



يَا أَيُّهَا الَّذِينَ آمَنُوا إِذَا نُودِيَ لِلصَّلَاةِ مِن يَوْمِ الْجُمْعَةِ فَاسْعَوْا إِلَىٰ ذِكْرِ اللَّهِ وَذَرُوا الْبَيْعَ ۚ ذُلِكُمْ خَيْرً لَّكُمْ إِن كُنتُمْ تَعْلَمُونَ

> O you who believe! when the call is made for prayer on Friday, then hasten to the remembrance of Allah and leave off trading; that is better for you, if you know

> > Quran 62:9



Motto



Vision

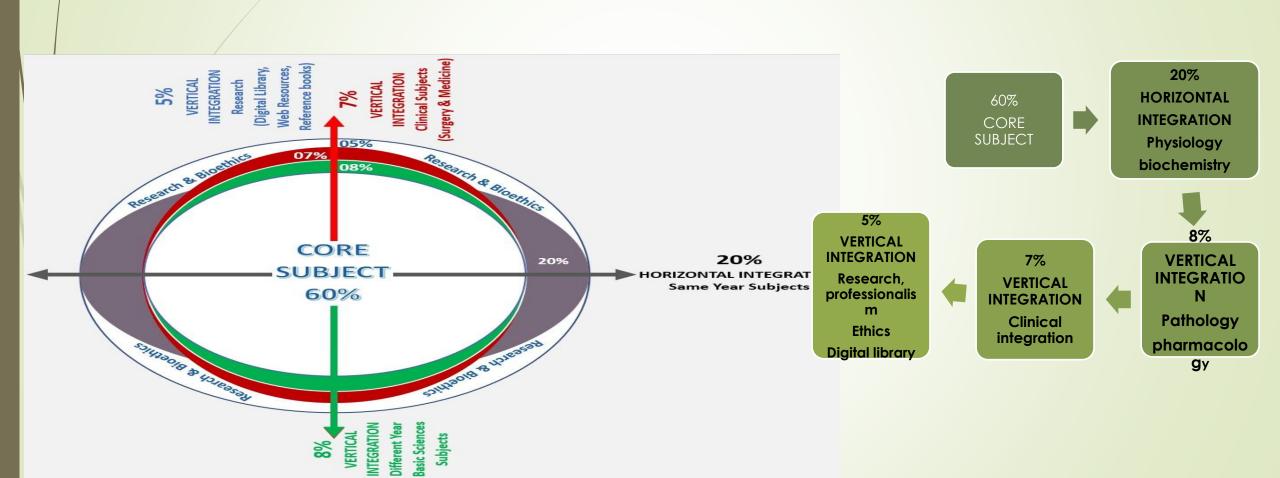
 To impart evidence based research oriented medical education

To provide best possible patient care

To inculcate the values of mutual respect and ethical practice of medicine

Professor Umar Model of Integrated Lecture







RHEUMATOLOGY LECTURE: 1



"Overview of Rheumatological Disorders"

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Learning Objectives

At the end of this session students will be able to learn:

- How to diagnose rheumatological disorders on the basis of history and examination
- Rheumatological Investigations
- Guidelines and recent advances



Rheumatological Diseases



- Joint Diseases (Arthritis)
- Soft tissue Rheumatism

Systemic Diseases (Auto-immune/Vasculitis)

Bone Disorders



Core Concept



■ Is it Arthralgia or Arthritis?



- Pain
- Swelling
- **■** Stiffness



■ Is it Monoarthritis/Oligoarthritis/Polyarthritis?



■ Is it Mechanical or Inflammatory pain?



- Look (swelling, redness, deformity)
- Feel (painful, fluid)
- Move (restricted range of motion)



The Clinical Spectrum of RA



Early PIP swelling



Active with some deformity



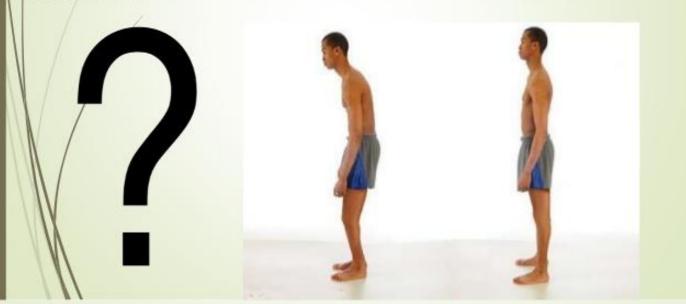
Late-stage deformities

Images courtesy of J. Cush, 2005.



