pain can increase.



Move Today for a Brighter Tomorrow

THE CYCLE CAN BE CHANGED

THE ACTIVE CYCLE

Movement builds a better tomorrow



RIGHT MOVEMENT
Safe, guided activity keeps you moving.



STRONGER MUSCLES
Builds support, stability and confidence.



BETTER BALANCE
Helps with everyday movements.

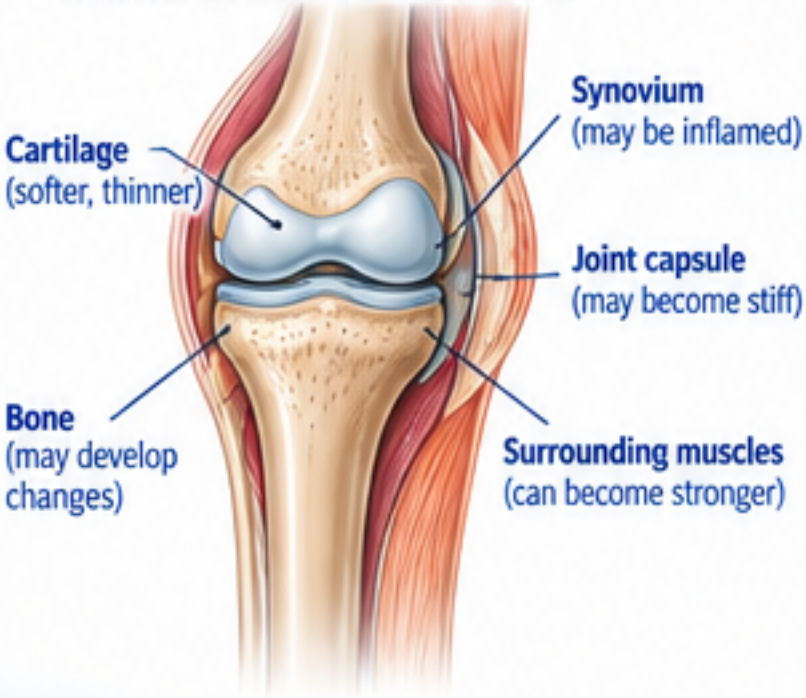


MORE CONFIDENCE
Do what you enjoy again.



MORE ACTIVITY
Greater independence and a better quality of life.

ARTHRITIS AFFECTS MORE THAN CARTILAGE



Cartilage (softer, thinner)

Synovium (may be inflamed)

Bone (may develop changes)

Joint capsule (may become stiff)

Surrounding muscles (can become stronger)



YOUR X-RAY IS NOT YOUR DESTINY
Structural changes on an X-ray do not by themselves determine how much you can do.



REST IS NOT THE ONLY ANSWER
Appropriate movement and progressive strengthening are important parts of arthritis care.



THE GOAL IS NOT A "PERFECT" JOINT
The goal is a joint — and a person — that can function better and participate more fully in life.



PRO-FIT PEARL

"We may not be able to make every X-ray look younger. But we can often help the person move stronger, function better and live more confidently."

ARTHROSIS MAY CHANGE YOUR JOINT. IT DOESN'T HAVE TO DEFINE YOUR LIFE.

More Movement. More Moments. A Brighter Tomorrow.



Keep doing what you love...



More time with loved ones...



Greater independence every day...

Move Better. Live Fuller. Stay Independent.

Trusted Information. Real People. Practical Solutions.

WHAT FOOD MAY BE HARMING YOUR JOINTS?

Before blaming your knees, look at what regularly lands on your plate.

Food Habits Today for More Active Tomorrows.

HAVE LESS OFTEN

These can contribute to inflammation, weight gain and overall poorer joint health when consumed frequently.

Sweets and mithai (high in sugar)

Deep-fried snacks (samosa, pakora, chips, etc.)

Fast food and high-fat processed foods

Sugary drinks (cola, packaged juices, sweetened tea/coffee)

Packaged and ultra-processed foods (chips, biscuits, instant noodles, etc.)

Processed meats (sausages, bacon, cold cuts)

Excess alcohol (harmful for joints and especially important to avoid in gout)

Large portions of refined carbohydrates (white rice, maida products) — may contribute to weight gain

It's not just one food... It's the overall pattern!

Choose wisely for healthier joints and a healthier you!

ENJOY IN MODERATION

These are not "bad" foods, but portion size and frequency matter.

Ghee, butter and high-fat dairy (keep portions small)

Traditional sweets (occasional treats are fine)

Red meat (limit frequency and portion size)

Coconut and coconut-based foods (healthy in small amounts)

Starchy foods like potato (can be part of a balanced diet)

Nuts and seeds (healthy, but high in calories)

GOUT ≠ ALL ARTHRITIS

Diet matters more in gout. High-purine foods (like some meats, organ meats, certain fish and alcohol) can trigger attacks.

Organ meats (liver, kidney, etc.)

Some fish (sardines, anchovies)

Alcohol (especially beer)

These may not be relevant for osteoarthritis or other types of arthritis. Always follow personalised advice.

INDIAN FOOD MYTHS — WHAT DOES THE EVIDENCE SAY?

Let's separate facts from myths. Most common foods do not directly "cause" arthritis in most people.

"Tomato causes arthritis."

NOT PROVEN

No good evidence that tomatoes cause or worsen arthritis in most people.

"Curd increases joint pain."

NOT A GENERAL RULE

Most people can enjoy curd. Some may feel symptoms with certain foods — this varies between individuals.

"Rice is bad for knees."

NO

Rice does not damage knees. The issue is often overall calorie intake and weight gain, not rice by itself.

"Potato causes inflammation."

NO STRONG EVIDENCE

Potato can be part of a healthy diet. Deep-frying and large portions are not ideal.

"Dal is bad for arthritis."

NO

Pulses and dals are healthy sources of protein and are safe for most people with arthritis.

"Sour foods like tamarind worsen arthritis."

NO GENERAL EVIDENCE

Sour foods are not proven to worsen arthritis. Most people can include them as part of a balanced diet.

There is no single "good" or "bad" food for everyone. What matters is the big picture — your overall diet, body weight, activity and general health.

PRO-FIT PEARL

"Don't build your diet around one 'bad' food or one 'miracle' food. Build a healthier eating pattern."

NEXT: THE JOINT-FRIENDLY INDIAN PLATE

What should we eat more of?

TURN TO PAGE 6

MOVE, DON'T PROTECT TOO MUCH

My joints hurt. Should I exercise or rest?

Movement Today for a Brighter Tomorrow.

PAIN IS NOT ALWAYS YOUR ENEMY

Think of pain as your body's messenger. It is there to protect you.



Pain is your body's call for attention. Listen to it. Understand it. Respond to it. Don't simply silence it — or become frightened of it.

Pain asks for attention — not surrender.

THREE WAYS WE RESPOND TO PAIN



IGNORE PAIN

"It's nothing. It will go away."



Problem may go unassessed and can get worse over time.



FEAR PAIN

"I must stop moving."



Less activity leads to weaker muscles, more stiffness and loss of confidence.



UNDERSTAND PAIN

"What is my body telling me?"



Assess → Adapt → Treat → Strengthen → Keep Living.

THE CYCLE OF DOING LESS

Less movement can make pain and disability worse.



Break the cycle. Choose movement for a brighter tomorrow.

THE CYCLE OF STAYING ACTIVE

Safe, regular movement helps you live better for longer.



WHEN TO MOVE, MODIFY OR REST?

Use this simple guide. When in doubt, seek professional advice.



KEEP MOVING

- Mild to moderate pain
- Stiffness that eases with activity
- Symptoms settle within a few hours
- You feel better or the same after activity

MOVEMENT IS GOOD FOR YOU.



MODIFY

- Noticeably increased pain
- More fatigue than usual
- Symptoms last much longer after activity
- Reduce intensity, range or duration and reassess

DO LESS, BUT DON'T STOP.



STOP & SEEK ADVICE

- Severe pain
- Hot, swollen joint
- Inability to bear weight
- Recent injury (fall, twist, etc.)
- Fever or feeling unwell
- Significant unexplained deterioration

REST AND GET IT CHECKED.

"I was afraid exercise would worsen my knee pain. But with the right guidance, I am now stronger, more confident and doing the things I love again."

Movement has given me my life back.



SIMPLE WAYS TO BE MORE ACTIVE (START WHERE YOU ARE)



Get up and sit down from a chair.



Walk regularly (at your own pace).



Do muscle strengthening exercises (as advised).



Use stairs when possible (and safe).



Include gentle flexibility exercises.



Get back to the activities you enjoy.



PRO-FIT PEARL

"Your joint doesn't need to become younger. It needs to become more capable."

DON'T ASK ONLY: 'HOW MUCH DOES IT HURT?' ALSO ASK: 'WHAT CAN I DO TODAY THAT I COULDN'T DO BEFORE?'

REAL PATIENT JOURNEY

LIVING FULLY WITH KNEE OSTEOARTHRITIS



WORLD
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DAY
12 OCTOBER

PEOPLE | PROGRESS | POSSIBILITIES

*“Healthier
Joints
Brighter
Tomorrows”*

How structured physiotherapy helped
Chidambaram Jois return to the life he loves



Chidambaram Jois, 62

“I have just started living now. Miles to go before I sleep...”



WHEN SIMPLE THINGS BECAME DIFFICULT

It started as a dull ache in my knees, especially after climbing stairs. Gradually, even ordinary walking and visits to the temple became a chore.

A CLEAR DIAGNOSIS, AND A CHOICE

An orthopaedic consultation confirmed knee osteoarthritis. I was told that if my condition worsened, knee replacement could eventually be one of the options. He also explained that structured physiotherapy and conservative management can be very effective in many people.

TRUSTING THE PROCESS

I chose to try conservative management. Under the guidance of a qualified physiotherapist, I began a structured exercise programme. Every ten days, my programme was reviewed and modified —increasing the difficulty when I improved and easing it when pain flared. It was slow at times, and occasionally frustrating, but I trusted the process and stayed consistent.

FROM MANAGING PAIN TO LIVING LIFE

Today, I can walk, trek, cycle and garden without the knee pain that once restricted me. I cycle around 40 kilometres, spend hours in my garden and enjoy travelling and sightseeing.

Retirement has given me the opportunity to pursue things I had always dreamed of. Today, Geeta and I travel around India and the world, explore new places, trek, sightsee and enjoy a life that sometimes feels surprisingly youthful.



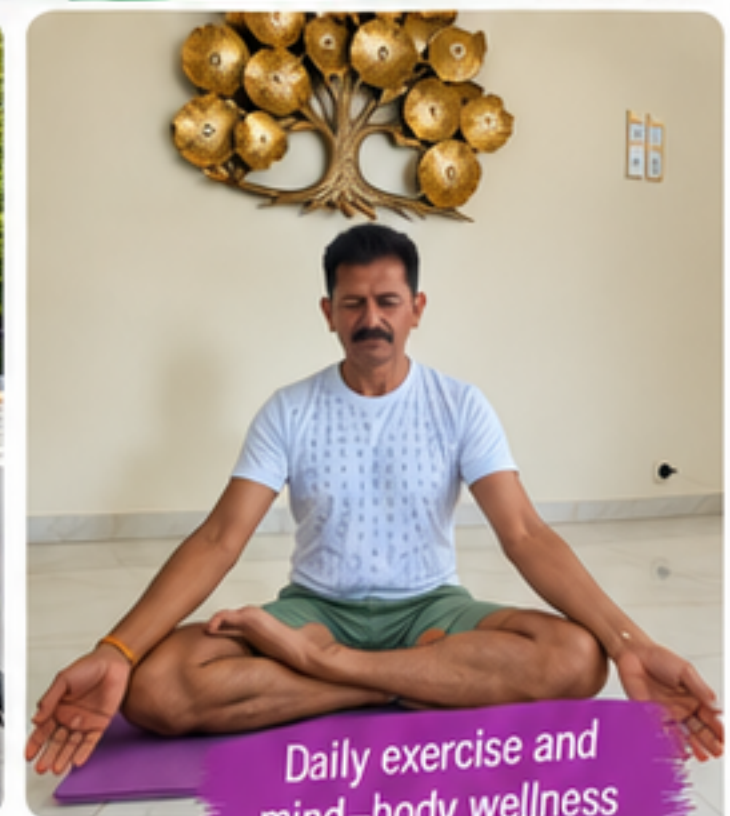
Trekking and exploring new places



Travelling and sightseeing together with Geeta



Cycling keeps me fit and active



Daily exercise and mind-body wellness

“I have just started living now. Miles to go before I sleep...”

— Chidambaram Jois, 62



Overcome daily limitations



Personalised physiotherapy



Stronger, more confident



Travel | Trek | Cycle | Garden
Live an active retired life



ONE JOURNEY. NOT EVERY JOURNEY.

Knee osteoarthritis affects people differently. Some people achieve substantial improvement in pain and function through appropriately prescribed exercise, education and conservative management, while others may ultimately benefit from surgery. The appropriate pathway is individual – not predetermined.

THE RIGHT EXERCISE FOR ARTHRITIS

Movement is medicine — but the dose matters.

Stronger
Joints
Brighter
Tomorrows

Exercise is
not just about
living longer...
it's about
living better!

THE 4 PILLARS OF EXERCISE FOR JOINT HEALTH

1 MOBILITY

Keep the joint moving.

- Gentle range-of-motion exercises
- Maintain flexibility
- Reduce stiffness



2 STRENGTH

Build the joint's support system.

- Stronger muscles around the joint
- Better stability
- Helps you manage everyday loads



PROGRESSION

Start where you are

- Adapt
- Build gradually
- Keep going



4 BALANCE & FUNCTION

Train for real life.

- Sit-to-stand, stairs, balance training
- Improve coordination
- Helps prevent falls
- Keeps you independent in daily activities



3 AEROBIC ACTIVITY

Build endurance and whole-body health.

- Walking, cycling, swimming or other tolerable activities
- Improves heart health, energy and mood
- Helps with weight management



I WALK EVERY DAY.
ISN'T THAT ENOUGH?

Walking is excellent — and you should keep doing it. But walking and strengthening are not the same thing.

