

Rheumatoid arthritis

This sheet has been written for people affected by rheumatoid arthritis. It provides general information to help you understand how you may be affected and why early treatment is important. This sheet also covers what you can do to manage rheumatoid arthritis and where to go for further information.

What is rheumatoid arthritis?

Rheumatoid arthritis (RA) is an autoimmune disease that causes pain and swelling of the joints. The normal role of your body's immune system is to fight off infections to keep you healthy. In an autoimmune disease, your immune system starts attacking your own healthy tissues. In RA, the immune system targets the lining of the joints, causing inflammation and joint damage. RA usually affects smaller joints, such as the joints in the hands and feet. However larger joints such as the hips and knees can also be affected.

What are the symptoms?

The symptoms of RA vary from person to person.

The most common symptoms are:

- joint pain, swelling, and tenderness to touch
- stiffness in the joints, especially in the morning
- symmetrical (the same joints on both sides of the body are affected).

What causes it?

It is not known what causes RA. It is more common in people who smoke and/or have a family history of RA.

How is it diagnosed?

Your doctor will diagnose RA from your symptoms, a physical examination and various tests. These can include:

- blood tests for inflammation
- blood tests for antibodies (proteins made by the body's immune system). Testing for anti-cyclic citrullinated peptide (anti-CCP) and rheumatoid factor can help diagnose RA, although not all people with RA will test positive for these antibodies. See the *Blood tests for arthritis* information sheet.

- x-rays to see if your joints are being damaged by the disease. X-ray changes are rare in the early stages of RA.

It can be difficult, and often takes time, to diagnose RA as the symptoms can be similar to other types of arthritis. If your doctor suspects you have RA you should be referred to a rheumatologist, a doctor who specialises in arthritis.

What will happen to me?

With early diagnosis and the right treatment, most people with RA can lead full and active lives. However the course of RA varies and no two cases are exactly the same. Many people with RA experience 'flares', periods when joints become more inflamed and painful. These can happen with no obvious cause. 'Flares' are commonly followed by months or even years when there is little inflammation. RA can cause permanent joint damage and deformity, especially in the first few years of the disease. The good news is that early diagnosis and treatment is shown to limit this type of joint damage.

Is there a cure for RA?

Currently there is no cure for RA. However treatment has improved dramatically over the past 20 years, with new medicines now extremely helpful for people in the early stages of RA. Be wary of any products or therapies that claim to cure RA.

What treatments are there for RA?

Your rheumatologist will tailor your treatment to your symptoms and the severity of your condition. There is no way of predicting exactly which treatment will work best for you. Your doctor may need to trial several different treatments before finding the one that is right for you and may include:

- medicines, such as
 - non-steroidal anti-inflammatory drugs (NSAIDs)
 - corticosteroid medicines or injections
 - disease-modifying anti-rheumatic drugs (DMARDs)
 - biological DMARDs.

For more information see the Australian Rheumatology Association's Patient Medicine Information or the *Medicines and arthritis* information sheet.

- exercise, to keep the joints flexible and muscles strong. See the *Exercise and RA* and *Working with your healthcare team* information sheets.

What can I do?

See a rheumatologist as early as possible. A rheumatologist can diagnose RA and make sure you get the right treatment. If you have RA and have not seen a rheumatologist, ask your doctor about a referral. See the *Working with your healthcare team* information sheet.

Learn about RA and play an active role in your treatment. Not all information you read or hear about is trustworthy so always talk to your doctor or healthcare team about treatments you are thinking about trying.

Reliable sources of further information are also listed in the section below. Self management courses aim to help you develop skills to be actively involved in your healthcare. Contact your local Arthritis Office for details of these courses.

Learn ways to manage pain. See the *Dealing with pain* information sheet

Live a healthy life. Stay physically active, eat a healthy diet, stop smoking and reduce stress to help your overall health and wellbeing. See the *Exercise and RA* and *Healthy eating* information sheets.

Learn how to protect your joints and cope with tiredness. See the *Saving energy* information sheet.

Acknowledge your feelings and seek support. As there is currently no cure for RA and it can affect many parts of your life, it is natural to feel scared, frustrated, sad and sometimes angry. Be aware of these feelings and get help if they start affecting your daily life. See the *Arthritis and emotions* information sheet.

CONTACT YOUR LOCAL ARTHRITIS OFFICE FOR MORE INFORMATION SHEETS ON ARTHRITIS.

Learn about RA and your treatment options.

See a rheumatologist as early as possible.

For more information:

Books: Newman, Eric D & Matzko, Cynthia K 2007, *Rheumatoid arthritis: FAQs*, BC Decker Inc, Hamilton, Ontario.

Are you taking a biological DMARD?

The Australian Rheumatology Association collects information on how well these drugs work and how often they cause problems. The best way to get this information is from you! Sign up to the ARAD project now by Email: ARAD@monash.edu
Ph: Sydney 02 9463 1889 or Melbourne 03 9508 3424
www.ARAD.org.au

Websites: Australian Rheumatology Association - information about medicines and seeing a rheumatologist www.rheumatology.org.au