

Understanding
**rheumatoid
arthritis**

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What you need to know about rheumatoid arthritis

Learning how to manage rheumatoid arthritis (RA) might feel like a challenge, especially at first. But understanding your diagnosis can help you take control of your health. Although there is no cure for RA, a number of treatment options can help you manage pain and stay active.

Beginning treatment soon after diagnosis can help prevent long-term damage to your joints and improve your overall health.¹ This booklet provides information about RA, what to expect after diagnosis and how to manage symptoms to live a full and active life.

How RA affects joints

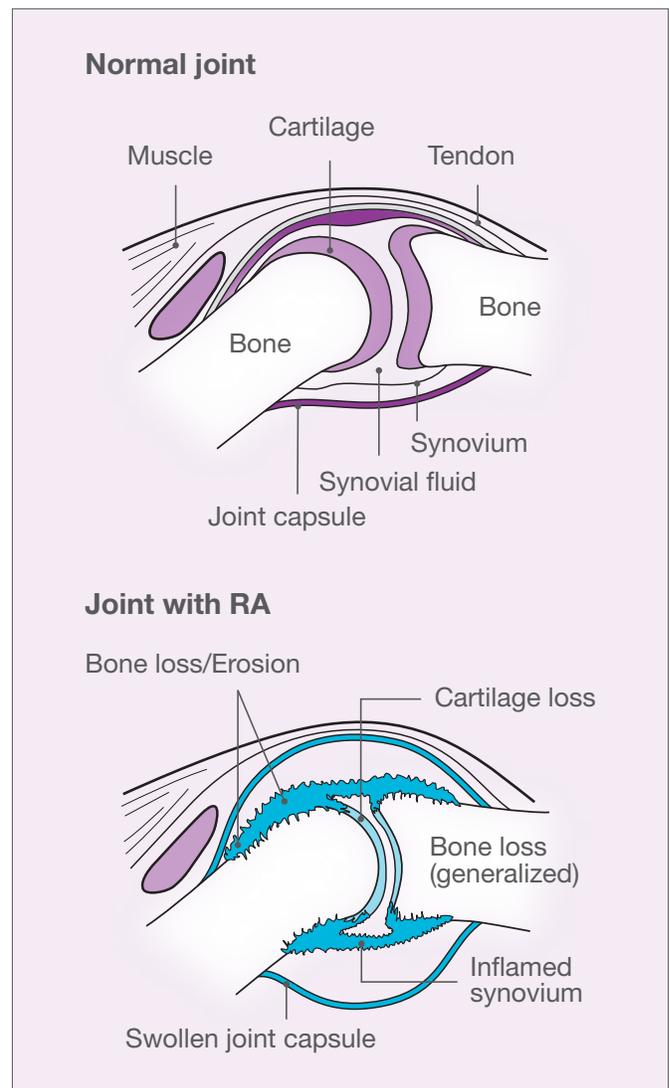
RA is a long-term, or chronic condition. It causes inflammation, or swelling, in the joints. This leads to pain and stiffness that can make it hard to move or complete daily tasks.²

Each joint in the body is where the ends of two bones meet. A flexible coating called cartilage connects the bones. (See Figure at right.) Each joint is surrounded by synovium. This is a type of tissue that helps the bones move smoothly at that joint. In RA, the synovium becomes swollen and thick. This damages the cartilage and bone. It also weakens the nearby muscles and the tendons that connect the muscles to the bone. This makes it hard to move. In some cases, severe swelling can make the joints crooked and deformed.

RA usually affects the small joints in the hands and feet on both sides of the body. But it can affect many joints, including:

- Ankles
- Elbows
- Hips
- Knees
- Neck
- Shoulders
- Wrists

Figure. Comparison of normal joint and joint with RA²



What you need to know about rheumatoid arthritis (cont.)

In some people, RA might cause swelling in other parts of the body, including³:

- Blood vessels—causing arteries to harden, absorb more cholesterol and form plaques
- Eyes—causing dryness, pain, redness, blurred vision or sensitivity to light
- Heart—causing chest pain or higher risk of heart disease
- Lungs—causing difficulty breathing

RA is different from another type of arthritis called osteoarthritis. Osteoarthritis is usually caused by “wear and tear” on the joints. It develops slowly over time, causing stiff joints. It is usually diagnosed later in life.

