Palindromic Rheumatism

Palindromic Rheumatism is a mysterious condition of episodes of pain, swelling, warmth, and stiffness of joints. The attacks are usually irregular and unpredictable. The word *palindromic* means it comes and goes. This usually involves 2 or 3 large joints. It may involve the fingers. It can last for hours, days, or weeks. Between attacks, there may be symptom-free periods. These may last for weeks to months. Between attacks, the joints usually improve. There are no X-ray or physical findings of damage.

In almost half of those affected, the attacks may become more frequent. They may develop into Rheumatoid arthritis. It may take years for the test for rheumatoid factor to become positive. The complete change from palindromic rheumatism to rheumatoid arthritis is unknown.

SYMPTOMS

- Pain, swelling, stiffness, and inflammation of large joints.
- Swelling of the heel pads and the finger pads.
- Nodules may be found in the tissues beneath the skin.
- Fever may be present.

DIAGNOSIS

- Your caregiver may suspect what is wrong based on your history and while doing a physical exam when an attack of joint pain is going on.
- Blood tests may show an increase in the ESR (erythrocyte sedimentation rate) and CRP (c-reactive protein). These are nonspecific tests that show that some inflammation may be going on the body. Blood tests may be otherwise normal.
- Rheumatoid factor may be present. This is more true in the group that will go on to develop Rheumatoid arthritis.

TREATMENT

- The therapy is difficult. This is because the episodes are temporary and anti-inflammatory medications may not be very helpful. Some treatments that help after the start of an attack may include:
  - Nonsteroidal anti-inflammatory drugs (NSAID's) relieve pain and fight inflammation. NSAID's range from over the counter aspirin, ibuprofen, and naproxen sodium. These medications are also available at higher dosages by prescription. There are other NSAID's available only by prescription.
  - Injections into the joint with corticosteroids. Corticosteroids are potent anti-inflammatory hormones that are produced naturally in the body. The injections are man made forms of this hormone.
  - Oral prednisone. This is another form of corticosteroid.
- Some second line agents to reduce attacks include:
  - Intramuscular gold.
  - Anti-inflammatory medication.
- Disease changing anti-rheumatic medications may be helpful.

PROGNOSIS

Many people do not go on to develop rheumatoid arthritis. In general, these people do not develop bone and cartilage destruction even after long periods of time. The long-term outcome in these people is good.

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