WALKING GIVES YOU:



- Better endurance
- Improved circulation
- More confidence
- Helps weight management
- Enjoyment and social connection

STRENGTHENING GIVES YOU:



- Stronger muscles
- Better joint support
- Functional strength
- Ability to manage everyday activities (like stairs, getting up from a chair, carrying bags)

Both are important. Together they help you do more of what you love.

HOW MUCH PAIN DURING EXERCISE IS OKAY?

Some discomfort can be normal. Use this guide:

KEEP GOING

- Mild pain or discomfort
- Stiffness that eases with movement
- Symptoms settle within a few hours
- You feel better or the same after activity

MOVEMENT IS LIKELY HELPING YOU.

MODIFY

- More discomfort than usual
- Symptoms last much longer after exercise
- You feel unusually tired
- Reduce intensity, range or duration and reassess

DO LESS, BUT DON'T STOP.

STOP & SEEK ADVICE

- Sharp or severe pain
- Hot, swollen joint
- Inability to bear weight
- Recent injury (fall, twist, etc.)
- Significant worsening of symptoms
- Feeling unwell (fever, etc.)

STOP AND GET IT CHECKED.

WATCH WHAT HAPPENS AFTER EXERCISE

Your body's response over the next few hours and into the next day helps us know if the exercise dose was right.

- Symptoms settle — good sign.
- Symptoms much worse or lasting longer than usual — reduce and reassess.
- Keep a simple activity and symptom diary if needed.

It's not just about what you feel during exercise, but how you feel afterwards.

EXERCISE SHOULD MATCH THE PERSON — NOT JUST THE X-RAY.

Two people can both have "knee osteoarthritis" and need different exercise programmes because of their:



Strength and fitness



Mobility and flexibility



Body weight and overall health



Balance and confidence



Daily activities and lifestyle



Goals (what matters to you)



Other medical conditions



Personal preferences and support at home



PRO-FIT PEARL

"The best exercise isn't the hardest exercise. It's the one your body can adapt to, progress with — and continue doing."



Don't aim for a perfect knee. Aim for a more capable you.

Move Better. Live Fuller. Stay Independent.

Trusted Information. Real People. Practical Solutions.

YOUR 10-MINUTE JOINT HEALTH ROUTINE

Small steps every day. A stronger, more active you.

Move Today for a More Active Tomorrow.

You don't need a gym. You just need a little time, a safe place and a commitment to yourself.

BEFORE YOU START



Use a sturdy chair and a safe, non-slippery surface.



Wear comfortable clothes and supportive footwear (if needed).



Start slowly and breathe normally.



If you have significant pain, dizziness, chest discomfort or feel unwell, stop and seek advice.

THE GOAL

- ✓ Move your joints
- ✓ Build stronger muscles
- ✓ Improve balance and confidence
- ✓ Keep doing the things you love
- ✓ Feel better in daily life

A SIMPLE 10-MINUTE ROUTINE (Do these in order)

Repeat once daily (or as advised). Each exercise takes about 30–60 seconds.

1 GENTLE WARM-UP (1 minute)



- March on the spot while sitting or standing.
- Move your arms gently.
- Get your body and joints ready.

2 ANKLE PUMPS (30 seconds)



- While sitting, gently point your toes up and down.
- Helps ankle mobility and blood circulation.
- Do 10–15 repetitions.

3 KNEE EXTENSIONS (30–60 seconds each leg)



- Sit tall, straighten one knee.
- Hold for 3–5 seconds.
- Lower slowly.
- Repeat 10–15 times on each leg.

4 CHAIR SIT-TO-STAND (1 minute)



- Stand up from a chair, then sit down slowly.
- Use your hands if needed.
- Do 8–12 repetitions.
- Builds leg strength for daily activities like walking and stairs.

5 HIP ABDUCTIONS (30–60 seconds each leg)



- Stand and hold a chair.
- Move one leg gently out to the side.
- Keep your body upright.
- Do 10–15 repetitions on each leg.

6 HEEL RAISES (30–60 seconds)



- Stand and hold a chair.
- Rise up on your toes, then come down slowly.
- Do 10–15 repetitions.
- Helps calf strength and balance.

7 MINI SQUAT (30–60 seconds)



- Hold a chair for support.
- Bend your knees slightly — as if you are going to sit.
- Keep your back straight.
- Do 8–12 repetitions.
- Don't go too deep.

8 GENTLE LUNGES (30–60 seconds each leg)



- Hold a chair for balance.
- Take a small step forward.
- Bend both knees slightly.
- Return and repeat on the other leg.
- Do 8–10 repetitions on each leg.

9 BALANCE PRACTICE (30–60 seconds each leg)



- Stand near a chair or wall.
- Lift one foot slightly off the ground.
- Hold for 10–15 seconds.
- Repeat on the other leg.
- Helps stability and confidence.

10 GENTLE STRETCHES (1 minute)



- Hold each stretch for 15–20 seconds.
- Breathe normally.
- Do not bounce.

TIPS FOR SUCCESS



Make it a daily habit (same time each day).



Start where you are and progress gradually.



Focus on good form, not speed.



It's normal to feel some muscle fatigue.



Keep a simple diary of what you do.



Involve your family — it's more fun together!



REMEMBER

- ✓ A little every day is better than a lot sometimes.
- ✓ You are not exercising to become an athlete.
- ✓ You are exercising to stay independent.
- ✓ Move within a comfortable range.
- ✓ Quality matters more than quantity.
- ✓ Over time, you will likely feel stronger, more confident and better able to do your daily activities.

Movement today builds a brighter tomorrow.



You don't have to do everything. You just have to do something — and keep doing it.



PRO-FIT PEARL

“Consistency, not intensity, creates real change.”

Move Better. Live Fuller. Stay Independent.

Trusted Information. Real People. Practical Solutions.

MY X-RAY LOOKS BAD. SHOULD I BE WORRIED?

An X-ray is an important part of the story. It is not the whole story.

Pictures
Don't Tell
the Whole Story.
People Do.

Treat
the person,
not just
the picture.

ALL PIECES TOGETHER GIVE THE FULL PICTURE



SAME X-RAY CHANGES, DIFFERENT LIVES

PERSON A

Significant X-ray changes but functioning well



Narrowed joint space

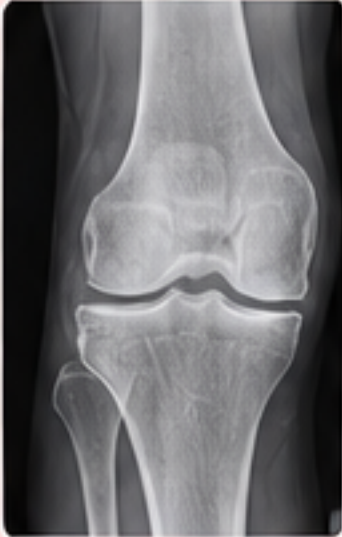
Bone spurs (osteophytes)



"My X-ray looks severe, but with exercise, weight management and the right guidance, I can walk, do my daily activities and enjoy life."

PERSON B

Less dramatic X-ray changes but significant symptoms



"My X-ray doesn't look too bad, but I have more pain and difficulty with daily activities. We are working on a treatment plan for me."

WHY THERE CAN BE A MISMATCH

- X-ray changes often do not match the amount of pain a person feels.
- Pain is influenced by many factors — including muscle strength, joint alignment, inflammation, previous injuries, activity levels, weight, and even how the nervous system processes pain.
- Some people have significant X-ray changes but very little symptoms.
- Others may have milder X-ray changes but considerable pain and functional limitations.
- That's why we treat the person, not just the picture.



An X-ray gives us information, but it doesn't know how you feel, how you move or what you want to do in life. That's the human part of the story — and it matters most."

COMMON WORDS IN X-RAY REPORTS — WHAT DO THEY MEAN?

Term	What it means (in simple language)
Joint space narrowing	The cartilage (cushion) between the bones is thinner.
Osteophytes	Bone spurs that often develop with osteoarthritis.
Subchondral sclerosis	Bone looks denser (a common response to increased load).
Subchondral cysts	Small fluid-filled areas in the bone.
Degenerative changes	Overall signs of osteoarthritis (wear and repair over time).

These are commonly seen in osteoarthritis. They help guide treatment, but they do not by themselves decide what you can or cannot do.

WHEN TO BE MORE CONCERNED

- ✓ Symptoms are getting steadily worse.
- ✓ Pain or stiffness is significantly limiting daily activities.
- ✓ There is persistent swelling, instability or frequent giving way.
- ✓ Conservative treatment (exercise, weight management, medications and other measures) has not provided sufficient relief.
- ✓ You are unable to do the activities that matter most to you.
- ✓ Your doctor may then discuss whether further investigations or surgical consultation are appropriate.

KEY TAKEAWAYS

- ✓ An X-ray is one piece of the puzzle, not the final answer.
- ✓ People with similar X-rays can have very different symptoms and function.
- ✓ Treatment decisions are based on your symptoms, examination, lifestyle and goals — not the X-ray alone.
- ✓ You can often do much more than the X-ray suggests.
- ✓ Early attention and the right treatment can help you stay active and independent.
- ✓ Keep the bigger picture in mind — it's about your life, not just your X-ray.

PRO-FIT PEARL

"We don't treat an X-ray. We treat the person who has the X-ray."

The goal is not a perfect X-ray. The goal is an active, fulfilling life.



DO I NEED JOINT REPLACEMENT?

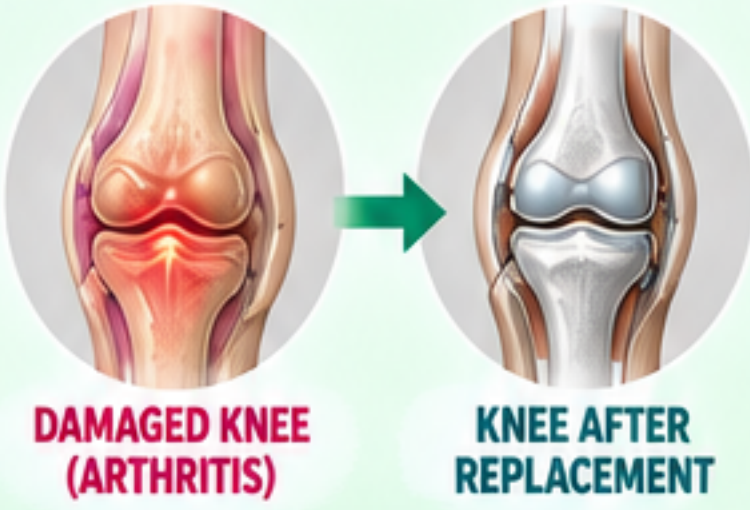
Making the right decision, at the right time, for the right reasons.

Right Patient.
Right Time.
Brighter Tomorrows.

Surgery is not a failure. It is a valid option when conservative treatment no longer gives the relief you need to live well.

WHAT IS JOINT REPLACEMENT?

In a knee (or hip) replacement, the damaged joint surfaces are removed and replaced with smooth, artificial components. The goal is to reduce pain, improve function and help you get back to the activities that matter to you.



“We don’t replace an X-ray. We replace a joint when the joint is preventing a person from living the life that matters to them.”

THE DECISION PATHWAY A stepwise approach to reach the right decision together.



COMMON REASONS PEOPLE CHOOSE JOINT REPLACEMENT

- ✓ Persistent pain that limits daily activities and quality of life.
- ✓ Difficulty walking, climbing stairs or getting up from a chair.
- ✓ Poor sleep due to pain.
- ✓ Reduced independence.
- ✓ Conservative treatments have not provided enough relief.
- ✓ Desire to return to meaningful activities (e.g. walking, travelling, playing with grandchildren).



More Life Ahead.

WHAT JOINT REPLACEMENT CAN HELP WITH

- ✓ Significant reduction in pain in most people.
- ✓ Improved mobility and function.
- ✓ Better sleep and quality of life.
- ✓ Return to everyday activities that were difficult or impossible.
- ✓ Increased independence.
- ✓ Modern implants are designed to be long-lasting.

Many people describe their replacement as a “second lease of active life”.

WHAT JOINT REPLACEMENT CANNOT DO

- ✗ It may not give you a “perfect” knee.
- ✗ It has limitations (e.g. high-impact sports like running or competitive jumping are usually not recommended).
- ✗ It does not remove all pain in every person.
- ✗ Recovery takes time and effort — rehabilitation is essential.
- ✗ It has risks and potential complications (like any surgery).
- ✗ The implant may eventually wear out, especially in younger, more active individuals.

Realistic expectations lead to higher satisfaction.

WHO MAY BE SUITABLE?

- ✓ People with moderate to severe arthritis who have persistent symptoms despite appropriate non-surgical treatment.
- ✓ People whose pain and functional limitations significantly affect their daily life.
- ✓ People who are medically fit for surgery.
- ✓ Both younger and older adults may be suitable — age alone is not a deciding factor.

WHO MAY NEED MORE DETAILED DISCUSSION?

- ✓ People with other medical conditions (e.g. diabetes, heart or lung disease).
- ✓ People who are very overweight (weight management may be advised first).
- ✓ Younger, very active individuals.
- ✓ People with previous surgeries or complex joint problems.
- ✓ Anyone who is unsure or has concerns — a detailed discussion with an orthopaedic surgeon is important.

PRO-FIT PEARL

Joint replacement is not giving up. It is choosing to get more out of life.

Less Pain. More Possibilities.



Today's Decision for a Brighter Tomorrows.

Move Better. Live Fuller. Stay Independent.

Trusted Information. Real People. Practical Solutions.



