



# Health Awareness

## Understanding “The Other Arthritis”



## Recognizing And Treating Rheumatoid Arthritis Early Is Essential

(NAPSA)—When most of us think of arthritis, we think of its most common form, osteoarthritis (OA), in which the body’s joints deteriorate as we get older; but what about that “other arthritis”—rheumatoid arthritis (RA)?

RA is the second most-common form of arthritis, behind OA. RA is a systemic autoimmune disease while OA results from aging as well as wear and tear of joints. RA is a chronic disorder that has no cure and is associated with significant personal, social and economic costs. In RA, the body’s immune system attacks its own healthy tissue, particularly tissue that lines and cushions joints. As a result, this disease causes painful swelling in the joints ultimately leading to significant damage to the joints.

RA is a complicated disease and the progression is variable. Because it can be so destructive to the joints, as well as very painful, it is important to get an early diagnosis. Someone who suspects he or she has symptoms of RA may first talk to his or her primary care physician.

Although a primary care physician may diagnose and treat the disease, it is important to talk to a rheumatologist, a physician who is specially trained to care for people with arthritis. A primary care

physician can provide a referral to a rheumatologist. Physicians who are diagnosing a patient with arthritis-like symptoms will look for many signs of RA, including the following:

- People with RA have joints that are tender, warm, and swollen. This occurs in a “symmetrical” pattern, meaning that if the left knee is affected, the right knee is usually also affected.

- RA often affects the wrist and finger joints closest to the hand, but neck, shoulders, elbows, hips, knees, ankles, and feet also may be affected.

- Other symptoms include pain or stiffness lasting for more than 30 minutes in the morning or after long rest and lack of activity.

- Patients with RA also may experience fatigue, an occasional fever, or a general sense of not feeling well.

If you or a family member is experiencing any of these symptoms, it is important to discuss them with a physician right away.

The long-term outlook for people with RA can be poor. In fact, within the first two years, up to 70 percent of people with RA have X-ray evidence of joint destruction. The average life expectancy of a person with RA may be shortened by three to seven years, and patients with severe RA may die 10 to 15 years earlier than expected.

Fortunately, the past few years have seen remarkable advances in medical therapy for RA, not just in relieving its symptoms but also in slowing the progression of the disease, which means the destructive breakdown of tissue it causes, something that was not possible even just a few years ago. New medications target and block the inflammatory process that is associated with RA.

These new drugs reduce inflammation and slow the progression of bone and joint erosion. In addition, since irreversible damage can occur in the early years of RA, healthcare professionals are increasingly seeking early identification and aggressive treatment of the disease with the appropriate therapies in an effort to actually delay disease progression rather than simply relieve symptoms. When effective treatments for RA are started early, symptoms can be relieved sooner, the worsening joint destruction slowed, and early disability may be avoided.

For this reason, getting an early and correct diagnosis may be your best chance of ensuring your health and happiness in the years to come.

To learn more about RA and new medications available to treat it, visit [www.ra.com](http://www.ra.com) or [www.abbott.com](http://www.abbott.com).