

Fast Facts: Rheumatoid Arthritis (RA)

Rheumatoid Arthritis (RA) is a long-term autoimmune disease causing inflammation of joints and surrounding tissues. It also affects other organs. RA occurs at any age and women are more prone to development than men. RA usually occurs bilaterally and most frequently affects the wrists, fingers, knees, feet, and ankles. It is a progressive disease with the potential to seriously impair functional abilities. Older adults may present with long standing RA or with initial symptoms. Late onset RA is usually less severe. The onset is subtle and may follow symptoms such as malaise, weight loss, and vague joint pain or stiffness.

Assessment

- Characteristics of pain (e.g. onset, location, effect of positional change).
- Morning stiffness lasting longer than 30 minutes then subsiding during the day.
- Stiffness may recur after periods of daytime inactivity.
- Joint warmth, tenderness, pain.
- Acute onset is less common, but may be caused by stress (e.g. infection, surgery, emotional trauma).

Interventions

- Pharmacologic (*monitor for adverse reactions, side effects, requires regular laboratory monitoring)
 - Acetaminophen
 - NSAIDS
 - Corticosteroids
 - *Disease Modifying Antirheumatic Drugs (DMARDs) (e.g., methotrexate, hydroxychloroquine, sulfasalazine)
 - *Biologic DMAARDs Agents (e.g., Humira, Rituxan, Enbrel)
- Non-pharmacologic
 - Patient and Family Education
 - Regular exercise is one of the MOST effective pain reducer
 - Physical Therapy/Occupational Therapy: ROM, heat/cold, splints, orthotic devices
 - Lifestyle (e.g. stress reduction, healthy diet, assistive devices, adequate rest)
 - Complementary Therapies: meditation, yoga, acupuncture, massage, craniosacral massage
 - Mobile Device Apps for Pain Management

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References

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