

Don't Let Arthritis Keep You From Adventure



Episode 34: Don't Let Arthritis Keep You From Adventure with Dr. Alysa Kuhn

Gregory Anne

This is the Rebellious Wellness Over 50 podcast for women over 50 who aren't done yet. You may have seen the worst of aging and are hoping there's a better way. There is and I'm going to show you how in interviews, book reviews, rants and stories. Each week I'm going to bring you the latest science based info on how to age better. I'm Gregory Anne Cox, and I believe it's time to bust the myth that aging equals decline in every area of life. It pisses me off, and it's BS.

Gregory Anne

Look, aging happens, but it doesn't have to ruin your life. You just need to get a little rebellious in your approach.

Gregory Anne

Welcome back, everybody to another adventurous episode of the Rebellious Wellness Over 50 podcasts. And I say adventurous, because today we are going to speak with Alyssa Kuhn about adventure at any age. Alyssa is an expert in helping people with arthritis primarily, but other joint limitations from pain and restriction, have fun exercise and adventure in their life because she believes that you shouldn't ever have a time in your life where adventure isn't possible. Alyssa, welcome. And thank you for being here.

Alysa Kuhn

Yes. Thank you so much for having me.

Gregory Anne

Yeah. This is exciting. When you wrote to me and I went on your website, there's a beautiful picture of you Colorado mountains, fresh air, kind of feeling. And I thought, oh, this is a woman after my own heart. I realized that you're really young to be helping us older people with aches and pains and things. So tell us a little bit about what, how did you get here? What made you fall into this demographic?

Alysa Kuhn

Yeah. So when I was in PT school, like, probably a lot of people, I mean, you want to work with athletes, you want to work on professional sports teams and things. And then towards the end of PT school, I was able to do an internship type thing at an independent living facility. And this independent living facility was amazing. They had exercise programs. Everyone was moving socializing, everyone was healthy. And then I was able to do an exercise class, a brand new class like introducing strength training and things that, aside from the typical seated exercises and things like that, these people were, you'd ask them just to walk and sometimes they would run.

Alysa Kuhn

These people were in their 80s and 90s, and it was so fun to see that. When they're usually in those seated balloon tapping exercise classes when they're out there running. And so then when I left that independent living facility and moved into home care, I was working with people that were after knee and hip replacements and just having just some arthritis pains and other types of things. But I kind of saw the other side of aging where people were in their 40s 50s and already experiencing movement limitations, already kind of homebound and sometimes even bed ridden, which was, there was just such a discrepancy between these two sides of aging.

Alysa Kuhn

And then when I started working with these people in home care, we were able to kind of get back and get them out into the community and help show them hope and strength. And so then I decided to figure out a way that I could transform all of this and help so many more people, especially people that have arthritis, because arthritis can be one of these conditions that can kind of send you down that path of not so good aging. And so I am on a mission to show people that even when you're 70, 80, 90, you can still be adventuring.

Alysa Kuhn

But you have to start in your 40s, 50s, 60s and beyond. And there's a lot of work to do, especially with arthritis. It's very negative, and you Google, search it and you see people with Canes, walkers, all kinds of stuff. And so I am on a mission to change the narrative of adventures possible with arthritis. And aging doesn't have to be something that you dread. And so I've kind of seen both sides of it. And now I want to kind of promote more of that positive adventure aside.

Gregory Anne

I love that and that you started with in your current work, changing the narrative. And I think that that is such a big idea in terms of how we age. For some people, the narrative in their community, their group of friends and family members is so strong about slowing down. Your metabolism slows everything slows down. If it hurts, don't push it, stay home, relax, rest. But if we can surround ourselves with voices like yours and for people in their 50s, 60s and 70s, look to those people who have turned around a limitation and are able and exercising.

Gregory Anne

And I'm not saying that there are going to be people that are truly, totally limited by something, that's true. So maybe there's a chair exercise that they're going to do, and maybe their adventure is taking a cruise, right? Adventure takes many many forms. We're talking about being able to have physical adventure, participate if you wanted to go, let's say hiking in a beautiful spot, but you weren't ready and you had knee pain. What would you say? Alyssa? How would you start to help that person?