**WORLD
ARTHRITIS
DAY**
12 OCTOBER

PEOPLE | PROGRESS | POSSIBILITIES

*"Healthier
Joints
Brighter
Tomorrows"*



**ASK
THE
EXPERT**

KNEE REPLACEMENT AND BEYOND

Answers to Common Questions
on Arthritis, Knee Replacement
and Long-Term Joint Health



Dr. (Air Cmde) Vikas Kulshrestha
Consultant – Orthopaedics
Manipal Hospital Electronics City, Bengaluru



**LESS PAIN
MORE FREEDOM**



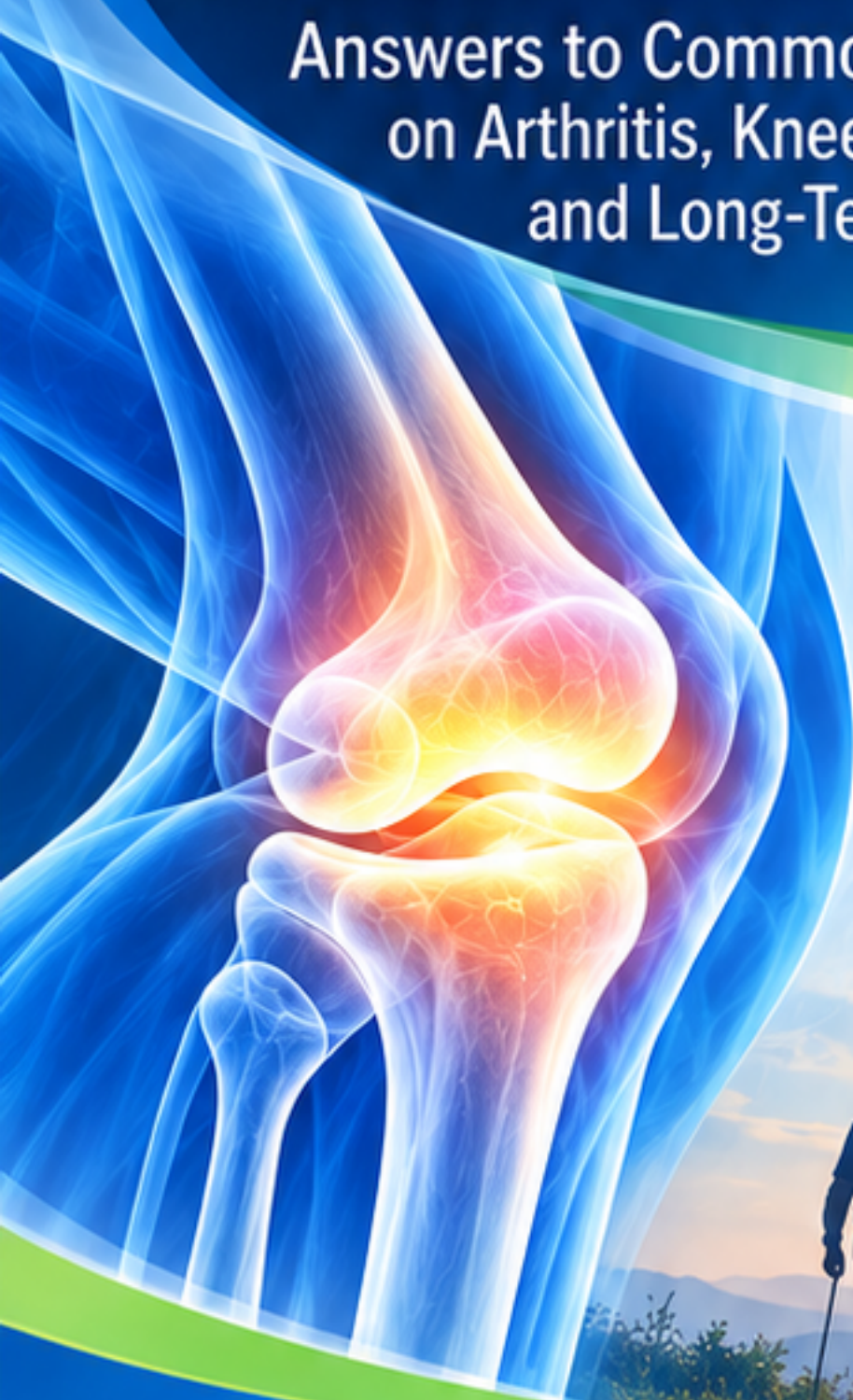
**STAY ACTIVE
DO WHAT YOU ENJOY**



**LIVE
INDEPENDENTLY
WITH CONFIDENCE**



**BETTER
YEARS AHEAD**



*Move Better. Live Fuller.
Stay Independent.*



People. Care. Possibilities.

**EXPERT VOICE**

Meet the Expert

Dr (Air Cmde) Vikas Kulshrestha

Consultant – Orthopaedics
Manipal Hospital Electronics City, Bengaluru

A distinguished orthopaedic surgeon, teacher and mentor with over 33 years of experience, dedicated to restoring mobility, reducing pain and helping people return to the activities they love.



“My focus is on restoring mobility, reducing pain and helping people return to the activities they love.”
— Dr Vikas Kulshrestha

Professional Journey



Armed Forces Career
Proudly served in the Armed Forces Medical Services for many years, caring for service personnel and their families across various military hospitals.



Headed Major Rehabilitation Department
Led the Rehabilitation Department in Armed Forces Hospitals, overseeing comprehensive post-injury and post-surgical care. Mentored physiotherapists and rehabilitation teams, and played a key role in developing and implementing many post-surgical Standard Operating Procedures (SOPs) and rehabilitation protocols.



International Training
Gained extensive international exposure in joint replacement, arthritis surgery, trauma and sports injuries.



Teaching & Mentoring
Trained and mentored many young orthopaedic surgeons in India and abroad. Known for promoting a collaborative, multidisciplinary approach to patient care.



Research & Academic Work
Author of over 50 peer-reviewed publications and academic contributions.



Advanced Techniques
Experienced in robotic and computer-assisted joint replacement, revision arthroplasty and complex reconstruction.



Patient-Centred Care
Believes in an evidence-based, personalised treatment approach, tailored to each patient's needs and goals.

Key Areas of Expertise



Hip & Knee Replacement Surgery (Primary, Complex & Revision)



Partial Knee Replacement Surgery



Knee Preservation Surgery



Sports Injury & Arthroscopic Surgery



Shoulder Replacement & Instability Surgery



Pelvi-Acetabular Trauma & Complex Fracture Reconstruction



Bone Tumour & Limb Salvage Surgery



Adult Knee Deformity & Realignment (Osteotomy)



Joint Preservation & Cartilage Resurfacing Procedures

At a Glance



33+ years of clinical experience



18,000+ orthopaedic surgeries



9,000+ primary joint replacements



1,000+ revision joint replacements



50+ peer-reviewed publications



NMC-recognised Professor of Orthopaedics for 16+ years



Learning from a pioneer

With Dr Chitranjan S. Ranawat

A mentor and a pioneer in modern joint replacement. This experience has been an important influence in Dr Vikas Kulshrestha's professional journey.

Coming Soon to Pro-Fit & Timeline Clinics

Details on Page 12D

**EXPERT VOICE**

DO I REALLY NEED A KNEE REPLACEMENT?

Common questions. Clear answers.

Dr (Air Cmde) Vikas Kulshrestha explains what patients should know before making a decision.



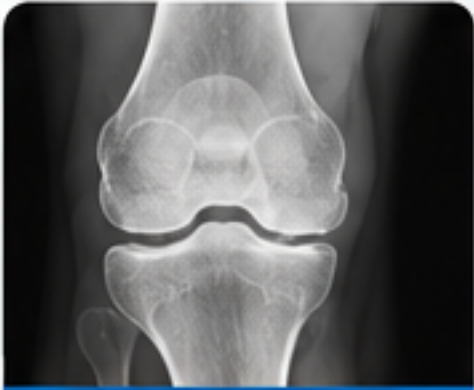
Dr (Air Cmde) Vikas Kulshrestha
Consultant – Orthopaedics
Manipal Hospital
Electronics City, Bengaluru

1

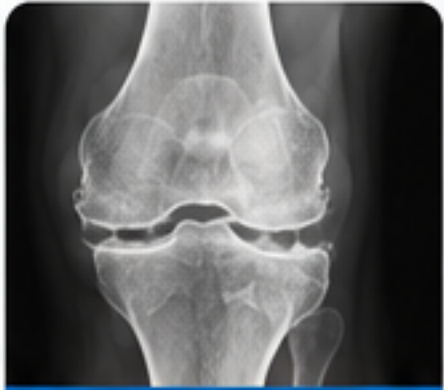
My X-ray shows severe osteoarthritis. Does that automatically mean I need a knee replacement?

No. A severe X-ray does not always mean that you must undergo knee replacement. The decision depends on your symptoms, your functional limitations and the specific characteristics of your knee.

Many patients with severe changes on X-ray do reasonably well with non-surgical treatment, especially if their pain is tolerable and daily activities are not significantly affected.



Moderate changes on X-ray



Severe osteoarthritis on X-ray

2

How does the surgeon decide between joint preservation procedures and knee replacement?

The treatment decision is individualised. I consider several factors such as your symptoms, age, activity level, the alignment of your leg, the stability of your ligaments, the extent and location of cartilage damage and your overall health.

There is no single solution for everyone.

Depending on these factors, the options may range from structured rehabilitation and other non-surgical measures, to joint preservation procedures, to partial knee replacement, or to total knee replacement.

Key factors I consider



Your symptoms and functional limitations



Alignment of your leg



Stability of your ligaments



Extent and location of cartilage damage

Options may include:



Structured rehabilitation and other non-surgical measures



Joint preservation procedures



Partial knee replacement



Total knee replacement

3

What conservative (non-surgical) treatment should generally be tried first?

In most patients, non-surgical treatment should be tried first, especially when pain is manageable and daily activities are not severely restricted. This typically includes:



Weight reduction
Reducing excess body weight decreases load on the knee.



Lifestyle modification
Avoiding activities that worsen pain and adopting knee-friendly habits.



Knee muscle strengthening
Structured exercises to improve the strength and support around the knee.



Balance training
To improve stability and reduce the risk of falls.



Judicious use of safe pain-control drugs
To relieve pain and enable you to stay active while continuing rehabilitation.

Move Better. Live Fuller. Stay Independent.

People. Care. Possibilities.



EXPERT VOICE

WHEN IS THE RIGHT TIME?

Timing | Partial vs Total Replacement | Medical Fitness

Dr (Air Cmde) Vikas Kulshrestha

Consultant – Orthopaedics

Manipal Hospital Electronics City, Bengaluru



4

Is there such a thing as having joint replacement too early – or waiting too long?

Finding the right time

TOO EARLY

RIGHT TIME FOR THE INDIVIDUAL

TOO LATE

- Prosthetic joint matches the natural joint by only 80–85%.
- So, surgery should not be done unless your daily life is affected.

Delaying too long can lead to:

 Loss of muscle strength

 Increasing deformity

 Further bony damage

 More complex surgery

 Higher risk due to other medical problems with increasing age.

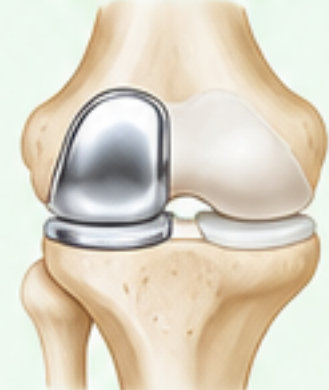
Absolutely. Any prosthetic joint only matches the biological joint in feel, function and longevity by maximum 80–85%. Hence surgery should only be offered when we feel that the patient’s day-to-day life is affected – for example, when their routine activities such as walking, climbing stairs or getting up from a chair are significantly hampered, or when they need strong painkillers frequently to remain comfortable.

At the same time, delaying surgery for too long is also not ideal. With time, there can be loss of muscle strength, increasing deformity and further bony damage, which can make the surgery more complex. Increasing age can also lead to additional medical problems, which may increase the risk associated with surgery.

5

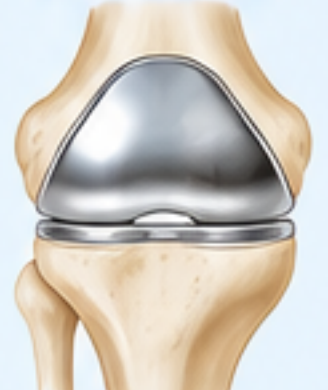
When is a partial knee replacement an option instead of a total knee replacement?

PARTIAL KNEE REPLACEMENT



- Only one compartment resurfaced
- Ligaments retained
- More natural feel
- Earlier and faster recovery (in suitable patients)

TOTAL KNEE REPLACEMENT



- Whole joint surfaces replaced
- Used when arthritis involves multiple compartments

A partial knee replacement may be an option when the arthritis is limited to only one compartment of the knee, with the other compartments still relatively preserved, and when the ligaments are stable. In such selected patients, a partial knee replacement can give very good results.

We have extensive experience with partial knee replacement and have performed a large number of these surgeries over approximately three decades. Patients who are suitable for partial knee replacement often experience a more natural feel in the knee and a quicker recovery compared to total knee replacement.

6

Do age, obesity, diabetes or other medical conditions rule someone out of joint replacement?

No. Joint replacement can be offered at any age as long as the patient’s heart and lung function allows safe and early recovery from surgery.

Obesity and diabetes do increase the risk of infection and other complications. However, with good control of diabetes and a weight reduction programme, many patients can still undergo knee replacement safely and benefit significantly from the surgery.

Key considerations



AGE

Can be offered at any age if medically fit.



HEART & LUNGS

Need to allow safe and early recovery.



OBESITY & DIABETES

Increase risk of infection and complications. Controlled diabetes and weight reduction help make surgery safer.

>> NEXT Page 12D: What can knee replacement realistically achieve – and how should you prepare and rehabilitate?

Move Better. Live Fuller. Stay Independent.

People. Care. Possibilities.

**EXPERT VOICE**

PREPARE WELL. RECOVER WELL. RETURN TO LIFE.

Dr (Air Cmde) Vikas Kulshrestha
Consultant – Orthopaedics
Manipal Hospital Electronics City, Bengaluru



Helping you get back to the things you enjoy.

7

What can modern knee replacement realistically give a patient – and what can it not promise?

Knee replacement can substantially relieve pain, restore mobility and improve quality of life. After modern knee replacement, you can get back to most of your daily activities.

However, your ability to squat or sit cross-legged depends on your pre-operative range of movement. In general, many daily activities can be performed with 110–115 degrees of knee bending.

NEW POSSIBILITIES IN DAILY LIFE

-  Less pain in daily life
-  Improved mobility
-  Get back to most of your daily activities
-  Quality of life dramatically improves



8

How important is preparation before surgery?

You need to be mentally, physically and medically fit. You should optimise your muscle strength, and your diet and nutrition well before surgery to win the ‘match’.

PREPARE FOR THE MATCH



**MENTALLY FIT**
Understand the procedure and recovery

**PHYSICALLY FIT**
Optimise your muscle strength

**MEDICALLY FIT**
Be medically fit

**DIET AND NUTRITION**
Optimise your diet and nutrition

9

What role does rehabilitation play after surgery?

