



BASIC INFORMATION

DESCRIPTION

A long-term illness characterized by joint disease that involves muscles, membrane linings of the joints and cartilage. Sometimes the eyes and blood vessels are affected. It is 3 times more common in women than men. It begins between ages 20 and 60, with a peak incidence between ages 35 and 45.

FREQUENT SIGNS AND SYMPTOMS

Slow or sudden onset of:

- Redness, pain, warmth and tenderness in any or all active joints in the hands, wrists, elbows, shoulders, feet and ankles.
- Morning stiffness.
- Low-grade fever.
- Nodules under the skin (sometimes).

CAUSES

Unknown, but probably an autoimmune disease.

RISK INCREASES WITH

- Family history of rheumatoid arthritis or other autoimmune disorders.
- Genetic factors, such as autoimmune system defects.
- Female age 20-50.
- Native American ethnicity (prevalence is higher in this group).
- Flare-ups may be triggered by emotional stress.

PREVENTIVE MEASURES

No specific preventive measures.

EXPECTED OUTCOMES

- The disease may be mild or severe. It is presently incurable, but pain relief, prevention of disability and an active, normal life span are usually possible with early diagnosis.
- Conservative treatment relieves symptoms in 1 year in 75% of patients. About 5% to 10% of patients are eventually disabled, despite treatment.

POSSIBLE COMPLICATIONS

- Impaired vision.
- Permanent deformity and crippling.
- Drugs used in treatment can induce complications, such as gastric problems, and those associated with long-term steroid use.
- Moderate anemia.



TREATMENT

GENERAL MEASURES

- Laboratory blood studies to detect a rheumatoid factor.
- Splints at night may be helpful to support and protect a joint with active disease.
- Gloves at night to retain heat.
- Relieve pain with heat, including hot soaks, heat lamps, heating pads or whirlpool treatments.

- If you don't have a firm mattress, place 3/4-inch plywood between your bed springs and mattress to support your back.

- Consider moving to a dry climate. Damp weather aggravates symptoms.

- Additional information available from the American Rheumatism Association. Telephone (800) 282-7023; or Arthritis Foundation, 1314 Spring Street N.W., Atlanta, GA 30309. Telephone (800) 283-7800.

MEDICATIONS

- Nonsteroidal anti-inflammatory drugs, including aspirin and other salicylates; gold compounds; immunosuppressive drugs.

- Cortisone drugs usually relieve pain dramatically for short periods, but they are less effective for long-term use. They don't prevent progressive joint destruction, and they sometimes have hazardous side effects. Cortisone injections into joints can temporarily relieve pain.

ACTIVITY

- Stay in bed, except to use the bathroom, until fever and other signs of an active flare-up disappear.

- Remain active, but include daily rest periods. Sleep for 10 to 12 hours each night. Don't become overtired.

- Stand, walk and sit erectly.

- When able, exercise actively to preserve strength and joint mobility. Build up slowly to the amount suggested. Exercising in a heated pool is good for stiff joints.

- Exercise disabled joints passively to help prevent contractures.

DIET

Eat a normal, well-balanced diet. Avoid arthritis diet fads, which are common. Lose weight if you are obese. Obesity stresses the joint.



NOTIFY OUR OFFICE IF

- You or a family member has symptoms of rheumatoid arthritis.

- The following occur during treatment:

- Fever or symptoms appear in previously unaffected joints.

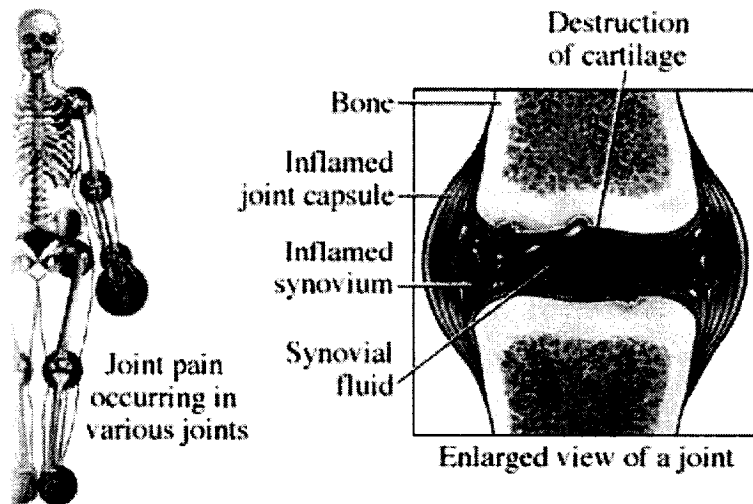
- New, unexplained symptoms develop. Drugs in treatment may produce side effects.

Rheumatoid Arthritis

Rheumatoid arthritis (RA) usually affects the same joint on both sides of the body.

It occurs most frequently in the:

- Fingers
- Wrists
- Elbows
- Shoulders
- Jaw
- Hips
- Knees
- Toes



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Rheumatoid arthritis is likely to be caused by a combination of genetic and environmental factors that trigger an abnormal immune response. Possible causes include:

- Genetic factors — Certain genes that play a role in the immune system are associated with the development of RA.
- Defects in the immune system, that cause ongoing inflammation
- Environmental factors — An infectious agent, such as a virus or bacterium, may increase susceptibility to RA.
- Other factors — Some evidence suggests that hormonal factors may promote the development of RA in combination with genetic factors and environmental exposure.

Risk factors that may increase your chances of getting rheumatoid arthritis include:

- Family members with rheumatoid arthritis
- Sex: female
- Ethnic background: Pima Indians
- Major, persistent depression
- Heavy or long-term smoking