Alysa Kuhn

So I think, honestly, the first part is just understanding and believing that you can. I have so many people that come to me that don't even think that that's a possibility that even with a bone on bone, arthritis is a big one. When you hear that, you think everything is gone. Everything is out of the window. And in our health care system, we're kind of discouraged to adventure. Discouraged to move. Slowing down is a big thing that people hear like, oh, you're getting older. You just kind of need to slow down.

Alysa Kuhn

And so one of the biggest things that I focus on is one, just showing that there's hope by showing stories of other people or what other people have been able to accomplish and just kind of actually understanding what arthritis even is, because a lot of times when we have it, we don't even really know what it is.

Gregory Anne

Well, why don't we pause there and explain to people what it is, please?

Alysa Kuhn

Yeah. So a big misconception with arthritis is that it's caused by wear and tear. With this narrative, if you start out with that, then you think, okay, well, exercise is going to make it worse. I should probably limit my movement. I have people who limit the amount of times they're even walking around their homes. Or actually, I've had people that have moved out of their homes because they have stairs, and they want to limit the stairs that they're doing. And so it's actually caused by, which is a lot of conditions that are now coming out, but caused by inflammation.

Alysa Kuhn

And what inflammation does is it comes from a variety of different places. Food, diet, food, exercise, poor sleep, stress all kinds of things. But essentially, what that does is, those inflammatory cells collect and then they make your joint really mad. And when they make your joint really mad, they start kind of wreaking havoc on some cartilage and just irritating the bone. And that's what causes pain. But if we can pull out that inflammation and we can decrease the amount of inflammation that's constantly irritating your joint, your bones, then we can actually find pain relief and that it's not necessarily limiting your mobility.

Alysa Kuhn

Actually, increasing your mobility is, doing the right things, is going to be the most powerful to reduce that inflammation. But it's not just exercise, it's watching what you eat, getting quality sleep. There's a lot that goes into it. So it's not just wear and tear, and it's not just a one sided stop moving, slow down, rest that's going to help you find pain relief. And you also don't necessarily need a new joint in order to find pain relief with surgery and things like that, because under that wear and tear mentality, if you think that okay, I've kind of done the damage, and there's really nothing I can do about it.

Alysa Kuhn

Then a new joint sounds like a very viable option. But actually, if you don't get some of those inflammatory things under control, if you do get a joint replacement, you may actually continue to have pain because it's not necessarily guaranteed that you won't have pain, especially if you have some of these factors that we haven't cleaned up first. So it's not necessarily wear and tear, but definitely more of an inflammation cause. And there's lots that goes into it to kind of reduce that or reduce the irritation.

Gregory Anne

And let's qualify that rheumatoid arthritis is different. Right. That's an auto immune situation in the body. Yes. So it also causes inflammation. However, there is a different root cause of that particular arthritis, and it's more systemic than joint located. Would you say?

Alysa Kuhn

Right yes.

Alysa Kuhn

Osteoarthritis is kind of the typical like, I have arthritis in my knee, that sort of thing. Rheumatoid arthritis can affect more joints, and you have more systemic like fatigue and some of these other symptoms. So typically arthritis can't, I mean, osteoarthritis can spread to other joints, too, but usually it's localized to knees, hips, spine, those are and hands, those are kind of the common places. But, yes, they are different, and they are treated differently, too. Rheumatoid arthritis requires a little bit more medications and control of those autoimmune symptoms.

Gregory Anne

Yeah. So people that have rheumatoid arthritis who are working with a good medical team, practitioners whomever I would say everybody should check with their doctor if they are with a doctor or practitioner for a specific pain situation in the body. But especially people that have the rheumatoid situation is a much more comprehensive thing. And although they probably could find pain relief, working with your knowledge and information, just check with your docs people before you launch off.

Alysa Kuhn

Yeah. And it's one of those things. Do I actually have some people that have a little bit of both? There are some crossover. So if you're having trouble finding pain relief like nothing seems to be working and you're treating it like osteoarthritis, then there is potential to have some route of rheumatoid arthritis, which then requires some further kind of digging with medications and treatments and things like that. So I do have people that do tend to cross over. It is something that does happen, especially if you start to experience some of these other symptoms.

Alysa Kuhn

But fatigue is a symptom of osteoarthritis if you're not sleeping well because of joint pain. And so if there is some question about something doesn't seem right or something isn't responding how I want to it is worth getting checked out.

Gregory Anne

And that would be a blood test. They test for the markers of the autoimmune crisis in your body.