In contrast, RA is caused by a problem in the immune system. It can develop quickly, leading to problems in the whole body. This can include joint stiffness and swelling, fatigue (feeling tired) and fever. Unlike osteoarthritis, RA usually begins in middle age.

Who is living with RA?⁴

1.5 million Americans

Three times as many women as men

Adults who are most often diagnosed between the **ages of 30 and 60**

Causes

RA is an autoimmune disease. This means it occurs because the immune system is not working properly. Normally, your immune system seeks out

and attacks bacteria or viruses that might make you sick. It also helps your body recover from illness or injury. But in RA, the immune system mistakenly attacks healthy tissue. This can cause pain, swelling and stiffness in the joints.⁵

The exact cause of RA is not clear. But certain things might raise the risk of developing it^{2,6,7}:

- Environment. For some people, something in the environment, like bacteria or viruses, can trigger the disease process.
- Genes. The chance of developing RA is partly genetic, or passed down through a family. But many people can inherit and carry the genes for RA without developing it.
- Hormones. Certain hormones might play a part in who develops RA. Women are more likely than men to have RA. Pregnancy, breastfeeding and use of hormonal birth control can also affect RA and its symptoms.
- Lifestyle. Smoking cigarettes can double the risk of developing RA. Being overweight might also increase the risk, especially in women.

Diagnosis

RA can be hard to diagnose. This is because its symptoms are like those seen in other types of joint disease. Also, many RA symptoms are not obvious right away.

There is no single test to diagnose RA. Your doctor likely used many types of information for your diagnosis^{2,8}:

- Your symptoms, such as joint pain or swelling and morning stiffness
- A physical examination of your joints, skin, reflexes and muscle strength



- X-rays, which can show joint damage in advanced cases of RA
- Blood tests, which might detect antibodies that could indicate RA, such as rheumatoid factor or anti-cyclic citrullinated peptide

Symptoms

RA affects the joints, causing symptoms that can include²:

- Pain and stiffness lasting for more than 30 minutes after waking in the morning or after a long rest
- Redness and warmth
- Swelling

These symptoms can make normal movement difficult or uncomfortable. Symptoms often appear first in the wrists and fingers. Then they move to the elbows, ankles, feet and toes before moving to other joints. RA usually affects joints on both sides of the body at the same time. This means if the right hand is affected, the left hand is affected, too.

RA can affect other parts of the body. Other symptoms can include^{2,3,5}:

- Dry eyes and mouth
- Fatigue or tiredness
- Lumps (called nodules) under the skin and at pressure points like the elbows
- Mild fever
- Numbness or tingling in the arms or legs
- Poor appetite

RA symptoms can come and go. Flares are times when symptoms get worse. Remissions are times when there might be fewer symptoms or none at all. Because of improved treatment options and the ability to begin targeted treatment right after diagnosis, the goal of therapy is low disease activity or remission.^{9,10}

Related conditions

Some people with RA seem to be more likely to have certain conditions, including³:

- Periodontal disease, a chronic bacterial infection of the gums that can cause tooth loss
- Rheumatoid vasculitis, a condition that causes swollen blood vessels that can cause sores or ulcers on the skin and painful inflammation in the heart or lungs
- Sjogren's syndrome, an autoimmune disease that causes dry eyes and mouth

Because RA can change the immune system, some people with RA might also have a higher risk of certain types of cancers, including lymphoma and other blood cancers.¹¹

Living with RA

There is no cure for RA. But there are many ways to manage symptoms and minimize joint damage. Work with your doctor to find the approach that is best for you. You can find guidance from a rheumatologist. This type of doctor specializes in treating arthritis and other bone and joint diseases.

