



Understanding Rheumatoid Arthritis





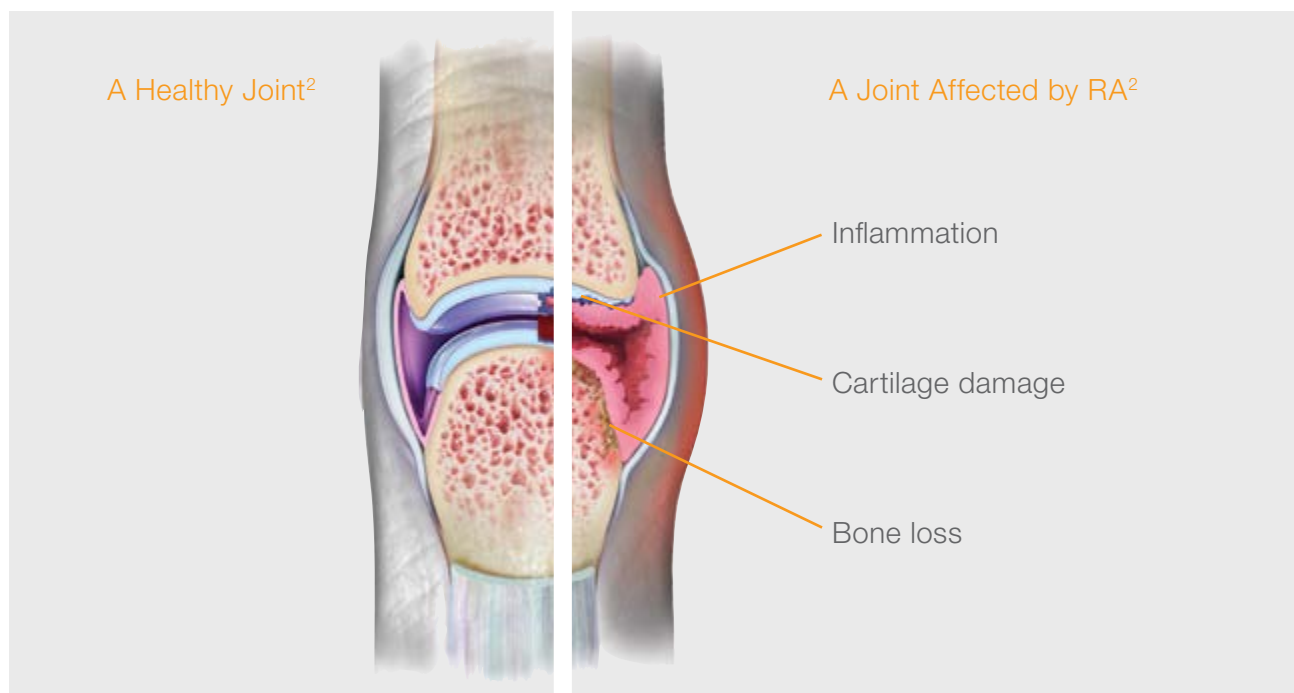
Understanding Rheumatoid Arthritis

What Is Rheumatoid Arthritis?^{1,2}

Rheumatoid arthritis (RA) is a chronic autoimmune disease. It causes joints to swell and can result in pain, stiffness, and progressive loss of function. In addition to joint pain and stiffness, people with RA may also have symptoms such as weight loss, low-grade fever, and fatigue. RA often affects pairs of joints (both hands, both feet, etc) and can affect more than one joint, including the small joints in the wrists and hands. Over time, other joints can be affected such as shoulders, elbows, knees, feet, and ankles.

Over time, the inflammation of RA can cause damage to the joints. In some patients, this may lead to permanent joint damage. As this joint damage progresses, in severe cases, it can cause deformity of the joints and loss of function. It may begin to interfere with daily activities, making them more difficult and painful to do.

For these reasons, it's important to get an accurate diagnosis as early as possible. Talk to your doctor. Together, you and your doctor can find a plan to manage your RA.



Who Gets RA?^{1,2}

About 1.3 million Americans suffer from RA. It affects people worldwide at a similar rate. RA often begins in middle age, but can start at any age. RA affects 2 to 3 times as many women than men.



Understanding Rheumatoid Arthritis

What Causes RA?^{1,2}

The exact cause of RA is not known. Research has found that there are many possible causes, including:

- **Genetics.** People with family members who have RA may be more likely to get it
- **Hormones.** Female hormones may play a role in the disease
- **Viruses or bacteria.** RA may be related to viruses or bacteria that you come in contact with during your life

How Does RA Affect the Body?^{1,2}

Some of the most common symptoms a person with RA may experience are stiffness in the morning and pain and swelling of joints—often in the same joint on both sides of the body. As RA progresses, joint damage may worsen. This can also cause the surrounding muscles, ligaments, and tendons to become weak and unable to work normally.

Symptoms of the disease may appear, go away for some time, and then return, making diagnosis even more difficult. But remember, RA is a disease that progresses over time. That is why it is so important to get an accurate diagnosis as early as possible.