Question mark posture

Question mark posture, or suppliant posture loss of lumbar lordosis, fixed kyphosis, compensated extension cervical spine, protruberant abdomen.

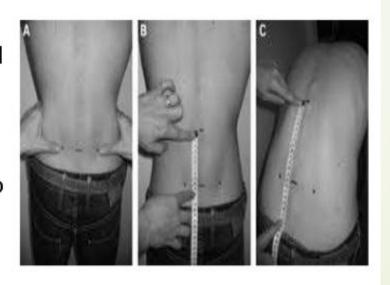




Modified Schober test



- In this test marks are made 5 cm below and 10 cm above the sacral dimples.
- The distance between these marks should increase from 15 cm to at least 20 cm with lumbar flexion.
- The distance less than
 5 cm is abnormal.



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Systemic Examination



 RA (ILD, amyloidosis, felty's syndrome, mononeuritis)

SPA (uveitis, psoriasis)

SLE (multi-system)

Investigations

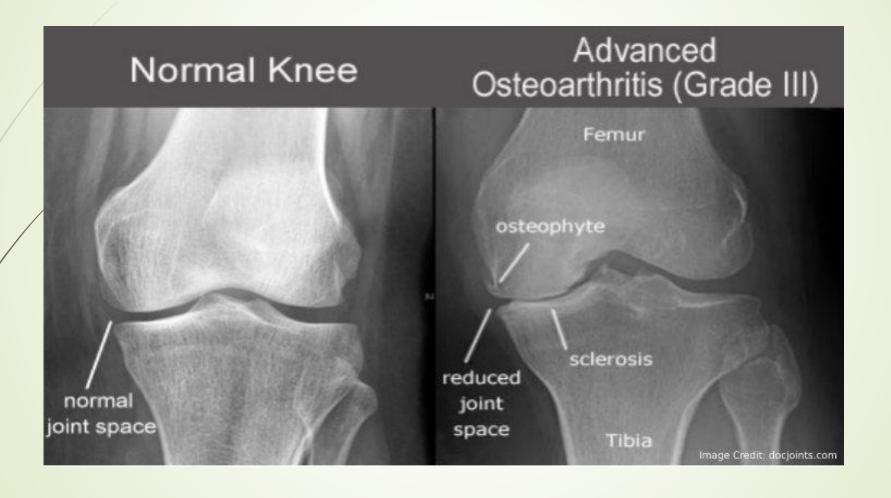


Imaging modalities (x-rays, MRI, MSUS)

Synovial fluid analysis

Serological tests

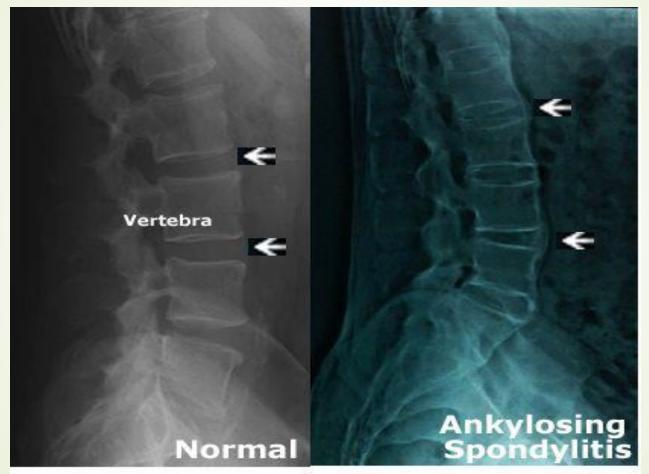












There is a ligament (arrow head) in front of the vertebrae. It is flexible & not normally seen in a normal person. It gets calified, thick in Ankylosing Spondylitis & is seen.

Dr. S. Akerkar http://doctorakerkar.wordpress.com/





MRI



 Assessment of inflammatory lesions of joints (synovial thickening, effusion, cartilage)

Assessment of bone lesions (bone edema, erosions)

