Temporal Arteritis
(Giant Cell Arteritis)

Arteries are blood vessels that carry blood from the heart to all parts of the body. Temporal arteritis is a swelling (*inflammation*) of certain large arteries. This usually affects arteries in the head and neck area, including arteries in the area on the side of the head, between the ears and eyes (*temples*). The condition can be very painful. It also can cause serious problems, even blindness. Early diagnosis and treatment is very important.

CAUSES

Temporal arteritis results from the body reacting to injury or infection (*inflammation*). This may occur when the body's immune system (which fights germs and disease) makes a mistake. It attacks its own arteries. No one knows why this happens. However, certain things (*risk factors*) make it more likely that a person will develop temporal arteritis. They include:

- Age. Most people with temporal arteritis are older than 50. The average age is 70.
- Sex. Three times more women than men develop the condition.
- Race and ethnic background. Caucasians are more likely to have temporal arteritis than other races. So are people whose families came from Scandinavia (Denmark, Sweden, Finland, Norway or Iceland).
- Having polymyalgia rheumatica (PMR). This condition causes stiffness and pain in the joints of the neck, shoulders and hips. About 15% of people with PMR also have temporal arteritis.

SYMPTOMS

Not everyone with temporal arteritis has the same symptoms. Some people have just one symptom. Others may have several. The most common symptom is a new headache, often in the temple region. Symptoms may show up in other parts of the body too.

- Symptoms affecting the head may include:
  - Temporal arteries that feel hard or swollen. It may hurt when the temples are touched.
  - Pain when combing your hair, or when laying your head on a pillow.
  - Pain in the jaw when chewing.
  - Pain in the throat or tongue.
  - Visual problems, including sudden loss of vision in one eye, or seeing double.
- Symptoms in other parts of the body may include:
  - Fever.
  - Fatigue.
  - A dry cough.
  - Pain in the hips and shoulders.
  - Pain in the arms during exercise.
  - Depression.
  - Weight loss.

DIAGNOSIS

Symptoms of temporal arteritis are similar to symptoms for other conditions. This can make it hard to tell if you have the condition. To be sure, your caregiver will ask about your symptoms and do a physical exam. Certain tests may be necessary, such as:

- An exam of your temples. Often, the temporal arteries will be swollen and hard. This can be felt.
- A complete blood count. This test shows how many red blood cells are in your blood. Most people with temporal arteritis do not have enough red blood cells (*anemic*).
- Erythrocyte sedimentation (also called sed rate test). It measures inflammation in the body. Almost everyone with temporal arteritis has a high sed rate.
- C reactive protein test. This also shows if there is inflammation.

- Biopsy a temporal artery. This means the caregiver will take out a small piece of an artery. Then, it is checked under a microscope for inflammation. More than one biopsy may be needed. That is because inflammation can be in one part of an artery and not in others. Your caregiver may need to check more than one spot.

TREATMENT

Starting treatment right away is very important. Often, you will need to see a specialist in immunologic diseases (*rheumatologist*). Goals of treatment include protecting your eyesight. Once vision is gone, it might not come back. The normal treatment is medication. It usually works well and quickly. Most people start getting better in a few days. Medication options include:

- Corticosteroids. These are powerful drugs that fight inflammation. These drugs are most often used to treat temporal arteritis.
  - Usually, a high dose is taken at first. After symptoms improve, a smaller dose is used. The goal is to take the smallest dose possible and still control your symptoms. That is because using corticosteroids for a long time can cause problems. They can make muscles and bones weak. They can cause blood pressure to go up, and cause diabetes. Also, people often gain weight when they take corticosteroids. Corticosteroids may need to be taken for one or two years.
- Several newer drugs are being tested to treat temporal arteritis. Researchers are testing to see if new drugs will work as well as corticosteroids, but cause fewer problems than them. Testing of these drugs is not yet complete.
- Some specialists recommend low dose aspirin to prevent blood clots.

HOME CARE INSTRUCTIONS

- Take any corticosteroids that your caregiver prescribes. Follow the directions carefully.
- Take any vitamins or supplements that your caregiver suggests. This may include vitamin D and calcium. They help keep your bones from becoming weak.
- Keep all appointments for checkups. Your caregiver will watch for any problems from the medication. Checkups may include:
  - Periodic blood tests.
  - Bone density testing. This checks how strong or weak your bones are.
  - Blood pressure checks. If your blood pressure rises, you may need to take a drug to control it while you are taking corticosteroids.
  - Blood sugar checks. This is to be sure you are not developing diabetes. If you have diabetes, corticosteroid medications may make it worse and require increased treatment.
- Exercise. First, talk with your caregiver about what would be OK for you to do. Aerobic exercise (which increases your heart rate) is usually suggested. It does not have to require a lot of energy. Walking is aerobic exercise. This type of exercise is good because it helps prevent bone loss. It also helps control your blood pressure.
- Follow a healthy diet. The goal is to prevent bone damage and diabetes. Include good sources of protein in your diet. Also, include fruits, vegetables and whole grains. Your caregiver can refer you to an expert on healthy eating (*dietitian*) for more advice.

SEEK MEDICAL CARE IF:

- The symptoms that lead to your diagnosis return.
- You develop worsening fever, fatigue, headache, weight loss, or pain in your jaw.
- You develop signs of infection. Infections can be worse if you are on corticosteroid medication.

SEEK IMMEDIATE MEDICAL CARE IF:

- Your eyesight changes.
- Pain does not go away, even after taking pain medicine.
- You feel pain in your chest.

- Breathing is difficult.
- One side of your face or body suddenly becomes weak or numb.
- You develop a fever of more than 102.0º F (38.9º C).

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