What Other Effects Can RA Have?³

Up to 40% of people with RA may develop other conditions during the course of their disease. While RA affects the joints, people with RA may also be more likely to have the following conditions:

- Heart disease
- Bone loss
- Anemia
- Rheumatoid nodules (knots of tissue under the skin)
- Sjögren's syndrome (dry mouth and dry eyes) and other eye problems
- Infections
- Lung disease

Some of these conditions may be a result of having RA. Medications used to treat RA could increase some of these risks as well.



Know the Signs and Symptoms of RA

What Are the Symptoms of RA?

RA affects different people in different ways. Symptoms may slowly develop over several years, or the disease may progress quickly. Symptoms may be mild or very severe. You may go through phases called “flares” or “flare-ups” when symptoms are more severe. At other times, it may seem as if the disease and its symptoms have gone away. This can, in some cases, be considered a state of remission.¹

Joint pain and swelling may happen slowly and may occur over weeks or months. The small joints in the wrists and hands are often inflamed first. Over time, other joints may be painful and swollen due to RA.³

Signs and Symptoms of RA³

- Painful joints
- Swollen joints
- Stiffness in joints, particularly in the morning
- Low fever
- Fatigue
- Loss of appetite
- Feeling weak
- Lumps under the skin, especially on the hands or elbows
- Weight loss
- Over time, decreased range of motion
- Dry eyes and mouth

If you think you may be experiencing RA symptoms, don't wait.

Make an appointment to see your family doctor or a rheumatologist, a specialist who deals with joint diseases. Be sure to tell him or her about all of your symptoms, even if some of them only happen once in a while.



RA Glossary

Anemia. Condition in which the number of red blood cells is lower than normal; may be present in rheumatoid arthritis and cause you to feel tired.

Arthritis. Inflammation of the joints and the tissues around them.

Autoimmune disease. A disease where the immune system attacks the body's own tissues.

Flare or flare-up. A period when RA symptoms appear or worsen.

Inflammation. Reaction of the immune system to injury or disease. Symptoms include swelling, redness, heat, pain, and loss of function.

Immune system. A network of special cells and organs that work together to defend the body against outside threats, such as bacteria and viruses.

Rheumatoid arthritis. A form of arthritis in which the immune system attacks the tissues of the joints, leading to pain, inflammation, and eventually joint damage.

Remission. A period when symptoms fade or disappear. In RA, this does not mean the disease itself has gone away.

Rheumatoid nodule. Knot of tissue under the skin. Nodules are often harmless unless they become infected or cause pain because they appear near a swollen joint.

Rheumatologists. Doctors who are experts in treating rheumatic diseases and could potentially treat patients with conditions such as arthritis, gout, rheumatoid arthritis, lupus, and many others.

Systemic. Affecting the whole body rather than one organ or local area. For example, rheumatoid arthritis is a systemic disease.

Glossary adapted from MedlinePlus Medical Dictionary.



Diagnosing and Managing RA

How Is RA Diagnosed?²

There is no one test that can show that you have RA. But your doctor can use a combination of tools to help diagnose RA:

Medical and family history

- Do you have a relative with RA?
- What medications have you been taking?
- Do you have any other medical conditions?

Physical exam

- Reflexes, muscle strength, and general health
- Ability to walk, bend, and carry out activities of daily living
- Evidence of inflammation in the lungs

Symptoms

- Pain, stiffness, and trouble with range of motion

Lab tests

- Rheumatoid factor (RF)
- Anti-cyclic citrullinated peptide (anti-CCP) antibody test
- Other tests include white blood-cell count, anemia test, erythrocyte sedimentation rate (ESR), and C-reactive protein

X-rays

- To determine the degree of joint damage

Early Diagnosis Is Important

It is important to get an accurate diagnosis and appropriate treatment as early as possible. Even though symptoms may not appear like RA (for example, fatigue, weakness, low-grade fever, and weight loss), you should discuss all symptoms with your doctor.⁴ Early diagnosis of RA is the first step to managing your disease and symptoms.



Diagnosing and Managing RA

How Is RA Treated?²

Once your doctor has diagnosed your RA, it is very important to start treatment as soon as possible.

The goals of treatment are to:

- Reduce pain
- Decrease or stop further joint damage
- Improve physical function

The details of your treatment plan will depend on the progress of the disease. Your rheumatologist can suggest various treatment options, such as lifestyle changes, medications, and sometimes surgery.

Lifestyle changes that can help in the management of RA include:

- Rest and exercise
- Stress reduction
- Joint care
- Healthy diet

Talk to your doctor before making any lifestyle changes.

Medications that can help decrease pain and/or swelling include:

- Pain relievers
- Nonsteroidal anti-inflammatory drugs (NSAIDs)
- Corticosteroids

Medications that can help reduce inflammation, and may also slow the rate of joint damage include:

- Non-biologic disease-modifying antirheumatic drugs (DMARDs)
- Biologic DMARDs for patients with moderate-to-severe RA
- Other oral agents used in moderate-to-severe RA alone or in combination with methotrexate or similar drugs (DMARDs)

All medications have side effects. It is important to discuss the risks and benefits of your treatment options with your doctor in order to find the proper treatment plan for you.



