

# What It's Like Receiving a Rheumatoid Arthritis Diagnosis

by LANA BARHUM

## Your Rheumatoid Arthritis Diagnosis

I was in my early twenties when I started having unexplained on-and-off joint pain that would stick around for a few days and then dissipate. Back in those days, I was in great shape and worked out several days a week so my doctor insisted I was overdoing things and recommend Tylenol or a topical medication for the pain.

At one point, my doctor started to treat my symptoms — mostly pain and fatigue — as psychosomatic rather than real. That started a journey — at least ten years and multiple doctors — to figure out what was wrong with me and dealing with much disbelief along the way.

I didn't know what rheumatoid arthritis (RA) was back then, so I couldn't communicate to my doctors what I was feeling and what I needed, leading to many years being left undiagnosed.

It is not uncommon for RA patients to see several doctors and even get misdiagnosed before they eventually find out they have RA. That lost time can lead to delayed treatment and an increased risk for joint damage, deformity, and disability.

#### What Is Rheumatoid Arthritis?

If your joints seem to be stiff and painful for weeks, especially in the morning, it is a good idea to call your doctor.

Unlike osteoarthritis (OA), which is a wear and tear form of arthritis, RA indicates a problem with your immune system. RA is also a systemic disease, which means it affects your entire body, including your organs.

## Receiving a Rheumatoid Arthritis Diagnosis

In its early stages, a rheumatoid arthritis diagnosis may be difficult to make. This is because of the signs and symptoms — inflammation, pain, and fatigue — may point to other conditions.

If your doctor suspects you may have RA based on your symptoms, you might be referred to a rheumatologist. A rheumatologist is a specialist with training in diagnosing and treating rheumatic diseases, including RA and other forms of inflammatory arthritis.

There is no single test to diagnose RA. Your doctor will make a diagnosis based on symptoms, a physical examination, medical history, family history, lab tests, and imaging.

## Symptoms and Physical Exam

Your doctor will ask you about your medical history as well as recent and current symptoms. RA has a set of early symptoms that lead doctors to consider a rheumatoid arthritis diagnosis.

Early signs of RA are generally subtle but get worse over a period of a few weeks to months. These include fatigue, malaise, joint stiffness especially in the morning and lasting more than one hour, symptoms of joint pain on both sides of the body, swelling in the wrists, hands, and fingers, and rheumatoid nodules (lumps) under the skin.

Your doctor will also look at your joints for soreness, swelling, warmth, and redness. You may be asked about stiffness in joints and any movement struggles with those joints.

Family history is also considered. The risk of developing RA in the general population is only 1%, but if someone in your family has received a rheumatoid arthritis diagnosis, your risk is much higher.

#### **Blood Tests**

There are several blood tests that may help confirm RA. These include lab tests for:

- Anemia. Anemia is a result of low red blood cells resulting in low oxygen to the blood. Most RA patients have anemia but having anemia doesn't mean you have RA.
- Rheumatoid Factor (RF). RF is a specific antibody that some RA patients have. You do not have to have a positive RF to have rheumatoid arthritis.
- Erythrocyte Sedimentation Rate (ESR or sed-rate). An ESR test discloses inflammatory activity in your body.
- C-Reactive Proteins (CRP). CRPs are produced in the liver and higher CRP levels are linked to inflammation.

None of these blood tests are stand-alone diagnostic tools for RA. Your doctor will utilize all of these to make a rheumatoid arthritis diagnosis.

### **Imaging**

X-rays, ultrasounds, and magnetic resonance imaging (MRI) are imaging tools used to look for joint damage.

But just because imaging doesn't show damage, doesn't mean RA is ruled out. It just means that your RA is in an early stage and it is still possible to slow down or even stop joint damage.

#### **ACR Criteria**

Based on the American College of Rheumatology's diagnostic guidelines, a doctor can make a rheumatoid arthritis diagnosis based on several of the following factors:

- Morning stiffness for more than one hour most mornings for a period of six weeks
- Pain or swelling in two or more joints
- Pain or swelling in hand joints
- Pain and swelling in joints on both sides of the body
- Joint pain and swelling for at least six weeks
- Joint pain and swelling that cannot be explained about another condition
- · Family history/genetic risk
- Risk factors, including smoking and co-morbidities
- RF positivity
- Evidence of joint damage in imaging

## Challenges in Reaching a Diagnosis

The early stages of RA can mimic the symptoms of other conditions, including lupus, Lyme disease, and gout.

If you think you have RA and your doctor disagrees, you should speak up. Describe which symptoms make you

think you might have RA and if your doctor doesn't listen, you should seek out a rheumatologist or another doctor who will.

It was not until late 2008 when I awoke to all over body pain and the inability to use my hands that someone took me seriously and listened to my concerns. Once I was diagnosed, I felt a sense of relief at finally knowing what was happening to me.

After seeing a rheumatologist and finding the right treatment plan for my RA symptom, I was able to go back to having a somewhat normal life. I wouldn't have been able to do that if I had not kept searching for a diagnosis.