

The Intellectual Transformation from Child to Adult:

Dealing with Juvenile Rheumatoid Arthritis

Alana Clemente

My high school friends have begun to suspect

I haven't told them the full story of my life...

-Ishmael Beah

Adolescence is an iconic period of time for many young adults. For some it's a break away from those boxed lunches, for others its solo nights without the babysitter while mom and dad are out at the movies. It's these critical years when individuals begin to establish their personality and build character, paving a path to independence. It's a difficult task to battle the common social dilemmas adolescent face, when trying to fit in, all the while discovering who they are. However, it's a far greater problem trying to make a mark in a conventional society, when battling a disease that prevents one from aspiring to an ideal lifestyle.

When fighting the battle of Rheumatoid Arthritis, it's not so much the disease itself that an individual is contending, the battle lies within adjusting to a new lifestyle that one must be able to accept and commit. Studies have shown that Rheumatoid Arthritis cannot only be associated with the elderly, but young adults along with infants are susceptible to contracting Rheumatoid Arthritis. However, no studies have been able to prove a concrete catalyst to what prompts Rheumatoid Arthritis. Individuals who have been diagnosed with RA have many different stories about how they were diagnosed with the disease. Some show that RA was only present after the curing of other diseases, such as Lyme disease. However, in some cases, symptoms of Rheumatoid Arthritis stay dormant in the body for years. Sometimes these symptoms can be mistaken for fatigue or muscle aches. Individuals ignore these reactions and coax the pain with ibuprofen.

The disease causes inflammation in muscles and joints, resulting in sporadic pain, swelling, stiffness and sometimes a lack of mobility in certain joints. Many of the research and findings regarding Rheumatoid Arthritis have been solely associated with adults who fall into the age category of 50 and over. New research discoveries have proven that young adults are as highly susceptible to acquiring Rheumatoid Arthritis as older adults. However, it appears that unlike Rheumatoid Arthritis, Juvenile Rheumatoid Arthritis causes a greater hindrance on the social life of young adults. Even with the new medications and updated therapy, young adults are no longer consumed with a heavy treatment schedules. The dedication committed to treating the disease will affect the social life and activities of these young individuals, because the treatment of Juvenile RA is a lifetime tasks.

Lives are changed and future goals are put on hold once a disease such as RA is detected in adolescence. The deterioration of ones sprit, and the loss of hope is a stamped expression on the faces of young adults, diagnosed with the disease. Hundreds of thousands of young adults suffer from the chronic condition of Juvenile Rheumatoid Arthritis. Juvenile Arthritis is one of the most common joint diseases in America, affecting approximately 300,000 adolescents. Juvenile Idiopathic Arthritis is the most common disease found in young adults.

Symptoms are usually present during the early stages of childhood, and include fatigue, a decrease in physical activities and a loss of appetite. JIA attacks the joints, resulting in constant swelling of the knee, ankle, wrists and,

joint appendages such as the hands and feet. Young adults diagnosed with RA struggle with simple tasks that we take for granted, such as the joy of waking up from a restful slumber with joint stiffness. Other times these symptoms will dissipate throughout the day and many times if the disease is far gone the stiffness of these joints can hinder an individual from proceeding with their daily activities, resulting in joint damage. The picture above shows the difference between a normal joint and a joint that has been affected by Rheumatoid Arthritis.

There are three main types of Juvenile Rheumatoid Arthritis, Oligoarticular JIA, Polyarticular JIA and Systemic JIA. Oligoarticular JIA also referred as Pauciarticular RA, has been found in half of the juvenile rheumatoid arthritis cases. It targets less joints compared to the other sublet strands of JIA. The disease hits main joints like the knees, ankles and elbows. Unlike, other joint diseases oligoarticular JIA can affect only one side of the body. Untreated, young adults can risk diseases such as Iridocyclitis or Uretis a disease that can cause swelling of the eye.

Polyarticular JIA is the second sublet of JIA along with oligoarticaular JIA and this disease is found more in females than males. It targets the neck and jaw and some small joints, such as the hands and fingers. Polyarticular JIA does affect the joints simultaneously.