The main goals of RA treatment are²:

- Relieving pain
- Reducing swelling
- Slowing or stopping joint damage
- Improving well-being and ability to function

Medication and lifestyle changes can help most people with RA live full, active lives.²

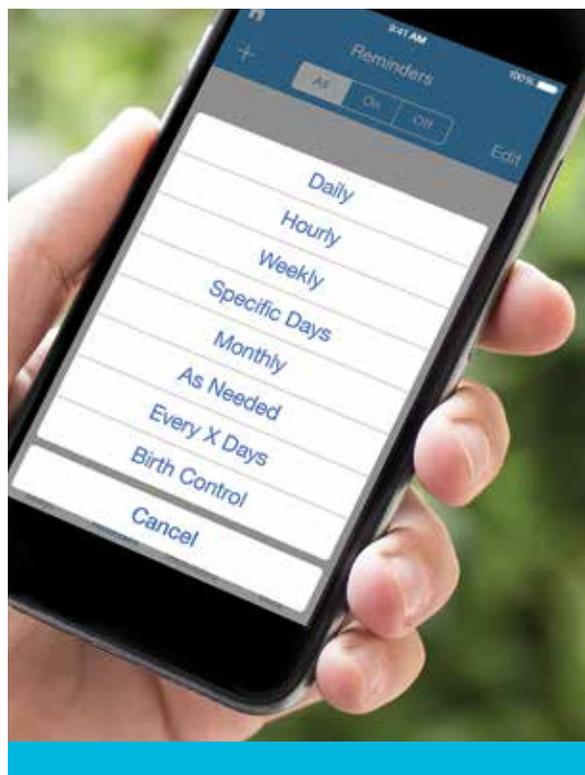
Staying on track with treatment

Medication therapies, along with lifestyle changes, can help keep you moving with less pain.² Not all treatments work for everyone. Talk with your doctor about what works best for you. Your needs might change over time. Your doctor can adjust your treatment as needed.

There are several types of medications prescribed to treat RA¹²:

- Nonsteroidal anti-inflammatory drugs that help relieve pain and joint swelling
- Corticosteroids that help relieve joint swelling
- Disease-modifying antirheumatic drugs that suppress the immune system and slow the disease process
- Biologic response modifiers that target parts of the immune system that cause joint swelling

No matter which medications are part of your treatment, you must take them exactly as prescribed by your doctor—at the right times and the correct doses. Do not stop taking your medications without asking your doctor first. If your treatment routine starts to feel too hard, ask your doctor or pharmacist for help managing your medications. Staying on track with treatment is important for controlling your symptoms and improving your health.



Lifestyle changes

Along with medication therapy, lifestyle changes can help you manage RA symptoms. Staying active, planning for daily tasks, eating well and limiting stress can help you feel better each day.

Physical activity

Regular, gentle exercise can help keep your joints flexible. Staying active can also help the rest of your body stay healthy and help you maintain a healthy weight. This can lessen extra strain on your joints. Exercise can also be a good way to relieve emotional stress that might make symptoms worse.

You might consider gentle activities such as:

- Aerobic activities like walking or swimming
- Strengthening routines, like gentle weight training
- Stretching and range-of-motion exercises, like yoga or tai chi

Consider using a splint, brace or other support item to help stabilize your joints during exercise or even during daily activities.

Talk to your doctor before starting any exercise program. You might also wish to work with a physical therapist or exercise specialist. Together, you can make an exercise plan that is right for you.

Be sure to balance exercise with rest. This is especially important during flares. Ask your doctor how long you should take a break from exercise during flares.



Daily tasks

Joint pain and swelling might make it hard to complete daily tasks at home or work. You can make small changes to help make daily routines safer and easier.

At home:

- Place items you use most often where they are easy to reach, like the front of lower cabinet shelves.
- Replace doorknobs with levers that are easier to push down and open.
- Secure area rugs to the floor with adhesive or fasteners to prevent trip hazards.
- Tie string or strips of cloth to handles of cabinets and drawers to make them easier to open.
- Try to replace heavy appliances, like vacuum cleaners, with lighter models that are easier to handle.

Living with RA (cont.)

At work:

- Arrange your workspace so you can complete tasks with the least amount of physical strain.
- Complete more important tasks when you have the most energy.
- Take breaks from repetitive motion as often as you can.