Alysa Kuhn

Yes. I believe it's the rheumatoid factor that they look for.

Gregory Anne

And it's good that we're talking about this because some people may just think because it can come on at any time in life, right. It's not like it starts when we're oh, if you haven't gotten it by the time you're 30, then you probably don't have it. Autoimmune situations can happen at any time triggered by all kinds of crazy things these days. So if you feel like, oh, it's just arthritis, plain old arthritis. But I'm so tired and I just feel awful. Go to a doctor and say, Look, I'd just like to give me this test, right?

Alysa Kuhn

Exactly. And then you can maybe find some relief, take care of some of those symptoms. So then you can start exercising, moving, and start tackling some of those other symptoms, too.

Gregory Anne

Exactly. So back to the adventure part, which is the part that I really like. Adventure, in your world, you live in Colorado, you've got beautiful hiking trails and walking and biking and all kinds of things. What about urban dwellers? What about city dwellers? What kind of adventures can they hope to include in their adventures/exercise I would say?

Alysa Kuhn

Yeah. So one of the things, I'm actually in Utah, but they are kind of no, that's okay. But the thing of it is adventure, like you had mentioned, can look so different. And I kind of define adventure as something that makes you happy, whether it's playing with your grandkids, whether it's just walking with a friend around the neighborhood a few times. It can be hiking, biking, skiing, those sorts of things. But even just like cycling in an urban dwelling community, it doesn't have to be something that's extravagant.

Alysa Kuhn

And it doesn't have to be like you also mentioned something super physical, even just being able to tolerate sitting or just standing for a period of time so you can interact with your grandchildren or something like that. So just no matter what type of chronic illness or pain or restriction you have, you can adventure. It just might look a little bit differently. And so if you just think about what makes you happy, if I could do this, then I would be happy or at least have a little bit of happiness in my life.

Alysa Kuhn

Then that's what we go after. And I have people that it is I want to get back to skiing. I also have people that I want to be able to carry my grandchildren up and down the stairs. So I feel safe watching them sort of thing. And so it's very personally defined by your situation. But I always tell people to don't make those goals small just because you have arthritis. I have people that were runners and they're like, you know what? I probably can't run again.

Alysa Kuhn

So I would just really like to walk a few blocks around the neighborhood when in reality, running doesn't necessarily have to be ruled out. Maybe you can't go run a marathon or run miles upon miles. But being a recreational runner and doing walk, run intervals or running maybe a couple times around the block can be possible. And so don't make those goals small just because you think that you're limited by arthritis, have an open mind with those adventures to be able to actually achieve them because you could actually surprise yourself.

Gregory Anne

And I like that you brought it down to the, I'm going to say the micro level, in picking up your grandkids and carrying them safely. I was also thinking about people that have bad knees, don't like to get on the

floor because they have a hard time getting up or it hurts to kneel. And yet we're about to go meet our one year old grandbaby, who lives in the UK. Of course, he's a Covid baby. So we're finally going to get to see him and he's on the floor all the time.

Gregory Anne

So my husband, who has some uncomfortable, he's had one knee replacement last well in December, and one knee that doesn't feel so good. So I might have to take you up on a little, we might have to get some help from you before we go, because I know he's really excited to be playing with little Alfie.

Alysa Kuhn

Yeah. There's all sorts of things. And kneeling and getting down to the floor is one of them. A lot of people think that if you have knee arthritis, you just can't do it, that it's going to cause more damage, kneeling. But you can actually do that, and it's not going to cause more damage if your joints are ready.

Gregory Anne

Yes.

Alysa Kuhn

If they're not ready and you have pain, putting pressure on your kneecap probably isn't going to feel the best because your joints are already mad. But if we can take some of that anger out of your joint, then it's going to feel a lot nicer. I've had people that have been able to return to kneeling, no problem, and have even been able to sit back on their heels when they thought that was never possible. It takes work and it takes the right type of movement and things.

Alysa Kuhn

But it's these possibilities, like knowing that one is not going to cause more damage when you're ready. But two, that it's possible that you don't have to rule these things out.

Gregory Anne

Yeah. And I think possibility is if people can believe in the idea, that alone is motivation, because a lot of times people say, oh, I don't have the motivation to do my exercises today. But what if that thing that you really missed or that thing you really want to achieve was possible for you? Exactly. Then you take, are more likely, I would say, to take the steps to do whatever. And I'm thinking that there are daily things that you would have people do certain stretches or tell us a couple of things that you would suggest for somebody who would like to strengthen a knee or feel better about their knees.