The last strand of JIA is Systemic JIA. Its symptoms are more prevalent and can be mistaken for other diseases. Unlike, the other strands of JIA, individuals with systemic JIA experience symptoms of high fever and pink rashes similar to the color of salmon. Systemic JIA has also been classified as “adolescent-onset Still’s disease.” These are the main forms of JIA that have been commonly found in young adults. The onset of these

diseases has been diagnosed in children as young as the age of six. Other forms of the disease include Enthesistis and Psoriatic JIA.

Enthesistis is a form of Juvenile Arthritis that causes swelling in the tendon points, other symptoms include back pains, and a risk to anklyosing spondilitis along with inflamed bowel disease. The disease is often present in males who range from the ages of 10 and above. Psoriatic JIA occurs more in females and, over a period of time diagnosed individuals will experience psoriasis. The treatment for Juvenile idiopathic arthritis is similar to the treatment older patients with rheumatoid arthritis experience. However, because JIA is such an acute disease that can leave many young adults susceptible to other medical conditions, if untreated. Many more health professionals are necessary in treating JIA. These healthcare professionals range from Pediatric Rheumatologists, nurse specialists, occupational therapists and physiotherapists.

“To be fully alive is to act... I understand action to be any way that we can co-create reality with other beings and the spirit... Action, like a sacrament, is the visible form of an invisible spirit, an outward manifestation of an inward power. But as we act, we not only express what is in us and help give shape to the world; we also receive what is outside us, and reshape our inner selves.”

-Parker Palmer

The first years for a teen are a vital period. It's in these times when young adults are beginning to understand all of life's tribulations, through trial and error. Juvenile RA affects the social activities of many young adults because, along with the health of many

specialists, outside professionals play a critical role in helping young adults treat JIA. For most of these young adults the extent of their social life begins at school. The education environment is where the support of advisors, teachers and counselors are strongly encouraged. However, too much support can stifle a teenager, forcing them to push away from help. These circumstances create a social hindrance on an individual. They are forced to develop an advance level of intellect that they alone are not mentally prepared for. Debating whether to take advantage of a therapy session with a counselor versus an afternoon out with friends at the mall, can push a teen into an unfamiliar feeling of pressure, often making it harder to prioritize their health. These are only a few of the dilemmas that flood the minds of many young adults diagnosed with the disease. Whereas, it is so easy for others to live a conventional life of partying and roaming the streets of New York, in any weather conditions. These young adults are faced with more serious problems to worry about.

*“ We don’t receive wisdom: we must discover it for ourselves
after a journey that no one can take for us
or spare us.”*

Marcel Proust

Life is designed to constantly throw challenges and obstacles every moment of a person's life. These challenges are not created to hinder the well being of a person, but enhance the betterment of an individual's character. Are we able to apply this same state of thinking when battling a disease? Is the emotional and mental aspect of learning so rudimentary that we can accept these obstacles as building blocks and think in a positive

light rather than focusing on the negatives? How does one apply such a method when facing the diagnosis of Rheumatoid Arthritis?

Society assumes teens in the future will never overcome the disease and will need to depend on the aide of wheelchairs and knee braces. For a young adult to overcome the battle with RA, their accustomed lifestyle is put on pause. Their daily activities of parties, movies and sports are traded in for 2-3 hours of physical therapy, consistent doctor appointments along with and a syllabus of daily medications. Fortunately, doctors within the past 20 years have found new therapies to help in the fight of Rheumatoid Arthritis. Unlike, the old remedies, studies show drugs like Methotrexate, along with a healthy diet and calming exercises such as Pilates and yoga can help reduce joint damage and give young adults the opportunity to continue the social life that they were once accustomed to. Moreover, young adults will not consume themselves over the anxiety of being segregated from the peers. They are able to aspire to achieve the dreams that were once distant, because their knowledge of the disease was meager. However, this acceptance of progression does not happen overnight. Immense amount of dedication and diligence are required in order to achieve happiness, and for many battling with such a disease is not an easy accomplishment.