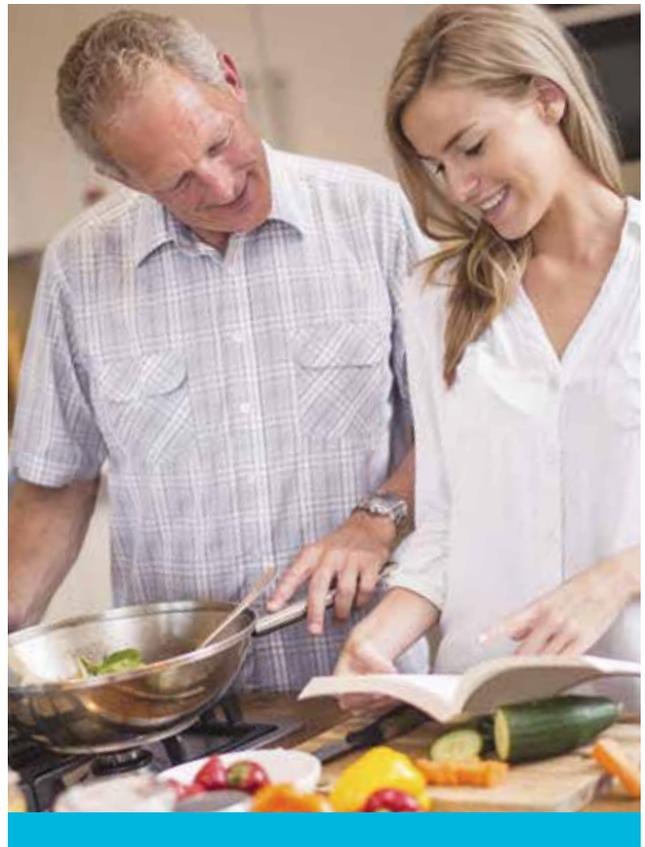
Healthful eating

There is no specific RA diet, but the way you eat might affect your symptoms. For example, being overweight can affect RA¹, and people with RA have a higher risk for heart disease.¹³ Eating to maintain a healthy weight and lower inflammation might help manage these risks.^{1,14}

Experts suggest a healthful, balanced diet that might help reduce swelling. This kind of diet might include^{14,15}:

- Fish and other sources of omega-3 fats, like olive oil
- Fresh fruits and vegetables
- Little or no saturated fat, especially fatty meats and processed foods
- Low amounts of salt and sugar
- Nuts, seeds and beans
- The daily recommended amount of vitamins and minerals
- Whole grains, like oatmeal or brown rice

If you drink alcohol, do so in moderation. Some people taking certain RA medications might need to avoid alcohol completely.²



Avoid foods that seem to increase your pain and swelling. Consider keeping a diary of what you eat and when symptoms get worse. This might help you find ways to change your diet. Ask your doctor for guidance or a referral to a dietitian who can help you build a diet that works for you.

Emotional health

Sometimes, living with RA can be a challenge. Tasks that used to be simple might now be difficult. You might feel angry or frustrated. This is normal. Being aware of your feelings can help you manage your emotional health and improve your physical health.

For example, stress can make it harder to deal with the daily challenges of living with RA. It might also raise the risk of flares.¹⁶ You can take steps to understand and control your stress:

- Find out what causes your stress. Try keeping a journal or diary to help you find possible sources.
- Try to avoid things that cause your stress. Make time for things you enjoy.
- Find positive ways to cope. Share your feelings with friends, family or a support group. Try to relax in a quiet space each day.

Some days, you might feel helpless or overwhelmed. You might find yourself feeling sad or depressed about living with RA. This is normal, too. It's important to know the symptoms of depression and when to get help.

Symptoms of depression can include¹⁷:

- Aches and pains that don't go away with treatment
- Being tired or lacking energy
- Eating too much or too little
- Feeling hopeless or negative

- Feeling restless or irritable
- Feeling sad, empty or anxious most of the time
- Feeling worthless, helpless or guilty
- Having a hard time concentrating or making decisions
- Losing interest or pleasure in things you used to enjoy
- Sleeping too much or too little
- Thinking about death or suicide

If you have thoughts of suicide, call 911 or your local emergency services number. You can also call a doctor, mental health professional, crisis center or hotline for help.



Living with RA (cont.)

Talk with your doctor if you feel depressed. Your doctor might suggest counseling, antidepressant medication or a combination of both. In counseling, you can talk with a therapist about your thoughts and feelings.

Antidepressants help balance brain chemicals that affect your mood. It can take many months before they start to work. You might notice side effects sooner. These might include¹⁸:

- Headache
- Nausea
- Restlessness
- Sexual problems
- Sleep problems

Talk with your doctor if your antidepressant does not help. Do not stop taking the medication on your own. Your doctor might need to adjust your dose or prescribe a different antidepressant.