Alysa Kuhn

So it's first finding things that your joints actually like and finding things that you actually like, because I have people that come to me all the time, like, do I really have to do these PT exercises for the rest of my life? And they have, like, a paper of three or four things? And the answer is yes to a certain extent, but

they don't have to be just these four things. There are like a bajillion exercises out there. And if you don't like one or something just doesn't feel right, then don't waste your time and keep doing it.

Alysa Kuhn

There are thousands of ways we can modify it. We can make it so it doesn't hurt. People think that they need to push through severe pain, no pain, no gain sort of thing. But that's actually not true. Exercise may cause some discomfort, but you shouldn't suffer through it. And so right now, if you're doing certain stretches or certain movements that you feel like you're suffering through. We need to chat. And also one of the things, stretching can play a part, but I am very movement driven, and I actually find that mobility and that muscle tightness, muscle cramping, actually improves better with actual movement.

Alysa Kuhn

Taking your joints through that range of motion versus just doing like, some static stretching. It does have a time and a place, especially in the morning or at night when you are having some of that soreness. But getting up and moving is one of the biggest things, but you have to make sure you're doing the right movement. And there are lots of different ways to start whether you have knee arthritis, hip arthritis, low back arthritis. I have lots of introductory videos and things, and when you approach one of those videos, like, if you do a YouTube search or something, not every exercise is going to work for you.

Alysa Kuhn

Probably there are some that won't feel good, but that's okay. All you really need is just to find, like, a solid three to four things that you can do consistently, and then we progress those, you master those, and then you progress those. So just stick with finding a couple of things that feel really good to you. Then we can progress into strengthening and things. But the first barrier is just to find ways you can move and not flare up your pain or pay for it later.

Gregory Anne

The pay for it later thing. I'm glad you mentioned starting with something that feels good and progressing because I'm imagining that many people with pain who have pulled back, even walking their stairs, whatever their muscles are not strong enough to take on the 10X routine right away with Kettle bells and jumping on your bike and racing around. You have to really think about carefully. Just turn on one of Alyssa's videos. Does this feel good to me? Oh, I like this one. I like that one. Okay, great.

Gregory Anne

Try. And also you made a good point. You shouldn't be in agony or pain, but you kind of got to stick with it. Initially, you might feel discomfort. I think with what you use.

Alysa Kuhn

It's hard to find that threshold, especially when you're starting out, because a lot of times we associate pain immediately with negativity. So anytime you feel like a twinge of pain or your right knee feels

different than your left knee, and it's like, I think I'm causing more damage, then we stop. And that is actually a hard threshold to like, when should I keep going or when do I stop? And one of the things that I like to use is kind of a threshold of the zero to ten pain scale.

Alysa Kuhn

It's subjective, but it's very personable to you. Your ten out of ten pain is going to be different than mine, but I use that threshold of kind of if your pain is more than a five out of ten, that's your joint saying, hey, maybe we need to stop. We need to modify and do something. If we're below that, keep going. I at least encourage a few more repetitions or a few more minutes if that pain starts to increase above that threshold, that's your joint saying, hey, pay attention.

Alysa Kuhn

But a lot of times it can go away or it can continue to decrease or kind of hover in that three to four discomfort. I know it's there. So if we kind of think about that threshold, that can be helpful to a lot of people to figure out, like, am I causing more damage, or is this okay? And that's kind of a very rudimentary way to kind of think about it initially that you're not always causing more damage. If you feel a twinge of pain and you shouldn't stop at every little ounce of pain that you feel, and that's what a lot of people think.

Alysa Kuhn

We just associate it with damage. Hey, stop. And then that leads us down to inactivity, where we become fearful of movement. So if you're a little bit scared listening to this and you're a little bit scared to, like, I have people who have knee arthritis and don't bend their knee going down the stairs or up the stairs because they think that it's going to cause more damage because it maybe will feel a little bit uncomfortable or painful. But then they're like, you know what? I actually just started bending my knee because I thought that it wasn't going to cause more damage, and it actually didn't hurt as bad as I thought it would.