“One can be temporarily incapacitated, but that’s just the moment for remembering former services and bearing in mind that later on, when the incapacity has been got over, one will certainly work with all the more industry and concentration.”

Franz Kafka

Society unconsciously stereotypes those in poor health, sometimes not recognizing the fact that individuals who are sick don’t want to be acknowledged any

different from a healthy human. Experiencing a life-altering situation will not let the diagnosis of an illness hinder the motivation and ability a person has to revert to their orthodox lifestyle. Such situations should be taken as building blocks that will only make an individual stronger and more resilient to dealing with the harder steps that life paves.

Dealing with the news of my sister diagnosis with Juvenile Rheumatoid Arthritis was a harsh reality I tried to rationalize. Unfortunately, I relented to the assumptions that she would she never be able to enjoy a conventional lifestyle. I felt that for someone to deal, with a devastating hardship at such a young age would only inhibit new insecurities. At the time Research in Juvenile Rheumatoid Arthritis was fairly new. A factor that my family along with my sister used as fuel for her lack of motivation and ability to continue with her hopes and dreams

Rheumatoid Arthritis is a complex disease that can be acquired in many unique forms. I became familiar with Juvenile Rheumatoid Arthritis at the age of sixteen when I found out my youngest sister was diagnosed with Rheumatoid Arthritis after contact with a deer tick, which resulted in her acquiring Lyme disease at age eleven. Throughout her entire school years, her active life was put on hold. Most of her time was dedicated time to physical therapy, doctors' visits and staying home hooked up to an IV with a nurse attendant, who at the time was there to monitor her progress as she overcame Lyme disease. She learned to adjust with the disease by taking the time to see what activities she was able to participate in and those that would cause her great pain. In a recent interview with my sister over a Gmail chat; because fortunately now her active lifestyle prevents her from sitting down with her big sis to chat! She spoke of her hardships dealing with RA at such a young age. She goes on to say, " I remember waking up one

morning with really bad muscle pains, it was hard for me to walk. Mom rushed me to the doctor with the belief that I had contracted Lyme disease, after having a long conversation with my aunt. It was only after the doctors ran a few standard tests, that I was diagnosed with Lyme disease. After extensive home care treatment I was cured of Lyme, but was diagnosed Rheumatoid Arthritis. At the time I was so young and really didn't understand what was going on, I was more content with the fact that I could miss school for a couple of weeks!" I asked her how she felt physically. She responded, "I had a very limited range of motion in my feet (ankles) and legs. My ability to walk was greatly affected." She also went on to tell me that the doctor prescribed her the drug Methotrexate. A drug that was developed as an anticancer drug, it also aided in the treatment of psoriasis. Research trial discovered that drug was also effective in treating Rheumatoid Arthritis. I wanted to know if taking this medication presented any problems in her ability to complete daily tasks. She informed me, "Yes, it has definitely affected the way I live my day to day in comparison to others. I am forced to adapt my body to certain changes in order to function as normally and efficiently as possible. With regards to my medication, I don't believe they played a major role on hindering my activities; they actually helped with the day-to-day pain and range of motion. However, I do believe like all medicines they certainly have their own side effects. Most of which have affected my daily activities." Along with taking prescription drugs, my sister had to take physical therapy. I asked her what did these classes take place and for how long? She writes, "I had to go to physical therapy twice a week for more than six years. I also went to an inpatient physical therapy center. The exercises consisted of basic movement and weight training in order to gain the lost range of motion. I also participated in water therapy."

Like many young adults my sister was one of many who had no other choice of treatment but medicinal. With the new research and studies that show treatment alternatives. I asked her if she had the choice would she opt for alternative treatment? She replied, “No. The earlier a young adult is able to prevent/control the symptoms of RA the better because they then may be to send the disease into remission. If holistic treatment can prove to be just as effective, then I believe it may be something worth considering but not for the more severe cases.” Fortunately, my mother was very diligent in making sure that she consistently followed up, on my sister’s doctors. She also made sure that all of my sister’s doctors were kept on speed dial, on all of the house phones.

Community cannot take root in a divided life. Long before community assumes external shape and form, it must be present as a seed in the undivided self: only as we are in communion with ourselves can we find community with others.