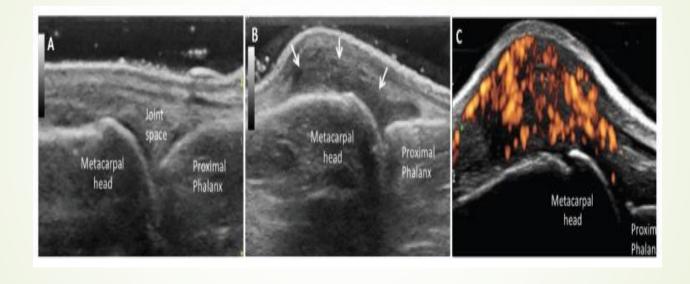
MSUS



Diagnostic and monitoring tool

MSUS





Investigations



Synovial Fluid Analysis

Investigations











	NORMAL	Non- Inflammatory	Inflammatory	Septic	Hemorrhagic
Clarity	Transparent	Transparent	Translucent	Opaque	Bloody
Colour	Clear	Yellow	Yellow	Dirty/Yellow	Red
Viscosity	High	High	Low	Variable	Variable
WBC/mm3	<200	200-2,000	2000-10,000 (up to 100,000)	>80,000	200-2,000
PMNs%	<25%	<25%	>50%	>75%	50-75%

Depending on the clinical scenario, synovial fluid is analysed for:

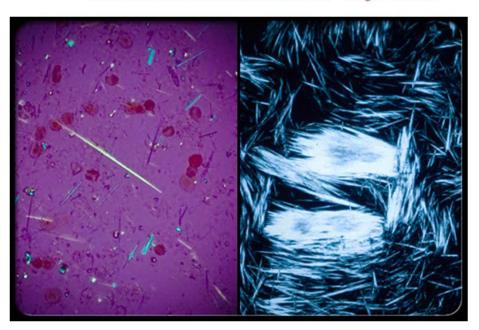
- Cell count and differential
- Crystals
- Culture and sensitivity (if septic arthritis suspected)
- Cytology (if malignancy suspected)

Synovial Fluid Analysis





Monosodium urate crystals











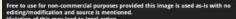
DISEASE **ANTIBODIES**

Rheumatoid Arthritis	RF (Rheumatoid Factor) Anti-CCP (Citrullinated protein)		
Sys Lupus Erythematosus	ANA (Anti Nuclear Antibody) Anti-dsDNA Anti-Sm		
Durg induced Lupus	Anti-histone		
Polymyositis	Anti-Jo-1		
Dermatomyositis	Anti-Jo-1		
Scleroderma	Anti-scl-70 ANA		
CREST Syndrome	Anti-centromere		
Sjogren's Syndrome	Anti-Ro ANA Anti-LA ANA		
Mixed Connective Tissue Disease (MCTD)	Anti-RNP ANA		

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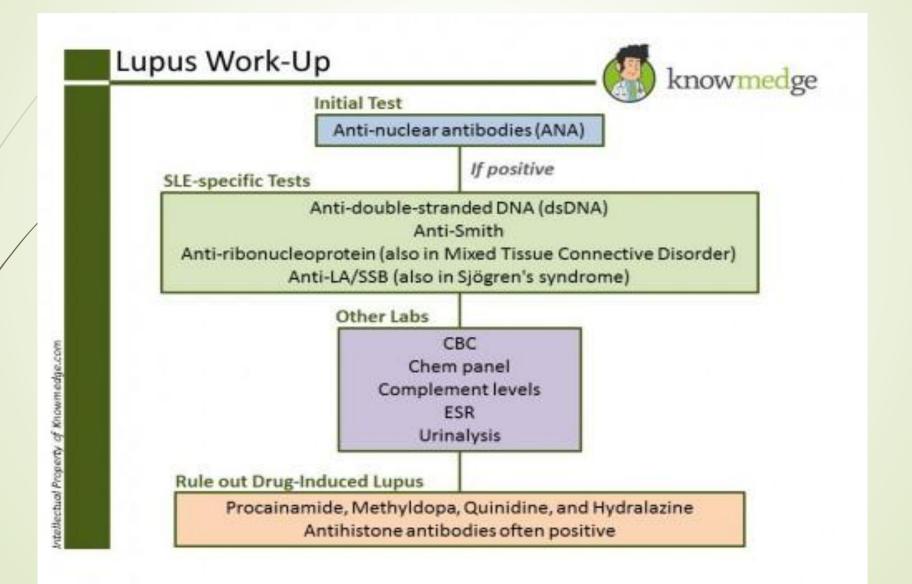






Serological Tests





Take home message



- Focussed history and examination
- Appropriate use of investigations

help in establishing diagnosis of "rheumatological disorders"

References



Davidson's textbook of Internal Medicine

 American College of Rheumatology guidelines for management of Rheumatoid Arthritis and Spondyloarthropathy

Recent Advances



JAK-inhibitors are novel oral agents approved for use in Inflammatory arthritis including rheumatoid arthritis and ankylosing spondylitis.



