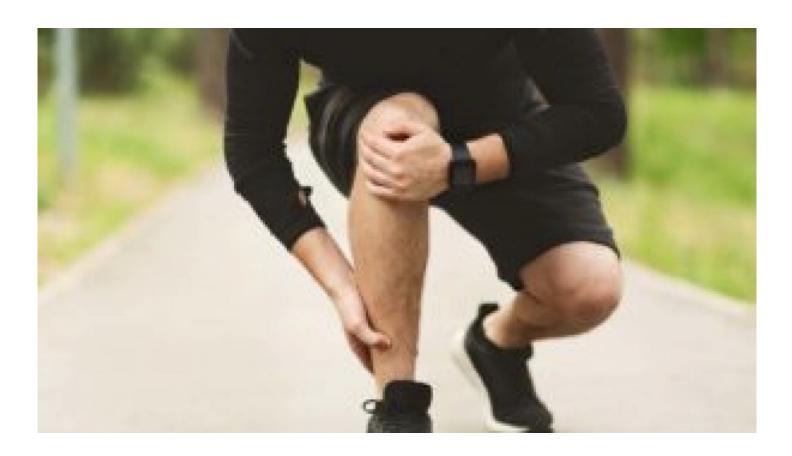
Dr. Milton Baker | Best Rheumatologist in Victoria



Victoria, Dec 29, 2019 (Issuewire.com) - About one-and-a-half million Americans in the neighboring US are estimated to suffer from Rheumatoid Arthritis, or RA, in short. The chronic inflammatory condition usually affects the peripheral joints in the human body, such as the wrists, hands, knees, elbows, ankles, and feet. It can also affect the vital organs, such as the lungs, heart, skin, and eyes. While the debilitating disease has historically posed enough challenge to the medical community across the globe, years of painstaking research by the rheumatologists (rheumatoid arthritis doctors) in Victoria, British Columbia, Canada, and other technically advanced nations has made its treatment increasingly less complicated.

TYPES OF RHEUMATOID ARTHRITIS

Even a few years back, a diagnosis of the disease was just that – a rheumatoid arthritis diagnosis and your treatment happened to be almost identical as any other patient who received high doses of aspirin succeeded by a corticosteroid drug and/or disease-modifying medication, such as sulfasalazine or gold.

Just as the treatment of rheumatoid arthritis has evolved over the years, so has the understanding of the disease in some cases. Instead of perceiving it as a single disease that requires a standard therapy, some of the researchers are now proposing that RA may really be a spectrum of diseases. The genetic markup in a person could affect the different characteristics of rheumatoid arthritis, the factors that are to have an impact on its manifestation and the very best treatments. Improved and in-depth knowledge about the differences between the various forms of rheumatoid arthritis may offer insights that could guide us to new medical procedures for better treating the disease, and perhaps in a number of cases, even be able to prevent it.

SEROPOSITIVE RA

If your blood sample tests positive for anti-CCP, an antibody called the anti-Cyclic Citrullinated Peptide, or for the RF, a protein known as the Rheumatoid Factor, it suggests that an immune response may be actively produced by your body to your healthy tissues. If your siblings or parents test positive for rheumatoid arthritis, the odds of developing the disease is four times more for you. The John Hopkins Medicine states that nearly every four out of five individuals with rheumatoid arthritis are diagnosed RF-positive. While having any of the said proteins does not necessarily indicate that you have the disease, but if you do carry the antibody or the RF, it can help the medical professionals identify the type.

SERONEGATIVE RA

Individuals who are to test negative for anti-CCP and RF can still have rheumatoid arthritis and hence, the diagnosis is not made on the basis of these tests only. Your consultant rheumatologist is to take into consideration other laboratory examinations, X-rays, and clinical symptoms as well. Such people have a propensity to experience a less severe form of the disease than the positiveness persons.

Juvenile RA or Juvenile Idiopathic Arthritis

It is most frequently diagnosed among children who are sixteen years old or younger. Symptoms may last a lifetime or can be temporary. Similar to adult RA, its symptoms include pain, inflammation of the joint, and stiffness. The disease can interfere with the natural development process and body growth of a child and may also cause inflammation in the eye in severe cases.

Note that an elaborate discussion on the juvenile RA/IA, including its symptoms, diagnosis, and treatment is beyond the scope of this article. The same will be covered in our forthcoming blogs.

Most frequently reported symptoms in adults

- Joint pain
- Stiffness, especially after getting out of the bed in the morning
- Inflammation of the joints
- Experiencing warmness and restricted range of motion

For most individuals, the symptoms typically surface around their fifties. However, it can often occur later or earlier in life. While the precise causal factors that trigger the onset of rheumatoid arthritis are yet to be discovered, researchers have successfully identified specific genes associated with the progression of the particular illness, as well as a few environmental risk determinants, such as poor dental hygiene and smoking.

DIAGNOSIS

The diagnosis of rheumatoid arthritis starts with a comprehensive review of the medical history of the affected individual and critical analysis of the symptoms reported along with an elaborate physical examination performed by a rheumatologist and specialized laboratory workup.

The clinical evaluation procedure includes the following.

- Blood and urine examination
- Physical tests

- X-rays of the patient's affected joints
- MRI or ultrasound of one's affected joints

TREATMENT

Individuals diagnosed with rheumatoid arthritis now have a great opportunity at managing their symptoms and arresting the progress of the disease, thus, living reasonably normal lives with the help of present-day treatment choices, particularly if an early diagnosis is performed and the patient is treated promptly, or before the joints have suffered heavy damage.

Corticosteroids happened to be the only medication that was largely effective and exclusively used for several years to treat rheumatoid arthritis. Though it is still being prescribed for offering fast relief to people with critical flare-ups, patients can access a wide array of alternatives these days, including the following.

- Oral tablets
- Injectable medication that can be self-administered by the patients at the comfort of their homes
- Intravenous infusions that are to be administered by a medical professional only

While the previous generations of drugs did address the pain and other associated symptoms, they remained grossly inadequate for arresting the swelling, which is the leading source of this characteristic, extreme discomfort, and the cause of further irreversible disability and degeneration. However, a whole gamut of new-age medication is purpose-designed to precisely target the area of inflammation and significantly restore many of the routine activities of a patient in most cases, allowing them to return to mainstream life in an impressively short span of time.

THE BOTTOM LINE

The treatment of rheumatoid arthritis has significantly improved in the recent past with the newfound opportunity for not only preventing further damage but reviving the original functionality of the affected joints in most instances. Anyone experiencing any or more of the aforementioned symptoms should seek expert medical advice at their earliest convenience.

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