Alysa Kuhn

It's just the kind of little things about it's not just go out and do all these exercises, it's figure out what's right for you actually believe and understand, kind of where that pain really starts to cause more damage and maybe where it's actually okay. And then that can unlock a lot of things.

Gregory Anne

I want to go back to the beginning of our conversation where you said it's not just movement and exercise that will affect the amount of inflammation or moving inflammation out of the body. It's diet, it's managing stress. This is a conversation that comes up over and over again, but I have to bring it up over and over again because it's so important, and I think we hear so much about inflammation. We know that either it's the cause or it's the result of disease processes in the body. I think everybody's heard that. And now they're tuning it out.

Gregory Anne

They're like, right, I shouldn't eat the French fries. No more inflammation. Or I know I have too much stress in my life. It's just my life. And, Alyssa, I'm going to let you speak to this, too. The importance of adding in these lifestyle, all the lifestyle components with movement will give you a greater result. Would you agree?

Alysa Kuhn

Yes. And I'm actually doing a support group for bone on bone knee arthritis right now. With a group of people. And actually one of the most surprising things that they have found was it's not just movement and exercise that's flaring up their pain. One of them was in a toxic relationship. The other one was drinking maybe more alcohol than they should have been. Or one was not really paying attention to their eating. And that was actually what was causing it and then not thinking about sleep and the quality of it.

Alysa Kuhn

And maybe I should pay attention to that a little bit more. That was honestly one of the biggest things that one of the biggest realizations going into this is it's not just lose weight. That's a big one. Blanket statement. Lose weight. Weight loss can be really hard. And so just starting with that is not going to help doing, like, maybe incorporate a couple of anti-inflammatory foods or maybe try to stop being on your phone maybe an hour before bed, and then you can improve the quality of sleep.

Alysa Kuhn

So it's not just movement, exercise that triggers arthritis, pain. It can be some other things that maybe you're not thinking about.

Gregory Anne

It's very true. I had a client years ago who I think she was about 54 at the time, and she came to me in a class that I was doing, a lifestyle class, and her goal was to lose weight. But as the weeks went on, it came to light that she had incredible pain in her feet and her arches. And she wanted to do this Habitat for Humanity thing that was a couple of months away. But she said, I can't climb a ladder. I'm in so much pain all the time.

Gregory Anne

So I had her Journal for three days. What she ate. She ate a lot of sugar. She didn't even realize it, in her Starbucks, and she was eating fruit, but like, a lot of fruit, anyway. So I said, can you just take out half of it for, like, a week and see how you feel? And we took out, like, here here here, line items that could be easy to take out. In two weeks she wrote to me, and she was in tears. She's like, if you could see me right now, I'm bawling, my feet have absolutely no pain.

Gregory Anne

And all I did was a little bit more than what you asked me to do. And she said, I'm not going back. I can't even believe it. It was so gratifying. That's inflammation, the pain is a direct result, right? It's just easy to measure. But it is hard to make changes like that, especially if we think we're eating well and we're not really having too many treats. Some people just can't have treats of the sugary kind, find other treats, right? I had one woman was eating 14 pieces of fruit a day, and she had all these gastrointestinal problems.

Gregory Anne

And I said, Could you eat a few less and add some broccoli in there? And she did. And of course they went away. So sometimes we think something is healthy, but we're not feeling well. We got to check in with the one side where it's so much fruit. I'm really healthy, so much sugar. It's not too bad. We just got to look at what we're doing exactly.

Alysa Kuhn

And it's kind of one of those things, too, that just being aware that these other things can trigger it, because a lot of times it's just slow down, stop moving. And we blame movement on a lot of it. But it's actually some of these other things that can make a huge difference. Processed sugar being absolutely one of them. And it's one of those things that, yeah, you may not think that you're eating enough, but then if you sit and write it down or put it in My Fitness Pal like, oh, that's definitely more than I thought or things like that because we always think things are less than what they really are.

Alysa Kuhn

And so we always kind of give ourselves the benefit of that. But sometimes we have to kind of be more aware of what it's actually doing and what you're actually putting in your body.

Gregory Anne

Yeah. And I've read that we overestimate the amount of movement we get in a day and underestimate the amount of food we put in.

Alysa Kuhn

And I would totally agree with that.

Gregory Anne

So tell the listeners you said you have a bunch of videos, but do you run classes virtually? I mean, everybody doesn't live in Utah near you. So how can people take advantage of your expertise?

