Polymyositis

Polymyositis is an inflammatory muscle disease that causes varying degrees of decreased muscle power. The disease has a gradual onset and generally begins in the second decade of life, and rarely affects persons under the age of 18. The disease may be associated with other collagen vascular, autoimmune or infectious disorders.

SYMPTOMS

- The most common symptom is muscle weakness. This usually affects muscles that are closest to the trunk of the body (*proximal*).
- Eventually, patients have difficulty:
  - Rising from a sitting position.
  - Climbing stairs.
  - Lifting objects.
  - Reaching overhead.
- In some cases, distal muscles may also be affected later in the course of the disease. These muscles are not close to the trunk of the body.
- Trouble with swallowing (dysphagia) may happen.
- Rarely, the muscles ache and are tender to touch.

TREATMENT

Treatment generally consists of a steroid drug called prednisone. For patients in whom prednisone is not effective, immunosuppressants such as azathioprine and methotrexate may be prescribed. Intravenous immunoglobulin has also help difficult cases. Physical therapy is usually recommended to avoid muscle atrophy.

The prognosis varies. Response to therapy varies from good to satisfactory as some patients have a more severe disease that does not respond adequately to therapies, and they are left with significant disability. Death is rare but may occur in patients with:

- Severe, progressive muscle weakness.
- Dysphagia.
- Malnutrition.
- Pneumonia.
- Respiratory failure.

RESEARCH BEING DONE

The NINDS conducts and supports a broad range of research on neuromuscular disorders. This includes studies on polymyositis. The goals of these studies are:

- To conduct therapeutic trials to increase the understanding of the disorders.
- To find ways to prevent and cure them.

Research is continually being done to learn more about this problem.

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