Rheumatoid arthritis

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Date

Rheumatoid arthritis is a chronic disease in which the synovial membrane inflames, causing the joints to lose mobility and swell. Gradually, inflammation destroys the ends of the bone and the cartilage covering the articular surfaces. The structure and functions of the ligaments that give strength to the joint are impaired, and it begins to deform.

Most often the disease affects several joints and usually begins on one of the smaller ones, the hand or foot. As a rule, the disease develops symmetrically. The inflammatory process may involve the eyes, lungs, heart, and blood vessels. The disease usually develops slowly, but clinically manifests itself dramatically.

Rheumatoid arthritis is an autoimmune disease, i.e. the synovial membrane, and in some cases other parts of the body also damage their antibodies.

Risk groups

More often, women over 60 are sick, men 3 times less. The disease can be hereditary. Lifestyle does not matter.

Common symptoms

weakness;

pale skin;

shortness of breath at any tension;

poor appetite.

Common symptoms are partly due to anemia, and it occurs because the amount of bone marrow in which blood cells are formed decreases.

Characteristics

the joints become loose, sore and swollen;

in areas experiencing pressure (for example, on the elbows), characteristic nodules appear.

Since the disease brings pain and mobility at the same time, patients often become depressed . In women with rheumatoid arthritis, the condition may improve during pregnancy, but after the birth of a child, the seizures recur.

As the disease progresses, due to low mobility, the density of bones connecting in the joint decreases, they become fragile and break easily. In severe cases, osteoporosis of the entire skeleton develops.

In addition, bursitis may develop, i.e. inflammation of the articular bag. The swollen tissues of the wrist squeeze the median nerve, which causes numbness, tingling and pain in the fingers. If the walls of the arteries supplying the blood to the fingers become inflamed, Raynaud's syndrome develops, in which, especially in the cold, the fingers begin to ache and turn white. Less spleen and lymph nodes are enlarged. Heart bag - pericardium may be inflamed. In some cases, the whites of the eyes become inflamed.

For rheumatoid arthritis, it is characteristic that seizures lasting from several weeks to several months are replaced by relatively asymptomatic periods. A similar, but with characteristic features, the form of arthritis is observed in children (see juvenile rheumatoid arthritis). (McInnes & Schett, 2011).

Diagnostics

Usually based on the history and results of a general examination of the patient. To confirm the presence of antibodies (so-called rheumatoid factor) and to determine the severity of inflammation, blood tests are performed. The destruction of bones and cartilage assessed by x-rays of the affected joints. (Singh, Saag, Bridges, Akl, Bannuru & Curtis, 2016).

Health care

Rheumatoid arthritis is incurable. The task of the doctor is to take the symptoms of the disease under control and not to allow the disease to progress so that the joints do not collapse further. There are many drugs, the choice of which depends on the severity and stage of the disease, the age of the patient and the general state of his health.

If there are only mild symptoms, nonsteroidal anti-inflammatory drugs will be prescribed. However, at the onset of the illness, the doctor may also prescribe stronger drugs that change its course. They must limit the irreversible destruction of the joints, but they will have to be taken several months before improvement occurs. First, sulfasalazine or chloroquine is prescribed. If symptoms persist, gold compounds, penicillamine, methotrexate, or cyclosporine are prescribed. Use new drugs against tumor necrosis factor. Since all of these drugs are characterized by severe side effects, the patient must be under constant supervision. (Agca, Heslinga, Rollefstad, Heslinga, McInnes, & Primdahl, 2017).

With anemia, which often accompanies rheumatoid arthritis, the hormone erythropoietin is prescribed to improve the condition, which increases the formation of red blood cells. To reduce the strain on a particularly painful joint and prevent deformity, it is likely that it will be recommended to wear splints or corsets. To strengthen the muscles and not lose the mobility of the joints, suitable sparing, but regular exercise. For the same conduct physical therapy and / or occupational therapy. To relieve pain, prescribed hydrotherapy, as well as hot or cold heating pads. For very severe pains, the doctor may give an intra-articular injection of corticosteroids. If the joint is very badly damaged, surgical implantation is performed, replacing it with a prosthesis. (Smolen, Breedveld, Burmester, Dougados, Emery, & Scholte-Voshaar, 2016).

Precautionary measures

Most people with rheumatoid arthritis are able to lead a normal life, but in order to eliminate the symptoms, it is necessary to take medication for life. About 1 in 10 patients develop severe disability due to constant attacks of the disease. In order to monitor the development of the disease and the reaction to treatment, you need to regularly donate blood for analysis. Sometimes the attacks gradually subside, and the disease is exhausted, but in these cases some irreversible changes may remain.

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