Rehabilitation goals are simple but extremely important. Most of the exercises are straightforward, but the patient needs a coach — either a trained family member or a professional physiotherapist.

SAME EVENING

Stand and begin walking

FIRST 24 HOURS

- Deep breathing
- Ankle pumps

48–72 HOURS

- Work toward full extension
- Straight-leg raise

FIRST 2 DAYS

- Toilet training
- Stair training
- Walking with support

NEXT 3 WEEKS

- Progressive knee bending
- Progressive strengthening



A TEAM APPROACH MAKES A DIFFERENCE

Rehabilitation is a partnership between you, your family and your physiotherapy team. At **Pro-Fit Physiotherapy** and **Timeline Fitness Physiotherapy**, structured, supervised rehabilitation can help you recover faster, regain confidence and return to the activities you value.

Move Better. Live Fuller. Stay Independent.

People. Care. Possibilities.

**EXPERT
VOICE**

FINAL QUESTIONS. A BROADER PERSPECTIVE.

Dr (Air Cmde) Vikas Kulshrestha
Consultant – Orthopaedics
Manipal Hospital Electronics City, Bengaluru





10

How long does a knee replacement last? Will I need another surgery in the future?

Modern knee replacements are very durable. In most patients, they can last for 15–20 years or more. Many people continue to do well even beyond this period.

However, the implant is not a lifetime guarantee, especially in younger, more active patients. Over time, there can be wear and loosening, which may require a revision surgery.

Regular follow-up with your orthopaedic surgeon is important to monitor the implant, even if you are not having any problems.

TYPICAL LONGEVITY



In most patients
**15–20 years
or more**

Many people
continue to do well
even beyond
this period.

11

What can I do to look after my knee replacement in the long term?

After knee replacement, it is important to maintain a healthy lifestyle and keep your muscles strong. Regular, low-impact exercises such as walking, swimming and cycling are beneficial.

Try to maintain a healthy body weight, as excess weight increases the load on the knee implant.

Avoid high-impact activities and take care to prevent falls.

Regular follow-up with your orthopaedic surgeon will help ensure that any issues are detected early and managed effectively.

KEY TIPS FOR LONG-TERM CARE



Keep your muscles strong with regular, low-impact exercise.



Maintain a healthy body weight.



Avoid high-impact activities and prevent falls.



Have regular follow-up with your orthopaedic surgeon.

A FINAL PERSPECTIVE FROM DR VIKAS KULSHRESTHA

“Knee replacement can be life-changing for patients with severe knee problems who have not improved with non-surgical treatment. The aim is not just to reduce pain, but to help you return to an active, independent and fulfilling life. A well-informed decision, realistic expectations and good preparation and rehabilitation are key to achieving the best possible results.”



COMING SOON TO PRO-FIT PHYSIOTHERAPY & TIMELINE FITNESS PHYSIOTHERAPY

Dr (Air Cmde) Vikas Kulshrestha is expected to soon be available for specialist orthopaedic consultations at Pro-Fit Physiotherapy and Timeline Fitness Physiotherapy. Known for his philanthropic outlook, he may also extend concessional or free consultations to deserving patients as part of his commitment to community service.

Details and schedule will be announced once finalised.

**Less Pain
More Freedom**

**Stay Active
Do What You Enjoy**

**Live Independently
with Confidence**

**Better Years
Ahead**

BEFORE & AFTER JOINT REPLACEMENT

Rehabilitation Starts Before Surgery — and Continues After It.

Prepare
Recover
Rebuild
Get Back to
What You Love.

The surgery changes the joint surfaces. Rehabilitation restores the person's function.

A TEAM EFFORT FOR A BETTER TOMORROW

Surgeon. Physiotherapist. You. Together for the best outcome.



SURGEON

Performs the surgery and guides your care



PHYSIOTHERAPIST

Designs and guides your rehabilitation



YOU

Do the exercises, stay motivated and take an active role

“A successful joint replacement is not just about a new joint. It is about a stronger, more active you.”

THE RECOVERY JOURNEY

Five stages. One goal — a better, more active life.

1 PREHAB

Get ready for a better recovery



- ✓ Build strength (especially quadriceps and hip muscles)
- ✓ Improve joint movement
- ✓ Learn to use walking aids if needed
- ✓ Manage weight and other medical conditions
- ✓ Prepare your home for safety
- ✓ Understand what to expect

A stronger you, goes into surgery — and comes out stronger.

2 SURGERY

A new beginning



- ✓ Damaged joint surfaces are removed
- ✓ Artificial components are placed
- ✓ Modern techniques are safe and effective
- ✓ Most patients walk with support within a day or two

Surgery changes the joint.

3 EARLY RECOVERY

First steps count (0–6 weeks)



- ✓ Control pain and swelling
- ✓ Regain knee/hip movement
- ✓ Activate your muscles
- ✓ Learn safe walking and transfers (bed, chair, toilet)
- ✓ Prevent complications (e.g. blood clots, chest issues)

Small steps. Big progress.

4 REBUILD

Get stronger (6 weeks – 3 months)



- ✓ Progress strengthening exercises
- ✓ Improve balance and confidence
- ✓ Practice stairs and daily activities
- ✓ Increase walking distance
- ✓ Return to light household tasks and outdoor activities

Build strength. Build confidence.

5 RETURN TO LIFE

Do what you love (3–12 months and beyond)



- ✓ Greater independence
- ✓ Return to your favourite activities (walking, travel, gardening, playing with grandchildren, etc.)
- ✓ Continue exercises for long-term joint health
- ✓ Maintain a healthy weight and active lifestyle

A more active, fulfilling tomorrow.

WHAT YOU DO MATTERS

Your daily habits make a big difference.

Do your exercises

Eat a balanced diet

Get good sleep

Take your medications as advised

Maintain a healthy weight

Attend your follow-up appointments

Stay positive and involve your family

REALISTIC EXPECTATIONS

- YOU CAN EXPECT:**

 - ✓ Significant reduction in pain
 - ✓ Improved mobility and function
 - ✓ Better sleep and quality of life
 - ✓ Return to most daily activities
 - ✓ Long-lasting results in the majority of patients
- BUT REMEMBER:**

 - ✗ It may not feel like a “normal” knee or hip
 - ✗ High-impact activities (e.g. running, jumping) are usually not recommended
 - ✗ Full recovery takes time and consistent effort
 - ✗ Individual results vary

PRO-FIT PEARL

“The surgeon replaces the joint. Rehabilitation helps you reclaim the life around it.”

Recovery is a journey, not a race. Keep going — you are stronger than you think.



Move Better. Live Fuller. Stay Independent.

Trusted Information. Real People. Practical Solutions.

LIFE AFTER TKR

“I wanted to do my daily work, tend my garden... and dance at parties.”

Mrs Latha Kumar shares her journey from years of arthritis to knee replacement — and her “second innings” in life.



“My speed may have slowed, but my enthusiasm has grown.”

Dancing brings me joy, confidence and life.

1 The Beginning – Living with Arthritis

Arthritis became a part of my life around 1995, when I was just 32 years old. It started with severe pain in my heel, and gradually my joints became painful and stiff. Medical tests were often not conclusive, but the symptoms were very real. Winters in North India were especially difficult. Even taking a bowl of milk out of the refrigerator could make my finger joints painful and turn blue — a problem I still face today.

Over time, arthritis slowed down my once active life. I learnt to live with it positively, minimised medicines and took paracetamol only when the pain was unbearable. There were periods of medicines, injections, heat therapy and many other treatments, but eventually my knees deteriorated to the point where we had to seriously consider surgery.



Pain and stiffness gradually slowed my life.

2 The Decision – 2015

In 2015, we finally decided to go ahead with knee replacement surgery at the Orthopaedic Surgery Department of Command Hospital Air Force.

Before surgery, I was given a form to complete. One question asked: “What do you expect after your knee replacement?”

My answer was very simple:

“I want to do my daily work, do my gardening and dance at parties. I don't need to go to a new field!” 😊

Those were my goals. I wasn't looking for extraordinary achievements. I simply wanted my ordinary life back.

MY GOALS AFTER TKR

- ☒ Daily work
- ☒ Gardening
- ☒ Dancing at parties
- ☒ Independence
- ☒ A better quality of life

3 The Surgery

My knee replacement was performed by **Dr (Air Cmde) Vikas Kulshrestha** and the orthopaedic surgical team at Command Hospital Air Force. Dr Kulshrestha is a highly experienced orthopaedic and joint-replacement surgeon with over 33 years of exemplary service in the Indian Armed Forces Medical Services. He has performed more than 18,000 orthopaedic surgeries, including over 9,000 primary and 1,000 revision joint-replacement procedures. His extensive training in joint replacement, computer assisted and robotic surgery in India and overseas gave me great confidence as I went into surgery.



With my husband, **Air Vice Marshal (Dr) RSV Kumar (Retd)**, a renowned nephrologist, whose steadfast support remained a strength throughout my journey.

4 Rehabilitation – Getting My Life Back

Surgery was only one part of the journey. Recovery required regular physiotherapy and, most importantly, the determination to continue practising.

I was fortunate to be guided by **Raja Guru**, a physiotherapist with 29 years of service in the Indian Air Force. He was the physiotherapist to the Indian Women's Hockey Team and had also undertaken a diplomatic assignment at the Embassy of India in China.

He would put on music and start the session, and we would exercise for almost an hour. He never forced me, but diplomatically made sure that I did not miss my exercises!



The first step towards my second innings...

5 My Second Innings

Today, I remain cautious because I have a fear of falling, and my speed has naturally slowed. But my enthusiasm for life has only grown.

Travelling across Bengaluru by Metro—from Baiyappanahalli to Mysore Road—became normal for me. Standing for long periods became easier. I returned to the activities that mattered to me.

And dancing? Of course. That comes from my willpower!



Back to my garden... back to the things I love.

Grateful and Moving Forward

I am deeply grateful to Dr Vikas Kulshrestha and the Command Hospital orthopaedic surgical team, Raja Guru for guiding my rehabilitation, my husband, my family and everyone who supported me through this journey.

Knee replacement was not just about replacing damaged joints. It gave me what I had asked for—my daily activities, my garden, my independence and yes, my dancing.

“I call this my “second innings.” ❤️

“Recovery does not end with surgery. Physiotherapy, regular exercise, patience and your own determination are important.”
— Mrs Latha Kumar

What TKR Has Given Me



Daily activities



Gardening



Dancing



Travelling with ease



Standing comfortably



More confidence



A better quality of life

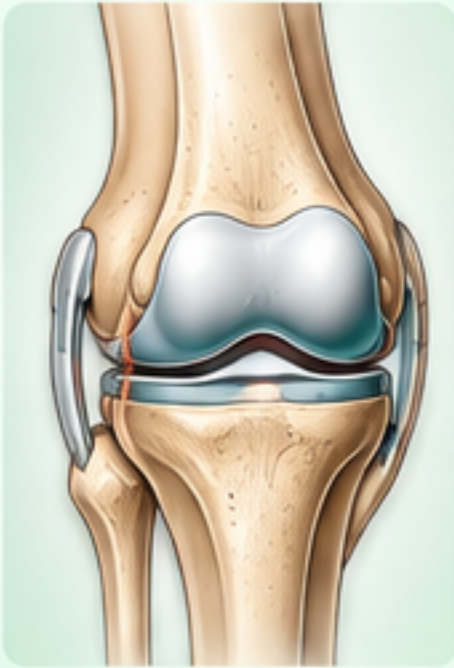
ARTHRITIS BEYOND OSTEOARTHRITIS

Different diseases. Different causes. Different treatment.

Not all arthritis is "wear and tear". Know the difference.

OSTEOARTHRITIS (OA)

"Wear and tear" changes in the joint



- ✓ Gradual onset of pain and stiffness
- ✓ Commonly affects knees, hips, hands and spine
- ✓ Related to ageing, previous injuries, excess weight and joint load
- ✓ Usually does not cause prolonged morning stiffness or whole-body symptoms

Treatment focuses on lifestyle, exercise, pain management and, when needed, joint replacement.

GOUT

Crystals trigger sudden, intense inflammation



Uric acid crystals

- ✓ Sudden, severe pain (often at night)
- ✓ Joint becomes red, hot and swollen
- ✓ Commonly affects the big toe, but can involve other joints
- ✓ Caused by uric acid crystal deposition
- ✓ More common in men, but also occurs in women

Gout is treatable. Management includes medications to reduce attacks and lower uric acid, along with lifestyle measures.

Same word. Different stories. Different care.



AXIAL SPONDYLOARTHRITIS (ANKYLOSING SPONDYLITIS)

Inflammation mainly affects the spine and sacroiliac joints



- ✓ Often begins in younger adults (typically < 40 years)
- ✓ Persistent back pain and stiffness (especially in the morning)
- ✓ Pain may improve with movement rather than rest
- ✓ Can also affect hips, shoulders and other joints
- ✓ May be associated with eye, skin (psoriasis) or bowel conditions

Not all back pain is mechanical. Persistent back stiffness in a younger person should be assessed by a specialist.

RHEUMATOID ARTHRITIS (RA)

The immune system mistakenly attacks the joints



- Often affects multiple joints (hands, wrists, feet)
- ✓ Prolonged morning stiffness (> 30 minutes)
- ✓ Swollen, tender joints
- ✓ Can cause fatigue, fever and general unwellness
- ✓ More common in women

Early diagnosis and disease-modifying medical treatment can prevent joint damage and improve long-term outcomes.

PSORIATIC ARTHRITIS & OTHER INFLAMMATORY ARTHRITIS

Joint disease can be part of a wider inflammatory condition



Psoriasis skin changes

Nail changes

- ✓ Can occur with psoriasis (skin condition)
- ✓ May affect fingers, toes, spine or tendons
- ✓ Swelling of entire fingers or toes ("sausage digits")
- ✓ Nail changes are common
- ✓ Symptoms can be asymmetrical
- ✓ May be associated with eye or bowel inflammation

Early recognition and appropriate treatment can reduce joint damage and improve quality of life.

OTHER TYPES INCLUDE

- ✓ Reactive arthritis (often after an infection)
- ✓ Juvenile idiopathic arthritis (in children)
- ✓ Arthritis associated with other medical conditions
- ✓ Crystal-related arthritis (other than gout)

Different causes. A common goal — healthy, active lives.

