Rheumatoid Arthritis

Rheumatoid arthritis (RA) is a major form of arthritis which causes inflammation in the lining of the joints and joint deformity. In some instances RA may affect not only the joints, but also internal organs of the body (including the lungs, heart, and blood vessels). The cause of RA is unknown, although it is thought to be associated with genetics and with some incident that triggers an abnormal immune response. Unlike osteoarthritis, which is a localized condition, rheumatoid arthritis is a systemic disease that may involve the whole body. Fatigue is a common symptom of the disease. Although anyone can get RA, including children, the disease most often appears in middle age or later; furthermore, there are three times as many women as men with RA.

The severity of RA varies widely, from minor pain and inflammation in the joints to life-threatening complications involving the internal organs. Individuals with RA also experience variations in disease activity over short periods of time; there are times when the disease is “quiet” and times when it flares up. People with RA may also experience extended periods of remission, during which the symptoms of the disease disappear.

Rheumatoid arthritis demands early, expert diagnosis by a physician specialist. Proper management includes anti-rheumatic or anti-inflammatory drugs. Anti-rheumatic drugs influence the course of the disease, while anti-inflammatory drugs are used to control the symptoms of RA. In extreme cases surgery may be required. Physical therapists—often working as part of a multidisciplinary team of health care professionals—play a major role in the treatment of RA, both in post-surgical rehabilitation and as part of a long-term program designed to help manage pain and increase flexibility, strength, and mobility.

Courtesy of the American Physical Therapy Association
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