Seeing a Rheumatologist

What Is a Rheumatologist?

After talking with your family doctor, he or she may refer you to a rheumatologist. Rheumatologists are doctors who can help diagnose and treat patients with diseases of the joints, muscles, and bones. A rheumatologist knows the signs and symptoms of certain autoimmune diseases, and is the most qualified to treat patients with RA.⁵

A Rheumatologist Can Help You:

- Determine if you have RA
- Develop an appropriate treatment plan that can help:
 - Relieve joint pain, stiffness, and swelling
 - Slow or prevent further joint damage

Together, you and your rheumatologist can find a plan to manage your RA.

Why Is Seeing a Rheumatologist Important?

The American College of Rheumatology (ACR) recommends seeing a physician if you have joint pain that is severe or persists for more than a few days. Because rheumatologists have special training in treating diseases of the joints, muscles, and bones, seeing a rheumatologist may help speed diagnosis and help pinpoint an appropriate treatment plan to meet your goals. A rheumatologist may work with your primary-care physician as a consultant or with a team of health care professionals as a manager.⁴



Seeing a Rheumatologist

How Can I Find a Rheumatologist?

You can ask your regular doctor to refer you to a rheumatologist. Or you can go to www.RA.com to find a rheumatologist near you.

How Can I Make the Most of an Office Visit With a Rheumatologist?

At every visit, it's important to be honest and open about how you're feeling and how RA affects your daily life. Here are a few helpful hints.

- **Prepare for your visit.** Write down questions, concerns, and symptoms to discuss.
- **Be open during your visit.** Describe the ways that RA affects your life.
- **Consider bringing a family member or friend with you.** They may help you stay focused and recall important points after the visit.
- **Bring a list of the medications you're taking and their dosages.** Include prescription medications, over-the-counter drugs, and supplements.
- **Participate in decisions.** You and your rheumatologist can come up with a plan that works best for you.
- **Follow up after the visit.** Call the office if you forgot to ask a question during your visit, or if you are not sure about something the rheumatologist said to you.

Plan your visit with your rheumatologist. Ask questions. Take an active role in managing your RA.



Differences in Certain Types of Arthritis

What Are Some of the Differences Between RA and Other Common Types of Arthritis?

Most people are familiar with the term arthritis. But many people may mistake RA for certain other types of arthritis. Even though the symptoms may seem the same, the diseases are quite different. Getting an appropriate treatment plan for RA depends on getting an accurate diagnosis as early as possible. Only a doctor can determine whether you have RA or another type of arthritis.

	Rheumatoid Arthritis ^{2,6,7}	Osteoarthritis ^{6,8,9}	Psoriatic Arthritis ¹⁰	Ankylosing Spondylitis ¹¹⁻¹³
Type of Disease	Autoimmune arthritis	Known as the “wear and tear” type of arthritis and is associated with factors such as aging, injury, or obesity	A type of autoimmune arthritis associated with psoriasis (a disease that causes red, scaly patches on the skin)	A type of autoimmune arthritis that mostly affects the back and hips
Symptoms	Joint pain, swelling, and stiffness; decreased range of motion; fever, fatigue, and loss of energy can also occur	Joint stiffness, pain, and decreased range of motion	Joint pain, swelling, and stiffness, as well as tenderness or pain where tendons or ligaments attach to bones. Red, scaly patches of skin often on the elbows, knees, and scalp	Low back pain and stiffness, as well as tenderness or pain where tendons or ligaments attach to bones
Location of Symptoms	Often causes swelling in pairs of joints—especially smaller ones (both hands, both ankles, etc.)	Usually affects weight-bearing joints (ie, back, hip, knee) as well as the neck, small finger joints, and big toe	Usually affects the ankles, knees, fingers, toes, and lower back	Mostly affects the joints of the spine and also where the spine attaches to the hips
Time of Day	Generally worse in the morning or after long rest and lack of activity	Tends to get worse with activity throughout the day	Tends to be worse in the morning or after a period of rest	Usually worse after a period of rest or after waking in the morning and may also improve with exercise
Age of Onset	Usually occurs between 30 and 60 years of age, though can occur at any age	Most commonly affects middle-aged and older people	Usually occurs between 30 and 55 years of age. Skin symptoms often appear first	Most often begins from the late teens to 35 years
Prevalence	Approximately 1.3 million people have RA in the US	An estimated 27 million people have osteoarthritis in the US	Between 6% and 42% of all people in the US with psoriasis have psoriatic arthritis	An estimated 0.2% of people in the US have ankylosing spondylitis



Resources

American College of Rheumatology (ACR)

www.rheumatology.org

Arthritis Foundation

www.arthritis.org

National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS)

www.niams.nih.gov

National Institutes of Health

www.nih.gov

RA.com

www.RA.com

Make an appointment with your doctor today. Together, you and your doctor can find a plan to manage your RA.

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