PAIN MAY FEEL SIMILAR — THE DISEASE MAY NOT BE.

OA

Mainly structural / mechanical changes in the joint.

RA / PsA / AxSpA

Immune-mediated inflammatory diseases.

Gout

Crystal-induced inflammatory disease.



DON'T SELF-DIAGNOSE

Seek medical advice if you have:

- ✓ Swollen joints
- ✓ Prolonged morning stiffness
- ✓ Hot, red and painful joint
- ✓ Recurrent attacks of joint pain
- ✓ Unexplained fatigue
- ✓ Psoriasis or nail changes with joint pain
- ✓ Persistent back stiffness (especially if you are younger)

Early recognition can change the course of some forms of arthritis.

RHEUMATOID ARTHRITIS (RA)

When your immune system attacks the joints.

Not just joint pain.
A whole-body condition.
Early care can change lives.

WHAT IS RHEUMATOID ARTHRITIS?

Rheumatoid arthritis is an autoimmune condition in which the body's immune system mistakenly attacks the lining of the joints, causing inflammation, pain and swelling. Over time, it can damage cartilage and bone if not treated appropriately.

RA is not caused by “wear and tear”.
It is an immune system disorder.



Often both sides.
Often small joints.
More than just pain.

WHO CAN GET RA?

- More common in women (2–3 times more often than men)
- Can occur at any age (often between 30–60 years)
- Can affect people from all backgrounds
- Family history may increase the risk

COMMON SIGNS AND SYMPTOMS

- Pain, swelling and warmth in multiple joints
- Prolonged morning stiffness (often > 30 minutes)
- Commonly affects small joints (hands, wrists, feet)
- Usually affects both sides (symmetrical)
- Fatigue, low energy and feeling unwell
- Can also involve other organs (skin, eyes, lungs, heart)

HOW DOES RA AFFECT THE JOINT?

HEALTHY JOINT

Smooth cartilage allows painless movement.

IN RA

The immune system attacks the joint lining, causing inflammation and swelling.

OVER TIME

Persistent inflammation can lead to cartilage damage, bone erosion and loss of function.

IT CAN AFFECT MORE THAN JOINTS

RA is a systemic condition and may sometimes affect other parts of this body.

- Eyes (dry eyes, inflammation)
- Lungs (inflammation, scarring)
- Heart (increased risk of heart disease)
- Skin (rheumatoid nodules)
- Blood vessels (inflammation)

WHY EARLY DIAGNOSIS MATTERS

- Early treatment can control inflammation.
- Helps prevent joint damage and disability.
- Improves long-term function and quality of life.
- Modern treatments can put RA into remission in many people.
- A rheumatologist can guide diagnosis and treatment.



The earlier RA is identified and treated, the better the chance of protecting your joints and overall health.

TREATMENT APPROACH

- Medications**
(Disease-modifying antirheumatic drugs – DMARDs, biologics, targeted therapies)
- Exercise & physiotherapy**
Maintain joint mobility and muscle strength
- Healthy lifestyle**
Balanced diet, good sleep, stress management
- Regular follow-up**
Monitoring by a rheumatologist to adjust treatment as needed

Treatment is usually long-term and tailored to each individual.

LIVING WELL WITH RA

- Stay active within your comfort level.
- Take medications as prescribed.
- Protect your joints and use adaptive aids when needed.
- Maintain a healthy weight.
- Look after your mental health.
- Work with your healthcare team.



Better management.
Brighter tomorrows.

DON'T IGNORE THESE WARNING SIGNS

-
- Persistent joint swelling
 - Morning stiffness > 30 minutes
 - Symptoms in multiple joints
 - Unexplained fatigue or low-grade fever
 - Family history of RA

Seek medical advice. Early assessment can make a difference.

“Rheumatoid arthritis may be a lifelong condition, but with the right treatment and support, people can live active, fulfilling lives.”

PRO-FIT PEARL

RA is not just about joints — it's about the whole person. Early recognition, the right treatment and an active lifestyle can help you take back control.

GOUT

More Than Just “High Uric Acid”

A common, treatable form of arthritis caused by crystal deposits in the joints.

*Sudden pain.
Swollen joint.
But with
the right care,
gout can be
controlled.*

WHAT IS GOUT?

Gout is a form of inflammatory arthritis caused by the buildup of uric acid crystals in and around the joints. When the level of uric acid in the blood is high, these crystals can form and trigger sudden episodes of severe pain, swelling and redness.

Gout is not just a “rich man’s disease” — it can affect anyone.



WHY DOES GOUT HAPPEN?

- The body produces too much uric acid, or
- The kidneys do not remove enough uric acid, or
- A combination of both.

High uric acid levels (hyperuricaemia) can lead to crystal formation, even if you have no symptoms yet.

COMMONLY AFFECTED JOINTS

Gout can affect any joint, but most commonly:

- ✓ Big toe (most common)
- ✓ Ankles
- ✓ Knees
- ✓ Mid-foot
- ✓ Fingers
- ✓ Wrists
- ✓ Elbows

Big toe
(often the first joint to be affected)



WHAT A GOUT ATTACK FEELS LIKE

- Sudden, severe pain (often at night)
- Joint becomes red, hot, swollen and very tender
- Even the weight of a bedsheet can be painful
- Usually peaks within 24–48 hours
- May settle in a few days to a week (even without treatment)

Recurrent attacks are common if uric acid remains high.

RISK FACTORS

- Being male (especially 30–60 years)
- Family history of gout
- Overweight or obesity
- High intake of alcohol (especially beer and spirits)
- Diet high in red meat and organ meats
- Certain seafood (e.g. anchovies, sardines, shellfish)
- Kidney disease
- Some medications (e.g. diuretics)
- Other health conditions (hypertension, diabetes, heart disease)

IT’S NOT JUST ABOUT FOOD

While diet can influence uric acid levels, gout is **not** simply caused by eating the “wrong foods”.

- ✓ Many people with gout are not “overindulgent”.
- ✓ Genetics, kidney function, weight and other health conditions also play a major role.
- ✓ Dietary changes help, but may not be enough on their own.



It’s about overall risk, not just one meal.

HOW IS GOUT DIAGNOSED?

- Blood test to check uric acid levels
- Sometimes a sample of joint fluid is examined for uric acid crystals (definitive test)
- X-rays or ultrasound may help assess joint changes

Diagnosis is based on your history, examination and appropriate tests.

TREATMENT APPROACH

- Treat the acute attack (to reduce pain and inflammation)
- Long-term uric acid lowering treatment (to prevent future attacks)
- Lifestyle and dietary measures
- Manage associated health conditions

With the right treatment, gout can be well controlled, and future attacks can be prevented.

TIPS TO HELP MANAGE GOUT

- Stay well hydrated
- Maintain a healthy weight
- Exercise regularly
- Eat a balanced diet (lower in purines)
- Limit alcohol (especially beer)
- Take prescribed medications
- Look after your kidney health
- Have regular follow-up

DON’T IGNORE THE SIGNS

- Recurrent joint pain and swelling
- Persistent high uric acid levels
- Tophi (lumps under the skin)
- Kidney stones
- Reduced joint function

Seek medical advice if you have recurrent attacks, persistent symptoms or concerns about uric acid levels.

PRO-FIT PEARL

“Gout is painful, but it is manageable. With the right treatment and lifestyle changes, most people can prevent future attacks and protect their joints.”

INFLAMMATORY ARTHRITIS & SPONDYLOARTHRITIS

It's not just the joints — it can affect the whole body.

Look beyond the joint.
Early recognition leads to better lives.

PSORIATIC ARTHRITIS (PsA)

Joint disease with psoriasis and more.



COMMON FEATURES

- Can affect skin, joints and tendons
- Swelling of fingers or toes ("sausage digits")
- Nail changes are common
- May affect the spine
- Symptoms can be asymmetrical (different on each side)
- Associated with fatigue

Early diagnosis and appropriate treatment can prevent joint damage and improve quality of life.

AXIAL SPONDYLOARTHRITIS (ANKYLOSING SPONDYLITIS)

More than just "back pain".



KEY FEATURES

- Usually begins at a younger age (often before 40 years)
- Inflammatory back pain — worse in the morning, improves with movement
- Stiffness (especially in the morning, > 30 minutes)
- Can affect the sacroiliac joints and spine
- May also affect hips, shoulders and other joints
- Can be associated with eye inflammation (uveitis), psoriasis or bowel conditions (e.g. inflammatory bowel disease)

Persistent back pain and stiffness in a younger person should not always be dismissed as "mechanical" pain. Get it assessed.

OTHER INFLAMMATORY ARTHRITIDES

Different conditions. Some common clues.



Reactive arthritis
(often after an infection)
e.g. urine, gut or sexually transmitted infections



Arthritis associated with inflammatory bowel disease
(Ulcerative colitis / Crohn's disease)



Uveitis-associated arthritis
(Joint inflammation with eye disease)



Undifferentiated spondyloarthritis
(Early features, not yet fitting a specific category)



Juvenile idiopathic arthritis
(Arthritis in children)

These conditions can affect different organs such as the eyes, skin, gut and tendons, not just the joints.

HOW INFLAMMATORY ARTHRITIS DIFFERS FROM OSTEOARTHRITIS

FEATURE	INFLAMMATORY ARTHRITIS (RA, PsA, AxSpA, etc.)	OSTEOARTHRITIS (OA)
Main cause	Immune system related	Wear and tear / mechanical factors
Age of onset	Often younger	Usually older
Pattern	Often multiple joints, can be symmetrical (RA); spine involvement (AxSpA)	Usually weight-bearing joints (knees, hips), hand joints
Morning stiffness	Prolonged (> 30 minutes)	Usually short-lived (< 30 minutes)
Swelling	Common	Less common (late stages)
Other organs affected	Yes (skin, eyes, gut, etc.)	No
Blood tests	May show inflammation (e.g. ESR, CRP, specific antibodies)	Usually normal

SYSTEMIC SYMPTOMS TO WATCH FOR

Inflammatory arthritis can affect more than your joints.



If you have joint symptoms along with problems in other parts of your body, tell your doctor.

TREATMENT APPROACH

Treatment aims to control inflammation, relieve symptoms and prevent long-term damage.



Medications
(Disease-modifying anti-rheumatic drugs, biologics, targeted therapies)



Physiotherapy and exercise
(to maintain mobility and posture)



Healthy lifestyle
(balanced diet, good sleep, stress management)



Regular monitoring
(with a rheumatologist)



Managing associated conditions
(e.g. eye, skin or bowel disease)

Early and appropriate treatment can help people live active, fulfilling lives.

WHEN TO SEE A SPECIALIST?

Consider consulting a rheumatologist if you have:

- Persistent joint swelling
- Prolonged morning stiffness (> 30 minutes)
- Chronic back pain starting before age 40
- Joint pain with psoriasis, eye redness or bowel symptoms
- Symptoms in multiple joints
- Unexplained fatigue, fever or weight loss
- Family history of inflammatory arthritis



Early assessment can lead to earlier treatment and better long-term outcomes.

"The right diagnosis doesn't just treat joints — it can give you back your future."

- Less pain.
- More mobility.
- Greater independence.
- A better quality of life.

Knowledge leads to action. Action leads to brighter tomorrows.



PRO-FIT PEARL

"Inflammatory arthritis is not just about joints. It's about the whole person — and the earlier we recognise it, the more we can prevent damage and help people live well."

Don't ignore persistent symptoms. Your story matters — get the right expert on your team.

THE JOINT-FRIENDLY INDIAN PLATE

Nourish your joints. Fuel your life.

Good food supports movement today and independence tomorrow.



Reduces inflammation



Supports muscle strength



Helps maintain a healthy weight



Supports bone health



Boosts overall energy

There is no single “arthritis diet”, but an overall healthy, balanced Indian diet rich in whole foods can help manage symptoms, support healthy weight and improve your general well-being.

A BALANCED INDIAN PLATE FOR HEALTHY JOINTS

QUALITY PROTEIN

Builds and repairs muscles, which support your joints. Include dals, legumes, paneer, curd, eggs, fish, chicken or soy products.

WHOLE GRAINS & MILLETS

Choose brown rice, whole wheat, ragi, jowar, bajra, oats or mixed millets. Provide sustained energy, fibre and important nutrients.

VEGETABLES & FRUITS

Aim for a variety of colours (leafy greens, carrots, beans, capsicum, tomatoes, gourds, berries, citrus, guava, papaya, pomegranate). Rich in antioxidants and anti-inflammatory compounds.

HEALTHY FATS

Use small amounts of nuts, seeds (flax, chia, sesame), groundnut, mustard or olive oil. Omega-3 fats (from fish, flaxseeds, walnuts) may help reduce inflammation.

CALCIUM & VITAMIN D

Include milk, curd, paneer, ragi, sesame seeds and safe sun exposure. Important for bone health, especially as we age.



STAY HYDRATED

Water helps maintain joint lubrication and overall health. Aim for 6–8 glasses a day (more if active or in hot weather).



SPICE UP YOUR HEALTH

Turmeric (curcumin), ginger, garlic and other traditional spices contain natural anti-inflammatory compounds. Use them regularly as part of everyday cooking.

ENJOY TRADITIONAL FOODS

Traditional Indian foods like idli, dosa, poha, upma, khichdi, sambar, dal, vegetable curries and chutneys can be part of a joint-friendly diet when prepared with less oil, more vegetables and whole grains.



Simple food. Strong benefits.

FOODS TO LIMIT

(especially if consumed frequently)

- Deep-fried and high-fat foods (pakoras, puris, chips)
- Excess sugar and refined carbs (sweets, bakery items, sugary drinks)
- Processed and packaged foods (high in salt, unhealthy fats and additives)
- Excess red and processed meat (may increase gout risk and inflammation)
- Alcohol (especially excessive intake)
- High-salt foods (pickles, processed snacks)

PRACTICAL TIPS

- Fill half your plate with vegetables.
- Include a source of protein in every meal.
- Choose whole grains or millets instead of refined grains.
- Use healthy oils in small amounts.
- Include fruits daily.
- Limit added sugar and salt.
- Cook at home more often.
- Maintain a healthy weight through balanced eating and regular activity.