Alysa Kuhn

So I have a YouTube channel that has tons of workout videos, tips, tricks, all kinds of stuff.

Gregory Anne

Is it Alison Kuhn or is the name of your company?

Alysa Kuhn

So you can search for Doctor Alyssa Kuhn or you can search for Arthritis Adventure, and then it will come up lots of things. I'm launching a brand new free four day challenge that can be found on my website, keeptheyadventurelive.com. I do have an online course and things, but I always kind of recommend just kind of diving into the YouTube going through the free challenge.

Alysa Kuhn

So that way you kind of can get started on that adventure. And then we can go into the Arthritis Adventure Blueprint, which is what this Bone on bone arthritis group is going through and been able to kind of see transformations that they didn't even know where possible. So that's been fun.

Gregory Anne

That's so exciting. I went with my husband to most of his pre surgery when he didn't know he was having surgery. He would go and get the shots, and they would do an MRI and another one day it was like bone on bone. Nothing we can do. The choice was new knee, partial knee. But then you're going to have to go get the other part done in a few years, and he was in such pain. He wanted the knee. I support him in that just that the doctor, who was an osteopath too, which surprised me that he didn't actually suggest anything alternatively.

[00:27:43.050] - Gregory Anne

And that's all fine, too. But that is the medical model for the most part, bone on bone. And here's we're talking about a class that is getting people results who have bone on bone, knee pain people. So if you're listening and that's you, dig into that YouTube channel and see what you can find that could give you an alternative. And again, nothing wrong with surgery, but know that it's a huge thing. And when my husband came home, when he went in, he had no idea what it was going to feel like.

When he came home, he expected it to feel bad. But it felt really bad for a long time. It shouldn't be taken lightly is all I'm saying.

Alysa Kuhn

Exactly. And there's absolutely a time and a place for surgery. You have to look at a lot of different things, though, when you make that decision, because I have some people who had, when I was in home care who got surgery, but they didn't even have a support system at home. So they are trying to do all these things on their own. They have to care for someone else. And so I do have a blog post on how to kind of decide with surgery because it's not...

Alysa Kuhn

You're bone on bone, you have pain. Yes, get surgery. There's a lot that goes into that decision, like, can you do the things that you want to do with pain, limiting your quality of life? And there's lots of things that go into that decision because pain relief is not always guaranteed either. Like I said, and I know people that have been totally successful with the surgery, a joint replacement, partial all kinds of stuff. But I know also some people that have had some complications, some infections, one woman had seven revisions, on the same knee. There are inherent risks.

Alysa Kuhn

You're getting your joint cut open. And so it's a big decision. But a lot of times when we're not given options, it seems like the easy way. But in reality, it's not. And sometimes we don't even really know what is involved in it. There's actually a study that it was some crazy high percentage of people went into surgery trusting their surgeon and not even really knowing what it was going to be like on the other side, they just put full trust and said, you know what?

Alysa Kuhn

That works for me. And they came out and were like, oh, my goodness, what did I do? It's definitely something that requires some research and seeking out of things to make. And my biggest thing is just so you feel more informed in your decision because especially like cortisone shots and surgery. I want you to know that there are options, but also know what kind of goes into some of these things. So you can make an informed decision for yourself because everybody is different. Some people benefit from injection.

Alysa Kuhn

Some people benefit from surgery. But I want you to feel more confident in making that decision by giving you both sides of the story, giving you research and things. And I just did a recent video on meniscus surgery deciding if meniscus surgery is right for you, because a lot of times we don't get much information, and then you have to decide, oh, should I cut into your knee? So it's having that information that you can make an informed decision.

Gregory Anne

Yeah. And speaking of videos, we decided to watch one of the videos on YouTube about the knee surgery, the total joint replacement surgery. I wanted to be a doctor. I'm not squeamish about blood. I've seen heart surgery in the OR like, that doesn't bother me. But let me just tell you, we got through about five to six minutes of it, and then they took out the hammer. Right. Like, the thing is open, that was fine. Cut through the flesh. I'm good.

Alysa Kuhn

Right.

Gregory Anne

Then they take the saw and the hammer. And I said we had to watch it in pieces because it was just too horrible to watch.

Alysa Kuhn

Yes. I almost never recommend watching that, especially if you're getting one, because I actually saw a couple in person, and it was crazy. And so I never recommend watching those. Maybe after you got one. But really, sometimes not even then.

