



Understanding the Relationship Between Rheumatoid Arthritis and Lupus

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Rheumatoid Arthritis vs. Lupus

Both rheumatoid arthritis vs. lupus are conditions that are medically classified as autoimmune diseases. This is when the body mistakenly attacks one or more parts of the body. They are two of the most common autoimmune disorders. They can vary in severity, yet present similar symptoms. They can also be referred to as chronic illnesses, invisible illnesses and invisible disabilities. But at the same time, signs of the disease may be present in the form of visible disability.

For both rheumatoid arthritis and lupus, there is no cure; various medications and lifestyle changes can only help slow the progression or halt it altogether. When the latter occurs, this is known as clinical remission (when symptoms are mostly absent or gone). During this time, people under the guidance of their medical provider may be able to taper off medications completely. In terms of the cause of these two diseases, it is more centered on a cause-and-effect list of triggers.

The common triggers between both are emotional or physical stress. For instance, pregnancy, giving birth, undergoing surgery or multiple invasive procedures and other types of physical trauma and harm. Other common factors are stress, exhaustion, viral or bacterial infection, traumatic injuries, medications that list one or two of these conditions as a side effect and antibiotic use.

Medications used to treat these two diseases target the symptoms and the inflammatory pathways that can cause damage to parts of the body. One of the biggest complaints from those diagnosed with one or both of these chronic illnesses is joint pain. With joint pain, inflammation and swelling can appear as well. Other similar symptoms between the two include fevers, fatigue, low energy, decreased blood count levels (as seen in anemia) weight loss, gut disturbances and hair loss, to name a few.

These Few Differences Make Each Disease Stand Out

The key difference between these two autoimmune diseases has to do with the inflammatory process of each. In lupus, like rheumatoid arthritis, the immune system is in overdrive. It leads to widespread inflammation in the bloodstream, which is transferred to all the organs throughout the whole body. This may present serious complications in the organs, with the kidneys being most commonly affected.

However, those living with rheumatoid arthritis experience more pronounced and complicated joint pain, inflammation and irreversible joint damage. Lupus tends to impact the organs on a more widespread level than rheumatoid arthritis. Rheumatologists often monitor the organs of those with rheumatoid arthritis, especially the eyes, lungs and heart. These medical specialists treat lupus and keep close watch on the organs that the disease impacts.

Some more telltale signs will be discussed below, which include skin rashes and other sensitivities.

Symptoms, Causes and Treatments

Not all causes or triggers apply to those diagnosed with rheumatoid arthritis or lupus. Everyone is different, and it is important to remember this when starting a treatment plan with a medical provider. The biggest unmet need for these two autoimmune diseases is the availability of effective medications and long-lasting effective treatment. For lupus, there is a lack of existing medical treatments that can help those with a severe form of the disease, making targeted treatment hard to come by.

Rheumatoid arthritis treatments are no exception. Most people with RA do not always respond well to the available medications that are prescribed. While relief from symptoms often does occur, it can take a while for some medications to kick in. Other prescribed medication can quickly work, such as corticosteroids, like prednisone. Despite novel therapies and medical advancements that have helped people get back to living life, more research is needed to uncover why the immune system is not functioning properly in the first place.

Regardless, these medications are not without short-term or long-term side effects. Almost all side effects are monitored closely through routine bloodwork and are ruled out by a medical provider. Communication is also key. Having a good patient-doctor relationship, with an open conversation to be heard and validated, is important.

Is There a Link Between the Conditions?

When a person is diagnosed with two different diseases, the link is typically genetic. It's also called comorbidity. The presented combination in an individual with rheumatoid arthritis and lupus comorbidity is strongly linked to a genetic factor. Now, with both lupus and rheumatoid arthritis, family history is one of the main factors seen in those diagnosed with either or both autoimmune diseases. If one immediate family member has the disease, the likelihood of someone else developing it increases. The same goes for clusters of autoimmune disorders within a family that are all different.

For those with lupus, everyday arthritis-related joint pain is a common symptom. But with rheumatoid arthritis, it is more inflammatory and destructive. So, when looking to see if there is a genetic link in connection to symptoms, this is the first place a medical provider will investigate by doing a thorough medical history and exam. The good news is that when these two diseases appear together, often the same medication can be used to treat both.

Telltale Signs of Rheumatoid Arthritis vs. Lupus

There are a few distinct symptoms that are indicators to medical professionals when diagnosing rheumatoid arthritis and lupus. In rheumatoid arthritis, there needs to be at least one or a few joints that are showing signs of inflammation, pain, or even mild, moderate, severe joint damage. Several tests are done to identify if a person has rheumatoid arthritis. These are typically known as testing positive for rheumatoid factor or a protein antibody in the blood called anticitrullinated protein.

Two other tests completed are C-reactive protein (CRP) and erythrocyte (SED Rate), and these two markers show the levels of inflammation in the body and blood. Overall, with rheumatoid arthritis, symptoms can arise suddenly overnight, or they can gradually come and go throughout weeks, months and years. Usually in most cases, these symptoms last more than several weeks, which is a sign that a person has autoimmune and autoinflammatory arthritis.

Lupus seems to have a longer and more complicated list of telltale signs than rheumatoid arthritis. Rashes are the most common sign, and there are two types. A malar rash appears on the cheeks and nose. Another form of lupus called chronic cutaneous lupus exhibits more of a raised red patch on the skin. Neurological effects are seen in the form of seizures, anxiety, or psychosis. As stated, rheumatoid arthritis can affect the eyes, heart and lungs, but lupus can impact the kidneys, which is ruled out by the urine or a biopsy. There are several antibody tests, and one includes a positive test that shows the body fighting against red blood cells. Since this happens, low platelets, white blood cells and anemia are seen.

If you are having suspected symptoms of rheumatoid arthritis, lupus, or both, it is important to consult with a

medical provider and specialist, like a rheumatologist, immediately. Treatments that are available have helped many people, and your doctor will work closely with you to determine the best course of medical care.