RA and pregnancy¹⁹

Research suggests that RA symptoms improve during pregnancy. But symptoms usually return and flares can occur after the baby is born. If you are pregnant or plan to be pregnant soon, talk to your doctor about your RA medications. Some are not safe to take while trying to get pregnant or during pregnancy. A new mother who plans to breastfeed should also ask her doctors which RA medications are safe to take when breastfeeding.



Protecting your bones²⁰

People with RA might be more likely to develop weak bones that are easy to break. This is called osteoporosis. Corticosteroid medications for RA, lack of activity and the effects of RA might all contribute to weak bones. Work with your doctor to track your bone health. You can take several steps to help prevent weak bones:

- Ask your doctor about a bone density test. It can measure bone strength and your risk of breaking a bone.
- Do gentle, weight-bearing exercise, like walking, as recommended by your doctor.
- Do not smoke cigarettes, which can lower bone-strengthening hormones and minerals.
- Drink alcohol only in moderation.
- Get enough calcium and vitamin D, which can help bone health.
- Talk to your doctor about medications to prevent and treat osteoporosis.

Managing flares

Flares can happen suddenly. For some people, stress might bring on a flare. In others, infection might be the cause. It is not always clear what triggers flares. But you can use many techniques to manage them and continue your daily activities¹⁶:

- Balance activity with periods of rest.
- Create a backup plan. Talk to your doctor about how to manage flares. Plan how you'll manage tasks at home and work during a flare.
- Get help from others. Talk to family, friends and co-workers about how they can help during a flare.
- Ask your doctor if it's safe for you to use hot or cold packs on swollen joints.
 - Some people find heat helps relieve pain and relax muscles.
 - Others prefer cold to lessen swelling and decrease muscle spasms.
- Use relaxation techniques to keep your mind off symptoms.

Preventive health

Getting a flu or pneumonia vaccine is a good idea for people with RA, depending on what other medications they may be taking. Only vaccines where the virus has been “killed” should be given.^{21,22} Ask your doctor about these and any other recommended vaccines. Your doctor may want to administer live vaccines before you start medication therapy.

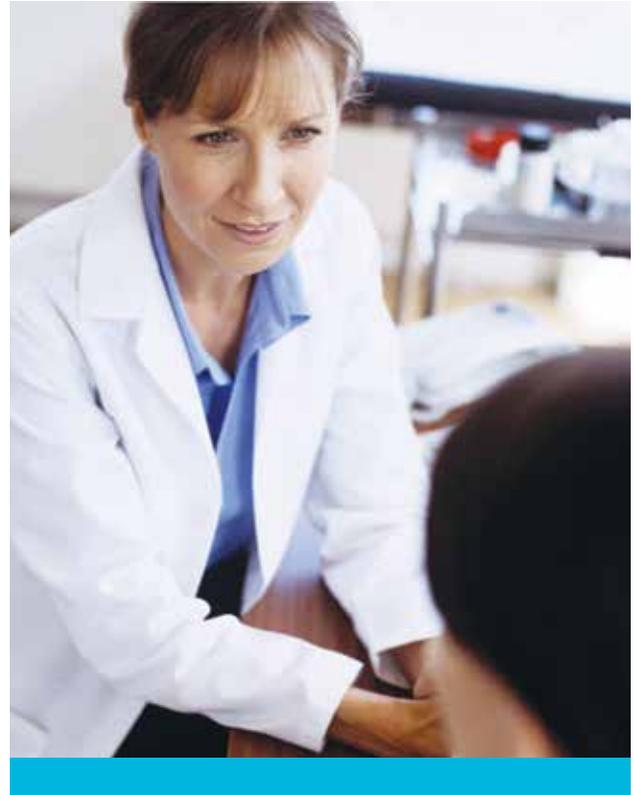
Surgery

Even with medication therapy and lifestyle changes, some people with RA might still need surgery.² This might be more likely if RA has made it extremely painful, difficult or impossible to move certain joints.

Surgery for RA might include several options, such as²³:

- Joint fusion connects the ends of two bones together as one. This can limit movement. But it can also relieve pain and increase stability.
- Synovectomy removes swollen tissue around the joints for temporary pain relief.