EVERY SMALL CHANGE COUNTS

- You don't have to be perfect.
- Start with one or two changes.
- Consistency matters more than quick fixes.
- Healthy eating supports not just your joints, but your heart, brain, weight and overall well-being.

“Good food today for better movement tomorrow.”

JOINT SUPPLEMENTS: WHAT DOES THE EVIDENCE REALLY SAY?

Helpful for some? Overhyped for others? Let's separate evidence from advertising.

Evidence over hype.
Informed choices for healthier tomorrows.



Supplements can be helpful in specific situations, but they are not a substitute for a healthy diet, regular exercise or medical treatment.



The evidence varies for different supplements. Some help, some have limited or conflicting evidence.



Quality, dose and individual factors matter. What works for one person may not work for another.



Natural does not always mean safe. Supplements can interact with medicines and may have side effects.

VITAMIN D

Helps bones, muscles and the immune system.



- Useful if you are deficient (common in India).
- May help reduce pain and improve function in some people with osteoarthritis.
- Often recommended in inflammatory arthritis.

EVIDENCE: MODERATE

Helpful when deficient. Not an arthritis cure.

CALCIUM

Important for bone health.



- Essential for strong bones, especially in older adults and post-menopausal women.
- Use only if dietary intake is inadequate or if advised by your doctor.
- Does not rebuild cartilage or treat arthritis pain.

EVIDENCE: MODERATE

Good for bones, not a direct treatment for arthritis.

OMEGA-3 FATTY ACIDS (Fish oil)



- May reduce inflammation.
- Some evidence of benefit in inflammatory arthritis (e.g. rheumatoid arthritis).
- Less consistent benefit in osteoarthritis.

EVIDENCE: MODERATE

Can be helpful, especially in inflammatory arthritis. Not a stand-alone treatment.

GLUCOSAMINE & CHONDROITIN



- Popular for osteoarthritis.
- Evidence is mixed – some people report symptom relief, others see no benefit.
- Different brands and formulations make comparisons difficult.

EVIDENCE: UNCERTAIN

May help some people with knee osteoarthritis, but benefits are inconsistent.

COLLAGEN PEPTIDES (eg. Type II / UC-II)



- May support cartilage health in theory.
- Some studies suggest modest improvement in pain and function in osteoarthritis.
- Evidence is still limited and long-term benefits are unclear.

EVIDENCE: EMERGING

Promising, but more high-quality studies are needed.

CURCUMIN / TURMERIC EXTRACTS



- Has anti-inflammatory properties.
- Some evidence for symptom relief in osteoarthritis.
- Quality, dose and formulation (standardized extracts) are important.
- May interact with blood thinners and other medicines.

EVIDENCE: MODERATE

May help with symptoms, but not a cure.

PROTEIN (Nutrition, not just a supplement)



- Helps maintain muscle mass, which supports and protects joints.
- Especially important in older adults, people with chronic illness or low dietary intake.
- Can be obtained from food sources (dal, legumes, paneer, eggs, fish, chicken, soy) or supplements if needed.

EVIDENCE: SUPPORTIVE

Adequate protein supports overall musculoskeletal health.

MULTIVITAMINS (General supplements)



- May be useful if you have a poor diet or specific deficiencies.
- Not routinely required for everyone with arthritis.
- Do not directly reduce arthritis pain or inflammation.

EVIDENCE: LIMITED

Use only if needed, based on dietary gaps or medical advice.

CAN A SUPPLEMENT REGROW MY CARTILAGE?



Be cautious of that promise.

No supplement has been convincingly shown to rebuild a severely damaged arthritic joint. Claims of "cartilage regeneration" are mostly marketing, not proven science.

Focus on what we know works:
healthy weight, exercise, good nutrition and appropriate medical care.



NATURAL ≠ AUTOMATICALLY SAFE

Even natural supplements can cause side effects or interact with medicines, for example:

- May increase bleeding risk (e.g. fish oil, turmeric, ginkgo, garlic supplements).
- Can interact with diabetes, blood pressure or thyroid medicines.
- Product quality and purity can vary between brands.
- Always tell your doctor about any supplements you are taking.



Choose trusted brands and use supplements under the guidance of a qualified healthcare professional.



PRO-FIT PEARL

"Food builds the foundation. Supplements should fill a genuine gap — not replace good nutrition, movement or medical care."

IN SHORT

- Use supplements wisely.
- Treat deficiencies.
- Have realistic expectations.
- Discuss with your doctor, especially if you take other medicines.
- Let evidence — not advertising — guide you.

AYURVEDA, SIDDHA & TRADITIONAL REMEDIES

Tradition meets evidence.

Time-tested wisdom can complement modern care — when used wisely.

Respect tradition.
Use evidence.
Choose safely.
Live better.



Traditional systems like Ayurveda and Siddha take a holistic approach, aiming to balance the body, reduce inflammation and improve overall well-being.



Many remedies have promising evidence, but more high-quality research is needed for some.



These therapies work best as a complement to, not a replacement for, evidence-based medical treatment.



Always discuss traditional remedies with your doctor, especially if you take other medicines or have other health conditions.

COMMONLY USED HERBS AND REMEDIES



- Turmeric (Haridra)**
- Contains curcumin with anti-inflammatory properties.
 - May help reduce pain and improve function in osteoarthritis.
 - Best absorbed with black pepper (piperine).



- Boswellia (Shallaki)**
- Traditionally used in Ayurveda for joint pain.
 - Some studies show modest benefit in osteoarthritis.
 - Generally well tolerated.



- Ashwagandha**
- Helps reduce stress, improve sleep and may have anti-inflammatory effects.
 - Can support overall well-being, especially in people with chronic pain.



- Guggul**
- Traditionally used for joint disorders.
 - Some evidence for reducing pain and improving function in osteoarthritis.
 - Use under professional guidance due to possible side effects and thyroid interactions.



- Nirgundi (Vitex negundo)**
- Traditionally used in Siddha and Ayurveda for joint pain and swelling.
 - Often used in topical oils.



- Mahanarayana Taila (and other medicated oils)**
- Herbal oils used for massage may help relieve pain and improve mobility.
 - Useful as an adjunct to exercise and physiotherapy.

TRADITIONAL THERAPIES BEYOND HERBS



- Panchakarma (Ayurveda)**
- A set of cleansing therapies.
 - May help reduce pain and improve quality of life in some people with arthritis.
 - Should be done under qualified practitioners.



- Kizhi (Siddha)**
- Medicated herbal poultice therapy used for pain and stiffness.
 - May provide short-term relief when combined with other treatments.



- Lepa / Patra Pinda (External applications)**
- Herbal pastes or leaf bundles used on affected joints.
 - May reduce local pain and inflammation.



- Yoga, Pranayama & Meditation**
- Important part of traditional Indian systems.
 - Help reduce stress, improve pain coping, flexibility and overall well-being.
 - Useful for all forms of arthritis.

! IMPORTANT PRECAUTIONS

- ✓ **Talk to your doctor** before starting any traditional remedy.
- ✓ **Inform your doctor** about all the herbs, oils and therapies you use.
- ✓ Some remedies can interact with medicines (e.g. blood thinners, diabetes or thyroid medicines).
- ✓ “Natural” does **not** always mean safe.
- ✓ Use products from **trusted** sources to ensure quality and purity.
- ✓ Avoid self-prescribing, especially for serious or long-term conditions.

Ancient wisdom
for a more comfortable
tomorrow.”

Tradition gives us roots.
Evidence helps us choose
what truly works.
Together, they can support
healthier joints and a
brighter tomorrow.

WHAT DOES THE EVIDENCE SAY?

Approach	Current evidence
Turmeric (curcumin)	Moderate evidence for pain relief in osteoarthritis.
Boswellia (Shallaki)	Moderate evidence for improved pain and function.
Ashwagandha	Limited but promising evidence (mainly for pain, sleep and stress).
Guggul	Some evidence, but more research needed.
Nirgundi	Limited evidence; traditionally used, especially topically.
Herbal oils (e.g. Mahanarayana Taila)	Some evidence for short-term pain relief (as an adjunct).
Panchakarma	Limited to moderate evidence for symptom improvement.
Yoga and meditation	Good evidence for improving pain, function and quality of life.

Evidence varies in quality and dose, formulation and standardization matter. Responses can differ from person to person.

TRADITIONAL WISDOM IN A MODERN PLAN

- ✓ Combine the best of traditional knowledge with modern medical care.
- ✓ Use safe, evidence-informed remedies.
- ✓ Focus on overall health — diet, movement, stress management and good sleep.
- ✓ Work with qualified practitioners (Ayurveda, Siddha or integrative medicine) when possible.
- ✓ Keep your healthcare team informed.



PRO-FIT PEARL

“Be open to tradition,
but stay guided by evidence.
Safe choices today
lead to stronger, healthier
tomorrows.”

WEIGHT, METABOLIC HEALTH & YOUR JOINTS

It's not just about the weighing scale.
A healthier you can move more, do more and enjoy life more.

Health is progress, not perfection. Small steps lead to big change in the long run.



Less joint load can reduce pain and slow wear and tear.



Stronger muscles support and protect your joints.



Better metabolic health can reduce inflammation in the body.



More energy and movement improves overall well-being.



Small, sustainable changes can make a real difference.

Body weight is only one piece of the puzzle. Nutrition, physical activity, muscle strength, sleep and metabolic health all work together for healthier joints and a healthier you.

HOW CAN EXTRA BODY WEIGHT AFFECT JOINTS?

- 1

More mechanical load
Higher body weight increases pressure on weight-bearing joints like knees, hips and feet, especially during activities such as walking or climbing stairs.
- 2

Biological effects
Adipose (fat) tissue is metabolically active. It can release inflammatory substances (called adipokines) that may affect joint tissues throughout the body — even joints that do not bear weight, such as the hands.
- 3

Related health conditions
Higher body weight is linked to conditions like type 2 diabetes, high blood pressure and fatty liver disease, which can indirectly affect joint health and overall well-being.

This is why even a modest reduction in body weight — when achievable and appropriate — can help.



*Stronger today.
More tomorrows.*

IT'S NOT JUST ABOUT WEIGHT

- A healthier body composition can help, but so can many other changes:
- ✓ Build and maintain muscle strength
 - ✓ Choose joint-friendly, balanced meals
 - ✓ Be physically active in ways you enjoy
 - ✓ Get good sleep and manage stress
 - ✓ Look after blood sugar, cholesterol and blood pressure
 - ✓ Take care of your overall mental well-being

All of these can support healthier joints — with or without a big change on the scale.

REAL-LIFE STEPS THAT MAKE A DIFFERENCE



Move a little more
Break up long periods of sitting. Stand, stretch or walk for a few minutes every hour.



Choose activities you enjoy
Walking, cycling, swimming, dancing or gardening — anything that keeps you moving.



Build stronger muscles
Helps support your joints, improves balance and makes daily activities easier.



Eat for metabolic health
Focus on a balanced Indian diet with more vegetables, whole grains, pulses and healthy fats (in small amounts).



Do what brings you joy
Be active with family and friends. Stay connected and keep doing the things that matter to you.



KIND REMINDER

If you have tried to lose weight before and regained it, you have not failed.

Sustainable health is not a test of willpower. It is a journey. Start with what your body can do today, be kind to yourself and build from there. Every positive step counts.

GOALS THAT MATTER MORE THAN THE SCALE

- ✓ Move more comfortably
- ✓ Be stronger and more independent
- ✓ Have better stamina and energy
- ✓ Sleep better
- ✓ Improve blood sugar and metabolic health
- ✓ Participate in work, family and social life
- ✓ Gradually improve body composition (where appropriate)

Progress looks different for everyone. What matters is moving forward.





PRO-FIT PEARL

“Don't chase a smaller body. Build a more capable one.”

And if body weight gradually changes along the way, let that be one benefit — not the only measure of success.

ARTHRITIS IS A FAMILY JOURNEY

Support today. Stronger tomorrows.

When families understand, communicate and work together, life with arthritis can be healthier, easier and more fulfilling.

Together we move forward.



Better understanding



Open communication



Practical support



Greater independence



Stronger family bonds

Arthritis affects not just the individual, but the whole family. Small acts of support can make a big difference — today and in the years to come.

A NOTE TO PARENTS

It's okay to ask for help.

- ✓ You are not a burden.
- ✓ Sharing your pain and challenges helps your family understand and support you better.
- ✓ Asking for help is a sign of strength, not weakness.
- ✓ Let your children and loved ones be part of your journey.
- ✓ Your experience and presence matter deeply to your family.

“Allow your children the privilege of caring for you when you need it.”



A NOTE TO CHILDREN

Notice. Ask. Be there.

- ✓ Your parent may not always say “I am in pain.”
- ✓ Look for changes — reduced activity, slower walking, trouble with daily tasks, or loss of interest in things they used to enjoy.
- ✓ Start conversations early.
- ✓ Offer practical help — accompany them to medical appointments, encourage exercise, help with home tasks.
- ✓ Be patient and supportive.

“Do not wait for your parents to say ‘I need help.’ Ask, listen and be there.”

TWO DIFFERENT PATHWAYS



- ### SIMPLE WAYS FAMILIES CAN HELP
- ✓ Learn about arthritis together.
 - ✓ Encourage regular movement and exercise.
 - ✓ Plan healthy, joint-friendly meals.
 - ✓ Make the home safer (e.g. remove trip hazards, use handrails, ensure good lighting).
 - ✓ Share household tasks.
 - ✓ Accompany them to doctor visits if possible.
 - ✓ Celebrate progress, not just in symptom relief, but in everyday activities.

- ### REMEMBER
- ✓ Arthritis does not define a person.
 - ✓ Every family's support looks different — what matters is that it is genuine.
 - ✓ Small, consistent acts of care make a big difference.
 - ✓ Talking early can prevent bigger problems later.
 - ✓ You are in this together.

PRO-FIT FAMILY PEARL

“Care should preserve independence, not replace it.”

Support plus knowledge leads to stronger joints, happier families and brighter tomorrows.

A HEALTHIER TOMORROW TOGETHER

With understanding, communication and support, people with arthritis can continue to do the things they love — and families can grow even closer through the journey.

Stronger families. Brighter tomorrows.

MAKE YOUR WORLD JOINT-FRIENDLY

Small changes. A safer, easier, more independent you.

Your surroundings, daily habits and the right tools can reduce pain, prevent injuries and help you stay active and independent for longer.