- Parker Palmer

Sophie’s was not as anxious to contact her doctor when she noticed unfamiliar symptoms. Sophie at the time was a teen who was aloof to her symptoms of excessive fatigue, muscle aches and joint inflammation. It wasn’t until she experienced a pain in her back, that the doctor diagnosed her with Juvenile Rheumatoid Arthritis in her early twenties. Mrs. Cruz experienced frequent lower backaches. She goes on to say, “I experienced some bouts of sciatica, very irregular in the beginning, though I blamed it on my poor posture and exhaustion.” She continued to ignore these symptoms resisting scheduling an appointment with a specialist, a hesitation that was caused by fear of testing positive for a disease. I asked Sophie what finally prompted her to go to a doctor.

She responded, “ The duration of the aches and pains caused much concern. Also, I realized that I was taking at least one tablet of Advil everyday for several weeks to mask the pain. Plus, the lack of sleep weakened my overall health and social performance.” Unlike many individuals when experiencing such symptoms, immediately schedule an appointment with a joint specialist.

With a referral by her primary care physician, Sophie was advised to schedule a medical consultation with a Neurologist. I asked her what did her doctor prescribed, once he suspected RA. Sophie’s response was: “I wanted to exhaust all possible treatments prior to surgery.” She met with a Neurologist who specialized in pain management. Upon her visit, the doctor created a therapy regime for Sophie. She was instructed to see a physical therapist several times a week and take several types of anti-inflammatory medications, which included Skelaxin and Celebrex along with different types of pain medications. Unfortunately, her doctor was only a specialist in relieving pain. I assume he had no prior knowledge of Rheumatoid Arthritis. Along with prescribing medication and physical therapy to Sophie, he also insisted that she take nerve blocks and Epidural injections. Sophie didn’t hesitate to question the doctor, she assumed that the doctor was prescribing the proper treatment and continued to have her monthly injections. She had no prior knowledge of the long -term effects of these medications. I asked if her doctor ever offered any other effective alternatives. She replied, “Not really it seemed that most of my alternatives resulted in some form of invasive surgery, he encouraged me to consider undergoing Radiofrequency Nerve Ablation, a procedure that I researched and decided not to go through with. I honestly felt that the doctor was not considering my

health, but cared more about conducting as many surgeries as he can and trying to take my money.”

Sophie talked about her physical therapy sessions. She informed me that her therapy entailed extensive resistance training; special back massages and heat therapy. When she mentioned heat therapy, I asked her if it included the hot pool therapy? She said, “ No, I also considered acupuncture, biofeedback and water therapy. But, as the RA grew more painful and agitating, I became more frustrated and angry. My last option was surgery so I aggressively researched the pros and cons and which doctors would best serve my needs.”

Considering Sophie endured such a colorful experience with RA, at a young age. I asked her if she feels that this disease had hindered her abilities to continue with her active lifestyle. She sighed and responded by saying, “Yes it has, and I’ve changed my walking, sitting and sleeping patterns. I am more aware of my posture and do my best not to carry heavy loads. I still refrain from playing some sports.” I also asked if she feels that any of the medications she was prescribed attributed to her social life? As her voice grew to a higher alto she replied, “Yes, it definitely did. Taking those medications (Celebrex) made my stomach upset and made me feel uncomfortable. Taking those injections were painful and time consuming- making doctors appointments and waiting for hours to see this doctor can take a toll on your patience and your work attendance. Also, the numbed feeling you experience after these injections were not comforting. You always have it in your head that you have the possibility of being paralyzed if something went wrong!” Fortunately with the new research findings in RA, young adults do not have to worry about excessive drug use. There are more holistic and therapeutic

approaches to treating RA. I asked Sophie what advice she would give to young adults struggling between holistic or medicinal approaches to treating Rheumatoid Arthritis. She said, “ I believe that it’s important for young adults to do as much research as they can. They should first consider holistic but still have the option of going for a medical approach if needed.”

