

RHEUMATOID ARTHRITIS A STUDY ON TREATMENT OUTCOME

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Abstract

Rheumatoid Arthritis is an auto immune disease with considerable prevalence in our society. Early aggressive treatment of rheumatoid arthritis can limit joint damage which in turn limits loss of movement, decreased ability to work, higher medical costs.

OBJECTIVES

1. To study the clinical features and related history of confirmed cases of Rheumatoid Arthritis attending Rheumatology Clinic at MCH in October and November.
2. To study the association of the clinical features to the outcome of treatment.

METHODOLOGY:

72 patients with Rheumatoid Arthritis whose disease duration was not less than 1 month were studied retrospectively by interviewing. Remission (defined as below) was used as the outcome measure. Clinical features at the onset of the disease, like joint swelling, morning stiffness, involvement of Metatarso phalangeal joints, ESR value, etc. were recorded.

Remission was defined by four criteria: morning stiffness absent or not exceeding 15 minutes, number of joints with tenderness not exceeding 4, no joint or tendon sheath swelling, and erythrocyte sedimentation rate not exceeding 30; presence of three or more of these criteria in an individual patient was taken as a case with remission.

RESULTS

4 patients (75%) fulfilled the remission criteria at the end of 6 weeks study.. on univariate analysis by Pearson's chi-squared test and Odd's ratio absence of remission was studied in association with clinical features at onset of RA and the relevant history given by the subject. No significant relativity was found with age, occupation, family history, time lag in treatment, morning stiffness and ESR value. Logistic regression analysis showed that.

CONCLUSION

Baseline prognostic factors for remission in early rheumatoid arthritis were mainly clinical markers of disease activity and sex of the individual.