*Adapt today.
Stay active
tomorrow.*



A safer home means fewer falls and less pain.



The right tools make daily tasks easier.



Joint-friendly habits help you conserve energy.



Small adaptations can make a big difference.



Independence grows when your environment supports you.

You don't have to change everything at once. Start with small, practical steps. A joint-friendly environment helps you do the things you enjoy, with greater ease and confidence.

AT HOME: SAFETY FIRST

Reduce the risk of falls and make daily activities easier.



- ✓ Ensure good lighting in all areas.
- ✓ Remove loose rugs, clutter and electrical cords.
- ✓ Use non-slip mats in bathrooms.
- ✓ Install handrails on stairs and in bathrooms.
- ✓ Keep commonly used items at waist height.
- ✓ Consider a shower seat and grab bars if needed.

USEFUL AIDS & DEVICES

Simple tools can reduce strain and increase independence.



Jar openers for easier grip



Long-handled reacher to avoid bending



Ergonomic kitchen tools



Chairs with armrests (easier to stand up)



Raised toilet seat (if needed)



Grab bars in bathrooms

*These are not signs of weakness.
They are smart choices.*

MAKE EVERYDAY ACTIVITIES EASIER

Save your joints. Use smarter methods.

- ✓ Break large tasks into smaller steps.
- ✓ Sit while doing activities like cooking or ironing.
- ✓ Use trolleys or backpacks instead of carrying heavy loads.
- ✓ Slide items instead of lifting them.
- ✓ Keep frequently used items within easy reach.
- ✓ Take regular breaks and avoid prolonged standing.
- ✓ Use larger, easier-to-grip handles.



*Work smarter,
not harder.*

FOOTWEAR MATTERS

Support your joints with the right shoes.



- ✓ Choose well-cushioned, supportive shoes.
- ✓ Prefer non-slip soles.
- ✓ Ensure a good fit — not too tight or too loose.
- ✓ Consider orthotic insoles if advised.
- ✓ Avoid high heels and very flat, unsupportive footwear for regular use.
- ✓ Replace worn-out shoes.

Comfortable feet help you move more, and movement helps your joints.

GETTING AROUND OUTSIDE

Stay active, stay confident.



- ✓ Look for even surfaces and well-maintained walking paths.
- ✓ Use handrails where available.
- ✓ Take your time — there is no rush.
- ✓ Consider a walking stick or trekking pole if it helps.
- ✓ Plan rest stops (benches) during longer walks.
- ✓ Be mindful of weather (heat, rain, very cold).

The right environment can keep you doing what you love — for longer.

ENERGY CONSERVATION TIPS

Do more of what matters, with less strain.

- ✓ Prioritise your activities.
- ✓ Alternate between activity and rest.
- ✓ Use labour-saving devices.
- ✓ Sit instead of standing for long periods.
- ✓ Ask for help when needed.
- ✓ Pace yourself — it's okay to do things more slowly.
- ✓ Focus your energy on the activities that bring you joy.



PRO-FIT PEARL

"A supportive environment turns challenges into possibilities."

IN SHORT

- ✓ Make your home, habits and surroundings joint-friendly.
- ✓ Use tools and adaptations without hesitation.
- ✓ Small changes can prevent big problems.
- ✓ A safer, easier environment helps you stay independent.
- ✓ Adapt today for a more active tomorrow.

TRACK, REVIEW AND STAY ON COURSE

Small steps. Real progress. A healthier, more independent you.

Keeping track helps you see what works, stay motivated and have better conversations with your healthcare team.

Progress today.
More good days ahead.



Track your symptoms and what helps.



See your progress over time.



Have more meaningful discussions with your healthcare team.



Set realistic goals that matter to you.



Celebrate your achievements — big or small.

You can't always control arthritis, but you can take an active role. Tracking, reviewing and making small adjustments can help you live better today and tomorrow.

WHAT CAN YOU TRACK?

Focus on what is useful and meaningful. Keep it simple.



Pain levels
(e.g. 0–10 scale)



Physical function
(e.g. walking, stairs, daily activities)



Medicines and supplements
(what you take and how it helps)



Exercise and activity
(type, frequency, duration)



Sleep quality
(how refreshed you feel)



Mood and energy levels



Possible triggers
(e.g. weather changes, overactivity)



What goes well
(celebrate the positives!)

A SIMPLE TRACKER (EXAMPLE)

Use this as a guide or create your own version. Bring it to your doctor visits if helpful.

Date	Pain (0–10)	Activity (e.g. walk, exercise)	Medicine / Supplements	How did I feel? (sleep, mood, energy)	Notes (e.g. triggers, what helped)
12 Oct	6	15 min walk	Paracetamol	Slept well Mood good	Mild knee stiffness morning
13 Oct	5	Chair exercises	As advised	Average sleep	Felt better after exercise
14 Oct	4	20 min walk	As advised	Good energy	Less pain
15 Oct	5	Rest day	As advised	Tired	Rainy weather
16 Oct	4	30 min walk	As advised	Slept well	Enjoyed time with family

Track a little. Learn a lot.
Progress is a journey, not a single day.

DISCUSS AND REVIEW

Make the most of your appointments.

- ✓ Share your tracker or notes with your doctor.
- ✓ Discuss what is working and what is not.
- ✓ Ask about adjusting treatment, exercise or other strategies.
- ✓ Talk about new symptoms or concerns early.
- ✓ Review your goals and set new goals together.
- ✓ Don't hesitate to ask questions.
- ✓ Consider taking a family member with you if possible.

Good communication helps you get personalised care and better results.

There is no single “right” way to track. Use a notebook, calendar, mobile app, or the template on this page. Choose what works for you.

SET MEANINGFUL GOALS

Choose goals that improve your daily life — not just the numbers.

- ✓ Walk a little further or more comfortably.
- ✓ Do household tasks with less pain.
- ✓ Enjoy a hobby or social activity.
- ✓ Improve strength and balance.
- ✓ Sleep better.
- ✓ Reduce flare-ups.
- ✓ Stay independent.
- ✓ Feel more confident.



Your goals.
Your journey.
Your success matters.

CELEBRATE PROGRESS

Progress may be gradual, but it is still progress.



- ✓ Fewer bad days.
- ✓ More good days.
- ✓ Doing things you enjoy.
- ✓ Managing symptoms better.
- ✓ Feeling stronger, more positive and more in control.

Every small step counts.
You are doing better than you may think.



PRO-FIT PEARL

“What gets measured gets noticed, what gets noticed gets managed, and what gets managed helps you live better.”



KIND REMINDER

- ✓ Be patient with yourself.
- ✓ Progress is not always linear.
- ✓ Setbacks do not mean failure.
- ✓ Small, consistent steps lead to meaningful change.
- ✓ You are in charge of your journey — and you are not alone.



ARTHRITIS — MYTH vs FACT

Let's set the record straight.
Better knowledge. Better choices. A brighter, more active tomorrow.

Facts give confidence.
Let's replace myths with possibilities.

1 MYTH

"Exercise wears out joints."



✓ FACT

The right kind of exercise is safe and helps protect joints by strengthening muscles, improving flexibility and reducing pain.

Move more. Protect your joints.

2 MYTH

"Cracking or clicking sounds mean arthritis."



✓ FACT

Joint sounds are common and usually harmless. They do not mean your joints are damaged or that you have arthritis.

Sounds are normal. It's the function that matters.

3 MYTH

"Arthritis is just a part of getting old."



✓ FACT

Arthritis is more common with age, but it is not an inevitable part of ageing. Many people stay active and independent at every age.

Age is just a number. Activity keeps you younger in so many ways.

4 MYTH

"Pain always means more damage."



✓ FACT

Pain can be due to many reasons and does not always mean your joints are getting worse. Pain can often be managed effectively, even when there is joint wear.

Less pain. More life.

5 MYTH

"Supplements can rebuild cartilage."



✓ FACT

While some supplements may help with symptoms in some people, there is no proven supplement that can rebuild lost cartilage.

Be informed. Choose wisely.

6 MYTH

"If it hurts, I should rest completely."



✓ FACT

Long periods of rest can make your joints stiffer and your muscles weaker. Gentle, regular activity is usually better than complete rest (except during acute flares, as advised).

Keep moving. — within your limits.

7 MYTH

"Joint replacement is the only solution."



✓ FACT

Most people with arthritis do not need joint replacement. Many manage well with a combination of education, exercise, medications, lifestyle changes and other therapies.

Many paths. One goal — a better you.

8 MYTH

"Arthritis affects only knees."



✓ FACT

Arthritis can affect many joints — including hands, hips, spine, shoulders and feet.

Know more. Care for all your joints.



Better knowledge today.

More active tomorrows.

PRO-FIT PEARL

"Don't let myths limit you. Facts empower you to live better, move more and look forward to brighter days."

YOUR JOINT HEALTH SELF-CHECK

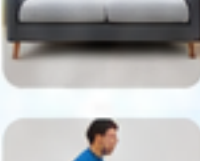
Know today. Take action tomorrow.

A simple way to understand how your joints are doing.
Tick the boxes that best describe you over the past 4 weeks.

Small check today.
Big benefits tomorrow.

You can tear out or photograph this page and take it to your doctor or physiotherapist.



		None (0)	Mild (1)	Moderate (2)	Severe (3)
1	 Pain How would you rate your joint pain on most days?	☐	☐	☐	☐
2	 Morning stiffness How long does stiffness last after you wake up?	☐ None	☐ < 15 mins	☐ 15–60 mins	☐ > 60 mins
3	 Swelling Do your joints look or feel swollen (e.g. knees, fingers, ankles)?	☐	☐	☐	☐
4	 Walking Do you have difficulty walking on level ground?	☐	☐	☐	☐
5	 Stairs Do you have difficulty going up or down stairs?	☐	☐	☐	☐
6	 Daily activities Do you have difficulty with daily activities (e.g. getting up from a chair, bathing, dressing, household tasks)?	☐	☐	☐	☐
7	 Sleep Does joint pain or discomfort affect your sleep?	☐	☐	☐	☐
8	 Activity levels Have you reduced or stopped activities you enjoy because of your joints?	☐	☐	☐	☐
9	 Other joints Do you have pain or stiffness in other joints (e.g. hands, hips, shoulders)?	☐	☐	☐	☐
10	 Fatigue Do you feel tired more often, possibly due to pain or poor sleep?	☐	☐	☐	☐

ADDITIONAL QUESTIONS (Yes / No)

		Yes	No
11	Have you had any joints that became very hot, red and painful suddenly (in the last 6 months)?	☐	☐
12	Have you had any falls in the last 6 months?	☐	☐
13	Do you have any other health conditions such as diabetes, heart disease or high blood pressure?	☐	☐

YOUR SCORE

Add up your score for Questions 1 to 10 (Each answer = 0 to 3 points)

Total Score:

WHAT YOUR SCORE MAY MEAN

0 – 7

Mild symptoms
Keep doing what you're doing. Continue healthy habits.

8 – 14

Moderate symptoms
Consider discussing with a physiotherapist or doctor. There may be ways to improve your comfort and function.

15 – 30

More troublesome symptoms
It's a good time to seek professional advice. A personalised plan can help you move better and stay independent.

This self-check is not a diagnosis. It is a tool to help you understand your symptoms and start a conversation with your healthcare provider.

RED FLAGS – SEEK MEDICAL HELP SOON

- ☐ Sudden severe joint pain, swelling, redness and warmth
- ☐ Fever along with joint pain
- ☐ Inability to bear weight or walk
- ☐ Recent significant fall or injury
- ☐ Rapidly worsening symptoms
- ☐ Unexplained weight loss, persistent fatigue or feeling unwell
- ☐ Night pain that does not improve
- ☐ Any new or unusual symptoms that worry you

When in doubt, get it checked.
Early advice can prevent bigger problems later.

TIPS BEFORE YOUR APPOINTMENT

- ✓ Take this completed self-check with you.
- ✓ Note down your questions and concerns.
- ✓ List all your current medicines and supplements.
- ✓ Mention how your symptoms affect your daily life (e.g. work, home, sleep, activities).
- ✓ Be honest — this helps your doctor or physiotherapist give you the best advice.

Be prepared.
Get the most from your visit.

KIND REMINDER

Your symptoms, your experience and your goals matter. There are many ways to feel better and stay active. Help is available — and you don't have to manage this alone.

Every conversation is a step towards a more comfortable, active you.

HEALTHY JOINTS NEED HEALTHY COMMUNITIES

Stronger people. Kinder places. More active tomorrows.

Arthritis doesn't just affect individuals — it affects families, workplaces, neighbourhoods and communities. When we create supportive environments, everyone can move more, do more and live better.

Communities in motion. Healthier generations together.

Healthy communities make it easier for everyone — especially people with arthritis — to stay active, independent and connected.

1

APARTMENT COMMUNITIES
Spaces that support active living.



- ✓ Safe, well-lit walking paths
- ✓ Handrails and non-slip surfaces
- ✓ Seating at regular intervals
- ✓ Lifts and barrier-free access
- ✓ Community exercise sessions
- ✓ Awareness talks and health camps

Small changes in our surroundings make a big difference.

2

WORKPLACES
Healthy employees build stronger organisations.



- ✓ Ergonomic workstations
- ✓ Regular movement breaks
- ✓ On-site or virtual exercise sessions
- ✓ Health education talks
- ✓ Support for employees with chronic conditions
- ✓ A culture that values health and well-being

Move well at work. Perform better in life.

3

SENIOR GROUPS & CLUBS
Stay active. Stay connected.



- ✓ Group walking programmes
- ✓ Chair exercises and balance training
- ✓ Social activities and peer support
- ✓ Expert talks by healthcare professionals
- ✓ Early identification of joint problems
- ✓ Encouragement for lifelong activity

Active bodies. Happier minds. Stronger friendships.

4

ACCESSIBLE PUBLIC SPACES
Inclusive environments for all.



- ✓ Smooth, even footpaths
- ✓ Ramps and handrails
- ✓ Accessible parks and recreation areas
- ✓ Clean, well-maintained public facilities
- ✓ Adequate seating and shaded rest areas
- ✓ Clear signage and safe crossings

Communities work when everyone can participate.

5

AWARENESS & EARLY IDENTIFICATION
Spot problems early. Prevent bigger ones.