I thought that it was interesting to interview to young individuals who lived very active, normal lifestyles, but acquired the same disease in two very different ways. Both cases caused these young individuals to completely change their way of living. Each individual did have their own way of coping with the disease, as well as finding some type of temporary relief to sustain their pain. If neither of these individual ever took the proper steps to treating this disease, the end result could have hindered the strength of their bones in later years. This is similar to the situation that Ana underwent, as she was diagnosed with Rheumatoid Arthritis at a much older age. She explains, “I was diagnosed with Rheumatoid Arthritis, due to a fall I experienced. The disease triggered the upper and lower part of my spine when I was 36. It affects my spine, the joints around my knees and shoulders. The pain I endured before was internal, it didn’t matter if you touched me or not, the pain was constantly present. The symptoms get worst with any change of weather, from summer to winter, rain or shine or hot and cold temperatures. I am able to participate in any kind of activities without a problem. However, when I stop the activities is when I feel the pain increase. I am restricted from doing any cardio exercises like the treadmill, because the pain is more excruciating on the lower area of my body. To coax the pain I would take Advil. Unlike, others I didn’t take the proper steps and go to

physical therapy. I only assume that if I don't take care of this disease now, it will only play a bigger hindrance on social life and activities in the future.

Clearly factors such as humidity, precipitation and snow prove to be a major catalyst in joint pain. However, therapeutic approaches like hot pools are great remedies to aid in the relief of joint pain and stiffness. Although these symptoms don't apply to all who have been diagnosed with Rheumatoid Arthritis, every individual experiences different symptoms at random periods. Fortunately, studies have shown that severe weather conditions can only inhibit joint stiffness. It has not been proven to aide in joint damage. In the year 1961 Dr. J Hollander M.D, an arthritis specialist proved how climate has impact on people with Rheumatoid Arthritis. He performed an experiment with 12 patients who were diagnosed with arthritis. In this experiment Hollander built a climate chamber, where he put each patient in and studied there joint and muscle progress. The chamber integrated high humidity and low barometric pressure. The patients who participated in the study, experienced pain in their joints and stiffness, due to elevated climate. Hollander was able to conclude, that the decline of barometric pressure causes the swelling of joint increase. A reaction that aggravates the nerves located around joints that feel pain and intensify stiffness.

In much wisdom is much grief:

And he that increaseth knowledge increaseth sorrow.

- Ecclesiastes

For some taking the step to schedule a doctor's appointment is an uphill battle. For years it has been written if you are experiencing fever, headache, inability to breathe, please contact your local physician, so the proper prescriptions can be prescribed,

because that's how our parents, and grandparents conditioned us to believe. The doctor's remedy solves all medical complications. However, I begin to wonder with all the new therapeutic and holistic innovations in treating medical illness, has the initial intention of doctors steeped to new lows, so that patient retention is gained through continually prescribing unnecessary medications to patients in order to keep long-term customers?

When the familiar feeling of an itchy throat and stuffy nose wakes me up before the alarm clock, I automatically know that the next five hours will not be pleasant. Similar to every other American who undergoes this transformation, I decided to visit the doctor. Our conversation plays out like an after work tango lesson at dance class. First move: "Ms. Clemente what seems to be the problem." I reply, "Doctor, I am experiencing severe pain in my throat, it hurts when I cough and swallow". Second move doctor asks, "How long have you been experience these symptoms Ms. Clemente?" I reply, "Since this morning when I woke up." At this point our lesson comes to a close with a pivot and spin around, "Ms. Clemente I am going to prescribe some antibiotics. Take 2 spoonfuls a day for one week, if you are still experiencing severe pain come back so I can give you a stronger prescription with a higher dosage." As I leave the examining room and head to the reception, I am charged a twenty-dollar co-pay, because the doctor stuck a tongue depressor down my throat and flashed a light on my tonsils for approximately three seconds. I perceived this as another way for the doctor to get financial gain from my sickness.