Because. It's a harsh surgery, lots of hammers and yeah, noisy.

Gregory Anne

One thing that was. First of all, he had a great medical team from the minute he decided, there was somebody walking him through what was going to happen.

Alysa Kuhn

And that's awesome.

Gregory Anne

All those things really, really important for anybody that's considering that. And the other thing I would say is if you are with, I'm thinking of the support that he found through a Facebook group. He's not a Facebook groupie, but he felt like he was really getting depressed. And I know we're off the subject, but I just want people

Alysa Kuhn

That's okay.

Gregory Anne

He felt like he was never going to get better, that this is going to be his new life in a chair, like an old person who can't move anymore.

Gregory Anne

And the Facebook group had people with, like, from day one. A year later, everybody talking about their thing. So all of that to say, even if you just are experiencing bone on bone pain, like he was alone during those years of injection, nobody else. He didn't want to talk about it. He's a guy. I can't tell them. They'll think I'm weak. People find support, whether it's one person like Alyssa, or whether it's a group of people that are making changes and working with the pain to avoid surgery.

Gregory Anne

Just find support. And don't be afraid to ask for support because you're not alone and your head will wind you up. Right? This is never going to get better. She says that my knee is going to get better. I don't believe. Okay. So find a group to be in to help you with that. That is like minded, not somebody who's going to go like, oh, you didn't feel well today. Well, just forget it. Don't do your exercises. But you have to find the right kind of people who want to see you succeed in a way that you committed to to begin with.

Alysa Kuhn

Yes. And that's important. I think that Facebook has been huge for that. I actually have a Facebook group too, Keeping Your Osteoarthritis Adventure Alive because what I found was a lot of groups surrounded with osteoarthritis, it tends to shift very negative that people are just kind of complaining about things. And sometimes there's absolutely a time and a place to vent and to do those sorts of things. But the group of people that have really come together in this Keeping Your Adventure Alive group is sharing positive stories and kind of being on the other side of that, sharing that hope, spreading that kind of optimism, which I also think is important because you don't just want a toxic environment of just hearing all the bad things about it.

Alysa Kuhn

You want to be real because it's not all butterflies and rainbows, but you want to be real about it. But you also want to kind of have that possibility that hope and not constantly like, what medication should I take these sorts of things? It's definitely important to find support 100%. And also, I totally agree someone that's like minded. If you want to get out there and be active, then some of these groups might be a little bit too negative for that. And so you just have to find someone in a group of people that really you can kind of vibe with and actually feel like it's benefiting you instead, because sometimes they can make things worse.

So you just want to be careful about that, too.

Gregory Anne

Absolutely. Well, I'll put all the links to your Facebook group, your YouTube channel, all that on the page for anybody that's listening. If you didn't catch what we were just saying, just scroll down to the bottom of this episode page and you'll find the links for all of her things. Well, this has been super informative and lots of juicy good stuff. And what do you want to leave people with? What would you like to say to people who might have doubts about the fact that it could work for them?

Alysa Kuhn

Just because you have arthritis does not mean that you have to be limited. The two biggest things are, 1) there is hope no matter where you're at on the spectrum of diagnosis, whether it's just the early stages, like if you're 30, 40, 50 and you're just getting diagnosed with arthritis or you're at the more severe stages of bone on bone. And these sorts told that surgery was your only option, there is a hope. I am doing so many different things with both groups and then with people in between to show you that even if you have bone on bone arthritis, there is hope.

Alysa Kuhn

There are options, and surgery is not inevitable. Like we talked about. There is a time and a place for it. But it's not the only option that you have. And some people do feel like that. And so I want you to know that there's hope and that you do have options.

Gregory Anne

Amen to that. It's a wrap. Thank you very much.

Alysa Kuhn

Yes. Thank you so much. I appreciate it.

Gregory Anne

Yeah, it was great. And everybody listening. We'll be back next week with another fabulous episode of All Things Rebellious and well over 50. Take care. Till then. Hey, before you go peeps, I'm just wondering if we are connected on social media. If not, let's do that. You can find me on Instagram at Rebelwell 50. Same on Twitter Facebook It's Rebellious wellness over 50. And hey, don't be a stranger comment. Let me know what you'd like to hear about on the podcast or what questions you have about aging better and living.