- ✓ Community health talks and screening camps
- ✓ Information through resident associations, schools and workplaces
- ✓ Honest conversations about joint health
- ✓ Guidance on when to seek professional help
- ✓ Focus on prevention and early management
- ✓ Use of local media and digital platforms

Awareness today. Less disability tomorrow.

6

LET'S DO IT TOGETHER
Everyone has a role to play.



- ✓ Individuals — make healthy choices
- ✓ Families — support and encourage each other
- ✓ Communities — create inclusive environments
- ✓ Organisations — enable healthy lifestyles
- ✓ Healthcare professionals — educate and guide
- ✓ Policy makers — build age-friendly, accessible cities

Healthier communities create brighter, more active futures for all.



Stronger Communities. Healthier Joints. Brighter Tomorrows.



PRO-FIT PEARL

“Healthy communities do not happen by chance — they are built by people who care.”



YOU CAN MAKE A DIFFERENCE

- ✓ Start a conversation in your community.
- ✓ Suggest small changes that make a big impact.
- ✓ Join or support local walking or exercise groups.
- ✓ Encourage awareness programmes.
- ✓ Be inclusive. Think of those who find it harder to move.
- ✓ Together, we can build communities where people with arthritis — and everyone else — can thrive.

WE CARE

Community Wellness Initiative by Pro-Fit

From treating illness to building wellness.

At Pro-Fit, we believe healthcare should not begin only when somebody becomes a patient. WE CARE is our commitment to take arthritis education beyond the clinic and into homes, communities and everyday life — because better joint health is a shared responsibility.

People
Communities
Possibilities.



Small
Steps
Big Change.

Healthier People.
Stronger
Communities.
Brighter
Tomorrows.

The six WE CARE principles guide everything we do — in the clinic and in the community.



W Wellness

Help people protect their health before function is lost.

Small, consistent steps today lead to stronger, more active tomorrows.



C Compassion

We see the person behind the painful joint.
We listen, understand and support — without judgement.



E Evidence

We base our advice on credible science — not fear, myths or fashionable claims.

You deserve information you can trust.



A Active Living

We make movement a natural part of everyday life, at every age.
Because life is meant to be lived — not watched from the side.



R Recovery

We help people regain ability, confidence and independence.
Whatever your starting point, progress is possible.



E Empowerment

We give people knowledge and skills to manage their own health with confidence.
Informed people make better choices and live fuller lives.



A healthier society is not built inside clinics alone. It is built when knowledge becomes action — and action becomes habit.

WHY “WE CARE”?

A physiotherapy clinic can do more than treat pain. We can educate families, identify problems earlier, encourage healthier movement and take credible health information beyond the clinic walls.

WE CARE is Pro-Fit’s way of turning this belief into a lasting commitment — to people, communities and future generations.

Because healthier communities don’t happen by chance — they happen when we care.

OUR PROMISE



Educate before fear.



Guide before disability.



Support without judgement.



Treat when needed.



Empower whenever possible.

More Movement.
More Confidence.
Brighter Tomorrows.

Stronger People.
Kinder Communities.
Brighter Tomorrows.

“Alone we can do so little;
together we can do so much.”
— Helen Keller

Move Better. Live Fuller. Stay Independent.

An initiative by
Pro-Fit Physiotherapy
Gunjur



Ansuera Medcare
Solutions LLP
People. Care. Possibilities.

IN THEIR WORDS

What our patients say about their journey with Pro-Fit Physiotherapy

Selected from our Google reviews - reproduced as patient feedback, without representative AI processing

5.0 ★★★★★
239 Google Reviews

“ ★★★★★

Mrs Renu Awasthi

Google Review

I am deeply grateful to Dr Raja Guru for helping my son recover from a serious shoulder injury. Several doctors had advised surgery, but we trusted physiotherapy first. The results have been remarkable - from not being able to lift a cup without pain to being comfortable doing a dead hang. His scientific expertise, patience and encouragement gave us confidence throughout the journey.

“ ★★★★★

Adarsh mr

Google Review

I had an excellent experience throughout my ACL recovery journey. Rajguru Sir was professional, knowledgeable, supportive and genuinely committed to my recovery. Carefully planned exercises and constant encouragement helped me regain strength, mobility and confidence in my knee.

“ ★★★★★

Pratiksha Mehta

Google Review

I am so thankful to Raja Guru sir for guiding me and assuring me about my knee. I was relieved after meeting him. He showed all the exercises to be done and is an expert in his subject - and a great human being too.

“ ★★★★★

Sasikanth Reddy E

Google Review

I had been struggling with persistent back pain for quite some time. What stood out was not just the treatment, but the genuine care and attention throughout recovery. Every exercise and session was tailored thoughtfully, with a clear focus on long-term improvement.

YOUR SUGAR IS ONLY **ONE NUMBER**. HOW HEALTHY ARE YOU REALLY?

A practical guide to diabetes, metabolic health,
muscle and movement for a stronger,
healthier tomorrow.



A PREVIEW OF WHAT'S INSIDE

1



WHY INDIANS DEVELOP DIABETES AT LOWER BMI

The unique Indian risk factors
and what you can do about them.

2



BELLY FAT AND METABOLIC RISK

Understand visceral fat,
insulin resistance and
cardiometabolic health.

3



MUSCLE – YOUR BODY'S GLUCOSE-DISPOSAL ENGINE

Why strength and muscle mass
matter in diabetes prevention
and management.

4



THE 10-MINUTE POST-MEAL WALK

A simple habit with powerful
benefits for sugar control.

5



THE INDIAN DIABETIC PLATE

Practical, realistic and
delicious food choices
for everyday life.

6



SLEEP, STRESS AND METABOLIC HEALTH

How better sleep and stress
management support healthier
sugar levels.

7

YOUR 30-DAY MOVE MORE CHALLENGE

Small, consistent steps for
big long-term benefits.



Move
More



Build
Strength



Eat
Better



Sleep
Well



Feel
Healthier

Diabetes isn't only about sugar.
It is about how we eat, move, sleep, age and live.

Don't miss the
November 2026 issue!

Practical knowledge.
Real-life tips. A healthier you.



MOVING FOR A BRIGHTER TOMORROW

Modern Physiotherapy. Real People. Better Lives.

At Pro-Fit Physiotherapy, Gunjur, we combine evidence-based physiotherapy, advanced technology and compassionate care to help people move better, live fuller and stay independent — at every stage of life.

Same People.
New Possibilities.



Today Stronger.
Tomorrow Brighter.

OUR COMPREHENSIVE PHYSIOTHERAPY SERVICES

Personalised care for real-life goals.

- Assessment & Diagnosis**
Understand the real cause — not just the symptoms.
- Manual Therapy**
Hands-on techniques to reduce pain and improve movement.
- Exercise Therapy**
Individualised programmes for strength, balance and function.
- Education & Self-Management**
Practical guidance for long-term health.
- Lifestyle & Ergonomic Advice**
For home, work and everyday activities.

ADVANCED TECHNOLOGY FOR BETTER OUTCOMES

Evidence.
Innovation.
You.

TECAR THERAPY

Deep healing. Faster recovery.



TECAR (Transfer of Energy Capacitive and Resistive) therapy uses high-frequency electrotherapy to stimulate natural healing processes in deeper tissues.

- ✓ Reduces pain and inflammation
- ✓ Improves circulation and tissue repair
- ✓ Helps in both acute and chronic conditions
- ✓ Useful for arthritis, muscle, tendon and ligament injuries

FASTER RECOVERY.
GET BACK TO WHAT YOU LOVE.

PEMF THERAPY

Support healing at the cellular level.



PEMF (Pulsed Electromagnetic Field) therapy uses gentle electromagnetic waves to support cellular function, reduce pain and promote tissue healing.

- ✓ Enhances natural healing at cellular level
- ✓ Helps reduce pain and stiffness
- ✓ Supports bone and joint health
- ✓ Useful in arthritis, injury recovery and chronic conditions

RECHARGE. REPAIR. MOVE AHEAD.

CONDITIONS WE HELP WITH

From everyday pain to long-term conditions.

- Osteoarthritis and joint pain
- Back and neck pain
- Sports injuries
- Post-surgical rehabilitation
- Muscle and ligament injuries
- Balance and fall prevention
- Postural problems
- Workplace and repetitive strain injuries
- Age-related mobility issues
- General fitness and conditioning

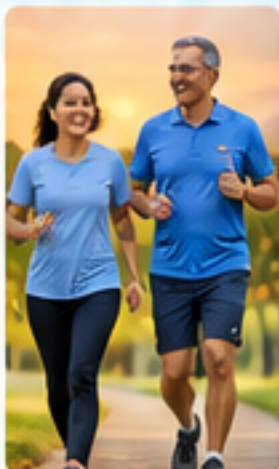
Less Pain.
More Life.

CARE AT EVERY STAGE OF LIFE

Because movement matters at every age.



CHILDREN & TEENS
Active, healthy beginnings.



ADULTS
Stronger for work, family and life.



SENIORS
Independent for longer.



ATHLETES & ACTIVE INDIVIDUALS
Recover. Perform. Stay in the game.

OUR DIFFERENCE

Why people trust Pro-Fit.

- Experienced and caring team
- Evidence-based practice
- Advanced modalities (TECAR, PEMF and more)
- Individualised treatment plans
- Focus on long-term outcomes
- Friendly, supportive environment in Gunjur
- Community-focused and education-driven

YOUR NEXT STEP

Small steps today. A healthier tomorrow.

- Book a consultation
- Get a personalised assessment
- Start your treatment plan
- Move better. Live fuller.

Invest in your movement.
It pays a lifetime of dividends.

THANK YOU FOR BEING PART OF THIS JOURNEY

We hope this edition of the Pro-Fit Health Digest has informed, inspired and encouraged you to take charge of your joint health and overall wellbeing. Together, we can create healthier people, kinder communities and brighter tomorrows.

Stay Active.
Stay Informed.
Stay Independent.



Follow us for more health tips, updates and community programmes at Pro-Fit Physiotherapy, Gunjur.

Healthier People.
Stronger Communities.
Brighter Tomorrows.

“The best time to take care of your joints is today. The next best time is tomorrow. Together, we can make both count.”

Move Better. Live Fuller. Stay Independent.

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People. Care. Possibilities.



PALFS

Pro-Fit Arthritis Life & Function Score

A simple tool to understand your progress.

Measure
Understand
Move Forward

Your Health.
Your Progress.
Your Tomorrow.

Better Movement.
Brighter Tomorrows.

The **Pro-Fit Arthritis Life & Function Score (PALFS)** helps you understand how arthritis is affecting your daily life. You can use it before and after treatment (physiotherapy, lifestyle changes, medication or surgery) to see your progress. It looks at pain, movement, daily activities, confidence and overall well-being — because arthritis impacts more than just your joints.

Name (optional): _____

Age (optional): _____

Condition (e.g. knee/hip/other): _____

Date: _____

Stage: ☐ Before treatment ☐ During treatment ☐ After treatment

For each question, please tick one box for how much difficulty or problem you have had in the past 7 days due to your arthritis.

0None
(No difficulty)

1Mild
(Slight difficulty)

2Moderate
(Some difficulty)

3Severe
(Much difficulty)

4Extreme / Unable
(Cannot do at all)

Domain	No.	Question	Before (0–4)	After (0–4)
 1. Pain & Symptoms Less pain. More comfort. Better days.	1	How much pain do you have during your usual daily activities?	☐	☐
	2	How much pain do you have at rest or at night?	☐	☐
	3	How much stiffness do you experience (e.g. on getting up or after sitting)?	☐	☐
	4	How much swelling or other troublesome symptoms (e.g. grinding, catching) do you have?	☐	☐
 2. Movement & Function Move with ease. Do more each day.	5	How much difficulty do you have walking on level ground?	☐	☐
	6	How much difficulty do you have going up or down stairs?	☐	☐
	7	How much difficulty do you have getting up from a chair, bed or toilet?	☐	☐
	8	How much difficulty do you have with bending, squatting or other movements important to you?	☐	☐
 3. Activities & Participation Stay active. Stay involved. Enjoy life.	9	How much difficulty do you have with household responsibilities (e.g. cooking, cleaning, shopping)?	☐	☐
	10	How much difficulty do you have with your work or usual daily role?	☐	☐
	11	How much difficulty do you have with exercise, sports or recreation?	☐	☐
	12	How much difficulty do you have with social outings, travel or family activities?	☐	☐
 4. Confidence & Independence Feel confident. Stay independent.	13	How confident do you feel using your affected joint?	☐	☐
	14	How often do you avoid activities because you fear pain or damage?	☐	☐
	15	How much do you need help from another person because of your joint?	☐	☐
	16	How difficult is it for you to live independently the way you would like?	☐	☐
 5. Life & Wellbeing Happier days. A brighter tomorrow.	17	How much does your joint problem affect your sleep?	☐	☐
	18	How much does your joint problem affect your mood or emotional wellbeing?	☐	☐
	19	How much do you feel you are missing activities that matter to you?	☐	☐
	20	Overall, how much does your arthritis affect your quality of life?	☐	☐

Your PALFS Score

	Before	After
Total Score (0–80)		
Joint-Life Impact Score (0–100)		
(Total score ÷ 80) × 100		

Lower scores mean less impact of arthritis and a better quality of life.

How to interpret your score (0–100 Joint-Life Impact Score)

0 – 20

Mild impact
(Arthritis has little effect on your life)

21 – 40

Moderate impact
(Noticeable effect, but you can manage)

41 – 60

Substantial impact
(Regularly limits your activities)

61 – 80

High impact
(Severely affects daily life)

81 – 100

Very high impact
(Extremely limits your life)

A few more questions (not included in the score)

1. What is the ONE activity your joint problem prevents you from doing that you most want to regain?

2. Compared with when you started treatment, are you:

☐ Much worse

☐ Worse

☐ About the same

☐ Better

☐ Much better

3. If your joint remained exactly as it is today for the next year, would that be acceptable to you?

☐ Yes

☐ Unsure

☐ No

**Please note:**

- PALFS is a Pro-Fit educational and monitoring tool.
- It is not a diagnostic test and does not by itself determine whether you need surgery.
- Please discuss your results with your physiotherapist or doctor.
- Use this tool regularly to track your progress and stay motivated.

Small Steps.
Big Change.



Healthier People.
Stronger Communities.
Brighter Tomorrows.

