

Education

Rheumatoid Arthritis

What is rheumatoid arthritis?

Rheumatoid arthritis (RA) is a disease that causes pain, stiffness, swelling, and loss of motion in the joints. It occurs most commonly in the fingers, wrists, elbows, shoulders, jaw, hips, knees, and toes.

RA often appears first in early adulthood or middle age. However, sometimes it does not occur until the later years. There may be one single attack, but more often the symptoms come and go. The disease cannot be cured, but medicine can reduce the frequency and severity of attacks.

RA affects 1 in every 100 Americans. It is 3 times more common in women than in men.

How does it occur?

RA is an autoimmune disease. This means that the body's defenses against infection attack the body's own tissue. In rheumatoid arthritis, the result is that the lining of a joint becomes inflamed, causing swelling, stiffness, and deformity.

Heredity may make some people more likely than others to have rheumatoid arthritis.

What are the symptoms?

The symptoms may include:

- joint pain and stiffness, particularly morning stiffness
- red, warm, or swollen joints
- joint deformity
- mild fever, tiredness
- loss of appetite
- anemia
- small lumps or nodules under the skin.

In some cases, it may also cause inflammation in other parts of the body.

How is it diagnosed?

Your health care provider will review your medical history and examine you. He or she may order blood tests and x-rays to confirm the diagnosis and measure the extent of the disease.

How is it treated?

The goal of treatment is to keep the joints working properly. This is done by reducing inflammation, relieving the pain and stiffness, and stopping or slowing down joint damage. The severity of your disease, how fast it is progressing, and how it affects your ability to perform daily activities are factors considered by your health care provider to decide what treatments will be most helpful for you.

Many drugs are used for the long-term relief of rheumatoid arthritis. Nonsteroidal anti-inflammatory drugs (NSAIDs) are drugs used to treat pain and inflammation. Aspirin, ibuprofen, and naproxen are NSAIDs that you may buy with or without a prescription. Adults over the age of 65 should not take NSAIDs for more than 5 days without their health care provider's approval. NSAIDs help reduce pain and swelling but can cause kidney and stomach problems.

COX-2 inhibitors such as celecoxib (Celebrex) are prescription NSAIDs. COX-2 drugs may cause fewer stomach problems than other NSAIDs. While they may help arthritis symptoms, COX-2 inhibitors have been linked to a greater risk of heart attacks and stroke. Talk with your health care provider about this.

When NSAIDs do not relieve symptoms, disease-modifying antirheumatic drugs (DMARDs) may be used. One example of a DMARD is methotrexate (Rheumatrex, Trexall). Treatment with DMARDs has to be watched carefully by your provider to avoid side effects. Corticosteroids such as prednisone are very effective in treating rheumatoid arthritis, but may cause side

effects.

If you have arthritis in your knee, hyaluronic acid can be injected into the knee joint to act as a lubricant. It helps the knee to move without pain. Very severe RA may be treated by filtering harmful antibodies out of the blood.

Physical therapy helps restore use of affected joints and muscles. Occupational therapy teaches you how to overcome the disability and manage everyday tasks.

You may wear splints to rest inflamed joints and to prevent them from becoming deformed.

Sometimes severely damaged hips and knees are surgically replaced.

How long will the effects last?

You may have just one attack of RA in your life. More likely, however, you will have repeated flare-ups, and these flare-ups may become progressively worse. The flare-ups will vary in length and may last weeks.

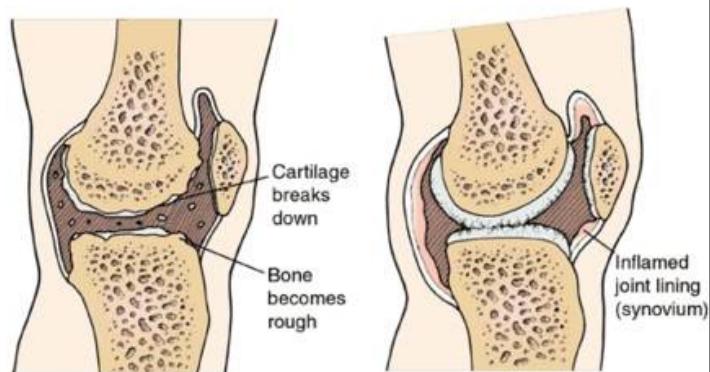
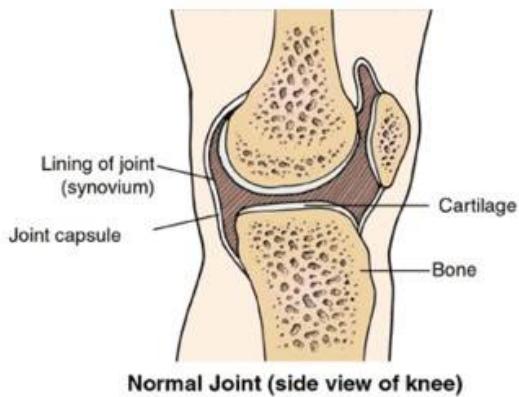
How can I take care of myself?

No one yet knows how to prevent RA. However, you can relieve the symptoms and help prevent the permanent joint deformity that can result from flare-ups by following these guidelines:

- Take the medicine your health care provider recommends for controlling your arthritis.
- Rest your joints when they are warm, swollen, or painful.
- Follow the advice given by your health care provider or a physical therapist on how you can best keep the affected joints mobile.
- Ask an occupational therapist ways you can cope with everyday tasks.
- Try to keep a positive outlook. It will make it easier for you to cope.
- Keep your body healthy by eating a healthy, varied, low-fat diet.
- Follow any other recommendations made by your health care provider for controlling your arthritis.

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Arthritis



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