When did the health of patients become a barter system? More doctors rely on only treating those who are willing to pay more. In the August 2008 edition of *The New York Times*, writer Jane Brody interviewed Rheumatologist Dr. Joel M. Kramer for her

article “Living Better With Rheumatoid Arthritis”. In his interview Dr. Kramer goes on to say, “Most patients diagnosed at age 45 will be disabled in five or six years. You have to consider what it costs to fix a bridge against what it will cost when the bridge collapses.” After reading this article I felt that the doctor –patient relationship has been misconstrued and transformed into a seller-customer relationship. The loyalty a doctor has to his/ her patient’s well being has been disregarded and manipulated by the illusion of personal gain and wealth. I suppose that the value of today’s new doctors have been capitulated to the beliefs that money is power, relinquishing that moral code that all doctors are taught to abide; patient health comes first.

Doctors had no prior knowledge of treating RA. Outdated medical research once had us believe aspirin, and pain relievers like naproxen, ibuprofen and steroids aided in the cure of Rheumatoid Arthritis. New research discoveries prove these old remedies to be the cause of many complications in the future to individuals diagnosed with RA. In the article “Living Better with Rheumatoid Arthritis” by Jane Brody, Dr. Kramer goes on to mention “ It was important to consider the long-term consequences and costs of the disease when deciding how much to spend on therapy.” I agree partly with Dr. Kramers statement. Yes, considering the long -term consequences of ones health is crucial factor that should be the focus point of that patients treating physician. However, weighing a decision that can determine if a patient will live or die, based on money, I feel is wrong and unethical no matter the financial circumstances.

The United States is the only developed country that continues to struggle with the conflict of healthcare and medical insurance. Countries like Canada and Europe are faced with more complex quandaries. The question now, is do we disregard the teachings

we learned from our parents, ignore the signs of an itchy throat and revert to treatment options that wont burn a hole in our wallets? Or do we as a society continue to comply with the old ways and stray away from new curing development in fear of being out casted?

“This is my thesis: caring for persons, the more able and the less able seeing each other, is the rock upon which a good society is built. Whereas, until recently, caring was largely person to person, now most of it is mediated through institutions- often large, complex, powerful, impersonal; not always competent; sometimes corrupt. If a better society is to be built one that is more just and more loving, one that provides greater creative opportunity for its people, then the most open course it to raise both the capacity to serve and the very performance as servant of existing major institutions by new regenerative forces operating with them.”

-Robert Greenleaf

We strive to make sure that our personal lives are saturated with happiness, and maintained fruitful. Performing simple tasks such as diet and exercise, avoiding toxic addictions, and relinquishing situations that can or may prompt stress, a main contributor to many of societies major health inflictions. These are just a few of the many rules we follow in order to maintain control over the obstacles that one faces throughout life. Many times these negative obstacles are not set forth as a hindrance to make us falter in our abilities to succeed. However, one cannot stumble over such growing pains, without inhibiting some form of mental and physical stress.

Juvenile Rheumatoid Arthritis causes severe psychological and physiological stress on those who are diagnosed with the disease. A disease like Rheumatoid Arthritis,

which has become amongst one of the most common autoimmune diseases, still lacks what main causes trigger the disease. RA mainly causes an imbalance to the HPA axis (Hypothalamic Pituitary Adrenal) medical jargon for stress system. Studies show that patients, who are diagnosed with extreme cases of RA, have abnormal diurnal cortisol variability. Such symptoms have resulted in high risks for other health conditions such as increased resting blood pressure, elevated heart rate, leaving many patients susceptible to cardiovascular disease. Although medical research has not been able to prove that stress leads to psychological and physiological dysfunction, however many studies have shown stress to be a major catalyst in prompting RA symptoms.

Such symptoms can have negative side effects to a patient's social environment. Constant joint pain, inflammation can prompt an individual to remain immobilized physically and mentally. Leading to a less social life as well as a decrease in physical activities. This lack of physical and social behavior has shown to lead an individual into a state of depression, which has become common in many patients suffering with Rheumatoid Arthritis.

