



Understanding the Many Symptoms of RA, Both Common and Uncommon

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Unusual Symptoms of RA

Rheumatoid arthritis (RA) falls under the umbrella term of arthritis. To understand the basics of RA, one must know that this isn't general wear and tear from old age or sports injuries. And, while there are many common symptoms to look for, there are some unusual symptoms of RA that people experience as well.

Understanding the Basics

While arthritis is a general term for inflammation, rheumatoid arthritis tends to be a chronic ongoing type of autoinflammatory arthritis that is progressive by nature.

The body mistakenly attacks healthy cells in the body, which in this case, are the joints.

The joints in the body that are impacted are different for each person. The severity of the disease can range from mild to moderate, or severe. Regardless, it can affect the same joints on both sides of the body at once or gradually over time. The most common areas such as the hands, wrists, and knees are where first signs may be present. They are also the most problematic areas for patients.

Damage can be irreversible, leading to long-lasting chronic pain, inflammation, unsteadiness, and deformity. Systemic inflammation in rheumatoid arthritis isn't only impacting the joints.

The disease can also affect other tissues throughout the body and cause complications in organs such as the lungs, heart, and eyes.

Early Signs of RA

The first signs of the disease can be vague and conflicting. Since RA symptoms can mimic other forms of arthritis and even other conditions, patients often delay seeking medical attention. Even worse, patients who do seek medical attention are not diagnosed right away or properly.

Signs and symptoms seen in the early stages can include the following: fatigue, fever, night sweats, difficulty sleeping, loss of appetite, weight loss or weight gain, weakness, chest pain when you breathe, or stiffness in the morning and evening in more than one joint.

Sometimes pain, tenderness, and swelling occur in one or two joints, then spread to several. This is known as a flare.

A flare is a heightened state of disease activity when pain and inflammation in multiple joints and muscle groups

lasts several days to months. Flares can be an early sign, because for many patients the disease comes on suddenly and out of nowhere.

Usually, there may be symptoms present like the ones listed above, but a patient may not think anything of it and pass it off as being overworked, stressed, or coming down with the cold or flu.

Common Symptoms

Before my diagnosis, I experienced a lot of those early signs listed above. Some came and went, then didn't appear for weeks or months. However, not everyone will experience every early symptom. The most common symptoms that seem to be the norm for patients are fatigue, tender or warm swollen joints, and stiffness.

The pain that people experience can resemble that of a sprain or broken bone. No matter what symptoms a patient is experiencing there are three pillars all medical doctors follow. They want to control a patient's symptoms, prevent further joint damage, and maintain the patient's quality of life and ability to function.

Once the symptoms lead to a diagnosis, it's much easier for a patient and doctor to work together in creating a treatment plan. Managing the disease in the earliest stages is crucial for the best outcome and to avoid any complications.

Managing and Treating RA

With RA, the first two years of diagnosis is when the most joint damage occurs. It's important to treat the disease during the window of opportunity, according to the Cleveland Clinic.

The standard treatment includes but is not limited to medications, exercise, diet and lifestyle changes, stress reduction, cold and heat therapy, rest, and physical or occupational therapy (sometimes both).

Another form of treating the disease is surgery. This can alleviate pain and address irreversible damage that has caused mobility issues and aesthetic deformities.

Formulating a treatment plan is personal. Patients work with their doctors to find the best solution based on the patient's level of disease activity, blood test markers, personal and family medical history, age, gender, and race.

Pharmaceutical and Non-Pharmacologic Methods

There are pharmaceutical and non-pharmacologic methods that can be used in tandem for the best outcome. People with RA need to lessen stress, as this raises cortisol and thus creates a perfect storm for inflammation. When we are running on stress hormones such as cortisol and adrenaline, the fight or flight response is always activated.

Exercise and meditation are effective strategies to manage the disease on the physical, mental and emotional levels. Beneficial workouts include walking, swimming, range-of-motion, isometric, strength and weight training, and resistance.

Working with a nutritionist or dietitian to address any weight issues and dietary needs can be a good start for anyone diagnosed. Learning to avoid certain trigger foods such as dairy, gluten, citrus, and nightshades, if that applies to the person, can help alleviate any pain and inflammation.

Pharmaceuticals can range from anti-inflammatory drugs such as NSAIDs, aspirin, ibuprofen, and naproxen. Corticosteroids such as prednisone and disease-modifying drugs such as Plaquenil, Azulfidine, methotrexate, and Arava are considered first-line treatment drugs. The next class of drugs is biologics like Anti-TNF agents such as Enbrel and Humira for example.

Other drugs such as Orencia, work to control other inflammatory cytokines that TNF blockers above don't

address. Your doctor will be able to assess through an extensive and thorough examination, blood work and personal history, what the best course of action may be.

Uncommon or Unusual Symptoms of RA

Some uncommon or unusual symptoms of RA don't happen with all patients. However, if they do happen, they shouldn't be ignored. It's best that if you experience any of these to seek medical attention. Weak and brittle bones associated with osteopenia and osteoporosis aren't seen in all patients.

Those with more moderate to severe forms of the disease and who are on corticosteroids can experience the side effects of the drug and inflammation weakening the bones.

Dry eyes can also be connected to a condition called Sjogren's syndrome. Dentists and eye doctors can usually pick this up through a routine exam, but it's important to let your rheumatologist know if you are experiencing a dry mouth or dry eyes. Eyes can also get inflamed, called Uveitis.

Chest pain can occur due to the sternum being inflamed but it can also be a precursor to heart disease, which many of those with rheumatoid arthritis are at risk for. Other uncommon symptoms that are associated with other conditions are numbness and tingling, stomach pain and indigestion, hearing loss and mood changes.

There are a few basics that set this condition apart from the one hundred different forms of arthritis. These early signs, common and uncommon symptoms discussed below, help medical professionals diagnose patients more efficiently and accurately.