Surgery might help a person with RA get through daily tasks with less pain and improved joint movement.² But it is not for everyone. Ask your doctor if surgery is right for you.



Ongoing care

Work with your doctor to keep track of your progress and your symptoms. You can discuss how well your medication therapy and lifestyle changes are working. Your doctor can also monitor side effects and adjust your treatment as needed. Each visit can help you stay on track with treatment and better manage your RA.

We've provided this information because we believe the more you know about RA, the better prepared you will be to manage it. In addition, the AllianceRx Walgreens Prime specialty pharmacy Care Team is here to provide you with dependable, personalized support to help you manage medication side effects and stay on track with your prescribed therapy. We look forward to being a member of your healthcare team and helping you get the best results from your treatment.

References

1. Rheumatoid arthritis. Centers for Disease Control and Prevention Web site. <https://www.cdc.gov/arthritis/basics/rheumatoid-arthritis.html>. Updated March 5, 2019. Accessed February 4, 2020.
2. National Institute of Arthritis and Musculoskeletal and Skin Diseases. *Handout on health: Rheumatoid arthritis*. Bethesda, MD: NIAMS/National Institutes of Health; 2017.
3. Dunkin MA. More than just joints: how rheumatoid arthritis affects the rest of your body. Arthritis Foundation Web site. <http://www.arthritis.org/about-arthritis/types/rheumatoid-arthritis/articles/rheumatoid-arthritis-affects-body.php>. Updated April 2015. Accessed February 4, 2020.
4. What is rheumatoid arthritis? Arthritis Foundation Web site. <http://www.arthritis.org/about-arthritis/types/rheumatoid-arthritis/what-is-rheumatoid-arthritis.php>. Accessed February 4, 2020.
5. Rheumatoid arthritis symptoms. Arthritis Foundation Web site. <https://www.arthritis.org/about-arthritis/types/rheumatoid-arthritis/symptoms.php>. Accessed February 4, 2020.
6. Smoking and tobacco: health effects. Centers for Disease Control and Prevention Web site. https://www.cdc.gov/tobacco/basic_information/health_effects/index.htm. Updated February 8, 2018. Accessed February 4, 2020.
7. Crowson CS, Matteson EL, Davis JM 3rd, Gabriel SE. Contribution of obesity to the rise in incidence of rheumatoid arthritis. *Arthritis Care Res (Hoboken)*. 2013;65(1):71-77. doi: 10.1002/acr.21660.
8. Rheumatoid arthritis blood tests. AboutRheumatoidArthritis Web site. <https://www.rheumatoidarthritis.org/ra/diagnosis/blood-tests/>. Updated October 27, 2018. Accessed February 4, 2020.
9. Gower T. Combating high disease activity in early RA. Arthritis Foundation Web site. <http://www.arthritis.org/living-with-arthritis/life-stages/remission/rheumatoid-arthritis-remission.php>. Accessed February 4, 2020.
10. 2015 American College of Rheumatology Guideline for the Treatment of Rheumatoid Arthritis. American College of Rheumatology Web site. <https://www.rheumatology.org/Portals/0/Files/ACR%202015%20RA%20Guideline.pdf>. Published 2015. Accessed February 4, 2020.
11. Bernatsky S, Ramsey-Goldman R, Clarke A. Malignancy risk in autoimmune rheumatic diseases. *Discov Med*. 2005;5(30):534-537. <http://www.discoverymedicine.com/Sasha-Bernatsky/2009/07/26/malignancy-risk-in-autoimmune-rheumatic-diseases/>. Accessed February 4, 2020.
12. Rheumatoid arthritis treatment. Arthritis Foundation Web site. <http://www.arthritis.org/about-arthritis/types/rheumatoid-arthritis/treatment.php>. Accessed February 4, 2020.
13. Crowson CS, Liao KP, Davis JM 3rd, et al. Rheumatoid arthritis and cardiovascular disease. *Am Heart J*. 2013;166(4):622-628.
14. Kennedy K. Nutrition guidelines for people with rheumatoid arthritis. Arthritis Foundation Web site. <http://www.arthritis.org/living-with-arthritis/arthritis-diet/anti-inflammatory/rheumatoid-arthritis-diet.php>. Accessed February 4, 2020.
15. Anti-inflammatory diet. Arthritis Foundation Web site. <http://www.arthritis.org/living-with-arthritis/arthritis-diet/anti-inflammatory/anti-inflammatory-diet.php>. Accessed February 4, 2020.
16. Andwele M. Coping with an arthritis flare. Arthritis Foundation Web site. <https://www.arthritis.org/living-with-arthritis/pain-management/flares/rheumatoid-arthritis-flare.php>. Accessed February 4, 2020.
17. Depression: Signs and symptoms. National Institute of Mental Health Web site. https://www.nimh.nih.gov/health/topics/depression/index.shtml#part_145397. Updated February 2018. Accessed February 4, 2020.
18. Antidepressants. MedLine Plus Web site. <https://medlineplus.gov/antidepressants.html>. Updated February 3, 2020. Accessed February 4, 2020.
19. Hazes JMW, Coulie PG, Geenen V, et al. Rheumatoid arthritis and pregnancy: evolution of disease activity and pathophysiological considerations for drug use. *Rheumatol (Oxford)*. 2011;50(11):1955-1968. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3198908/>. Accessed February 4, 2020.
20. What people with rheumatoid arthritis need to know about osteoporosis. NIH Osteoporosis and Related Bone Diseases National Resource Center Web site. http://www.niams.nih.gov/health_info/bone/Osteoporosis/Conditions_Behaviors/osteoporosis_ra.asp. Published January 2012. Updated November 2018. Accessed February 4, 2020.
21. Fomin I, Caspi D, Levy V, et al. Vaccination against influenza in rheumatoid arthritis: the effect of disease modifying drugs, including TNF alpha blockers. *Ann Rheum Dis*. 2006;65(2):191-194.
22. Elkayam O, Paran D, Caspi D, et al. Immunogenicity and safety of pneumococcal vaccination in patients with rheumatoid arthritis or systemic lupus erythematosus. *Clin Infect Dis*. 2002;34(2):147-153.
23. Rath L. Understanding your joint procedure options. Arthritis Foundation Web site. <http://www.arthritis.org/living-with-arthritis/treatments/joint-surgery/types/joint-surgery-procedure-options.php>. Accessed February 4, 2020.