To alleviate such symptoms, doctors hypothesized that Yoga, an exercise intended to soothe the mind and body, through muscle strength and agility, has been proven in the dismantling physiological and neurophysiological symptoms, RA patients' experience. Incorporating yoga exercises into daily routines, doctors have found that the resting heart rate in RA patients has decreased, along with a substantial decline in stress levels. Yoga has also been found to help patients maintain a stable well adjusted quality of life. Patients suffering from prostate and breast cancer have benefited from yoga exercises, by keeping their Cortisol levels within normal limits.

The American College of Rheumatology conducted a study, in which they tested sixteen postmenopausal women with RA. Each of these women fell into one of the three classifications of RA. The study was to find out, whether neuroendocrine and physical mobility in older women ranging from the age of 45-75 diagnosed with RA, can be improved through yoga therapy. The regime consisted of three 75- minute classes a week spanning over a period of 10 weeks. In order for doctors to have efficient results from their study, they set requirements to help in choosing the right candidates. The prospective participants had to minimize their glucocorticoid dosage and, free of any other inflammatory or systemic diseases. They also had to demonstrate that they get down on the floor and, lift themselves back up with very little assistance. The participants had to be new to any yoga exercises.

The therapy included a 75 -minute session of Hatha yoga, with the supervision of a registered nurse who is also certified in yoga therapy, as well as a certified cardiac yoga teacher. The women practiced breathing techniques, stretching and agility exercises. Weight training exercises were altered to alleviate stress on joints. The participants were taught at home exercises that they were to take advantage of. Instructors insisted that the women train within their comfort, not to over work themselves. The sessions lasted for 10 weeks and all exercises remained consistent.

When comparing yoga therapy to a controlled medicinal routine, doctors discovered that there was no drastic change in the participant's diurnal cortisol patterns. However, they did find that the women who participated in the 10 -week yoga study experienced a decrease in joint inflammations, pain as well as depression. Therefore, yoga has no curing affects in the remission of Rheumatoid Arthritis, but doctors continue

to encourage RA patients to include Hatha yoga into their daily social and physical activities. Such an approach like yoga improves an individual quality of life, although this study was conducted to prove that yoga therapy is a positive treatment for older woman, diagnosed with Rheumatoid Arthritis. The test shows great promise for young adults who are seeking a more positive and enjoyable way to alleviate the pain that Juvenile RA causes.

*Severe separations in early life leave emotional scars
on the brain because they assault the essential human connections:*

The [parent-child] bond which teaches us that we are lovable.

The [parent-child] bond which teaches us how to love.

*We cannot be whole human beings- indeed, we may find it hard to be human – without
the sustenance of this first attachment.*

- Judith Viorst

Life bonds are required to help increase the motivation and moral support that these young adults will need, to overcome this disease. In her quote Judith Viorst emphasizes the importance of love and bonds. She conveys how separations in any form can cause negative and emotional scaring. Diagnosed with a disease at a prime age in life is an emotional tribulation. It's inevitable that an individual will feel separated from his or her peers. The notion that they don't fit in is contemplated on a daily basis. It's crucial that they are constantly reminded of whom they are, and that a disease is not their label. I think it's the emotional scaring that becomes the onset to these social dilemmas, many of these adolescents experience.

Compared to many of the more severe diseases that many are battling, Juvenile RA is not as harsh. However, it does ignore the fact that many young adults and families are struggling with the disease. What can society do to help? There should be more

emphasis of physical education within high school, focusing on exercises that are not as strenuous, such as yoga and breathing and agility exercises, for those that experience onset joint pains.

Non-profit organizations like the Arthritis Foundation have developed many chapters within the United States, that help families and young adults dealing with RA. They continue to help raise money for new studies to help in the treatment of Rheumatoid Arthritis. Ongoing walks and donations are what help keep these chapters an ongoing. The Arthritis foundation has made great efforts to stop the government from enforcing medical cutbacks. More money needs to put into medical funding and physical therapy centers for these individuals. Society has to make it easier for young adults battling a disease, to be able to live the life that they deserve.

True giving is a thoroughly joyous thing to do. We experience happiness when we form the intention to give, in the actual act of giving, and the recollection of the fact that we have given. Generosity is a celebration. When we give something to someone we feel connected to them, and our commitment to the path of peace and awareness deepens.

-Sharon Salzberg

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