Resources

You might find it helpful to contact these organizations for additional support and resources.*

American College of Rheumatology (ACR)

www.rheumatology.org

404-633-3777

www.facebook.com/Rheumatology

@ACRrheum

The ACR is an international clinical group that supports ongoing education, research and advocacy about rheumatic diseases, including RA. Its website features links to the latest rheumatology research and publications as well as a searchable directory of rheumatologists.

Arthritis Foundation

www.arthritis.org

844-571-HELP (4357)

www.facebook.com/Arthritis.org

@ArthritisFdn

The Arthritis Foundation is the nation's largest nonprofit group that supports advocacy, programs, services and research for arthritis and related conditions. The group's website features educational resources and tools for patients with RA and other forms of arthritis.

National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS)

www.niams.nih.gov

877-22-NIAMS (64267)

www.facebook.com/NIH.NIAMS

@NIH_NIAMS

Part of the National Institutes of Health, the NIAMS supports research on arthritis and other musculoskeletal and skin diseases. Its website features health information for patients in a number of languages as well as links to the latest research news and a database of current clinical trials.

Rheumatoid Patient Foundation (RPF)

www.rheum4us.org

www.facebook.com/rheumatoidpatientfoundation

@RheumPF

The RPF is a nonprofit organization dedicated to improving the lives of people with rheumatoid disease. The group's website provides educational resources for patients and clinicians, advocacy materials and a blog featuring stories of people living with RA.

CreakyJoints

www.creakyjoints.org

845-348-0400

www.facebook.com/creakyjoints

@CreakyJoints

Part of the nonprofit Global Healthy Living Foundation, CreakyJoints is an online resource for patients and families living with all forms of arthritis, including RA. The CreakyJoints site features links to health education, social and emotional support and updates on arthritis advocacy and research.

*The referenced organizations are provided for informational purposes only. They are not affiliated with, and have not provided funding to AllianceRx Walgreens Prime for this booklet. AllianceRx Walgreens Prime does not endorse or recommend any specific organization.

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