

RHEUMATOID ARTHRITIS

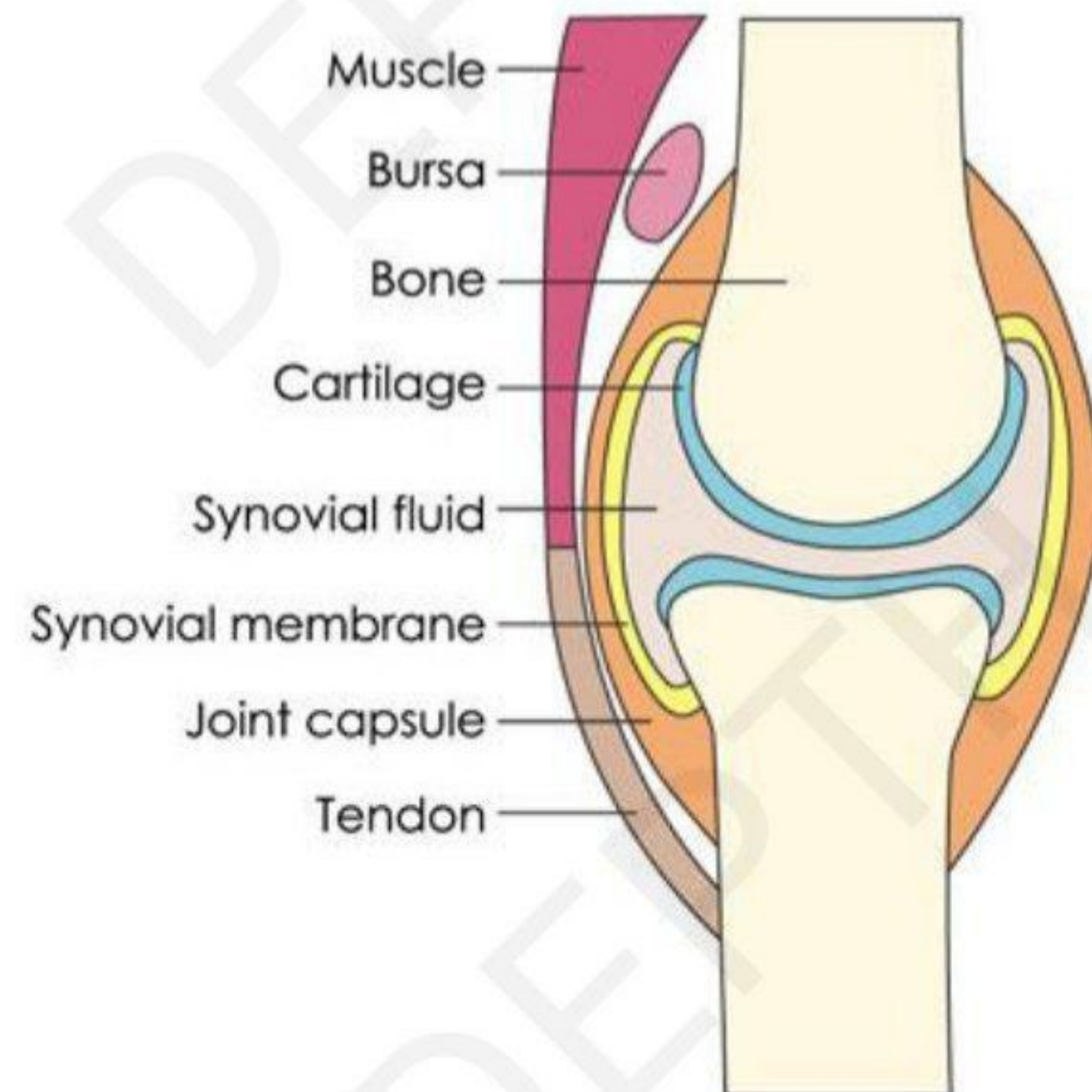
(Rheumatism)

[DEPTH OF BIOLOGY]

A chronic inflammatory disorder affecting many joints, including those in the hands and feet.

[DEPTH OF BIOLOGY]

NORMAL JOINT



other
organ also affected
like skin and lungs

- Comes from rheumatism-
musculoskeletal illness

ARTICULAR CARTILAGE—
type of connective
tissue that act like protective
cushion; a lubricated surface for
bones to smoothly glide against

[DEPTH OF BIOLOGY]

- **KNEE JOINT**= synovial joint; connect 2 bones with a fibrous joint capsule that continues with **periosteum** (outer layer of bone).
[DEPTH OF BIOLOGY]
- Here the fibrous capsule is lined by synovial membrane that has cell which produce **synovial fluid** & remove debris.

Viscous fluid { jelly like part of chicken egg }

- It helps to lubricate joint
- To help synovial cells the synovial membrane also has blood vessel & lymphatic running through it

[DEPTH OF BIOLOGY]

SYNOVIAL MEMBRANE + ARTICULAR CARTILAGE

Forms the inner lining of joint space

[DEPTH OF BIOLOGY]

SYNOVIAL JOINT

LYMPHATICS
BLOOD VESSELS

ARTICULAR
CARTILAGE

Connective
tissue

Protective
cushion

BONES

PERIOSTEUM

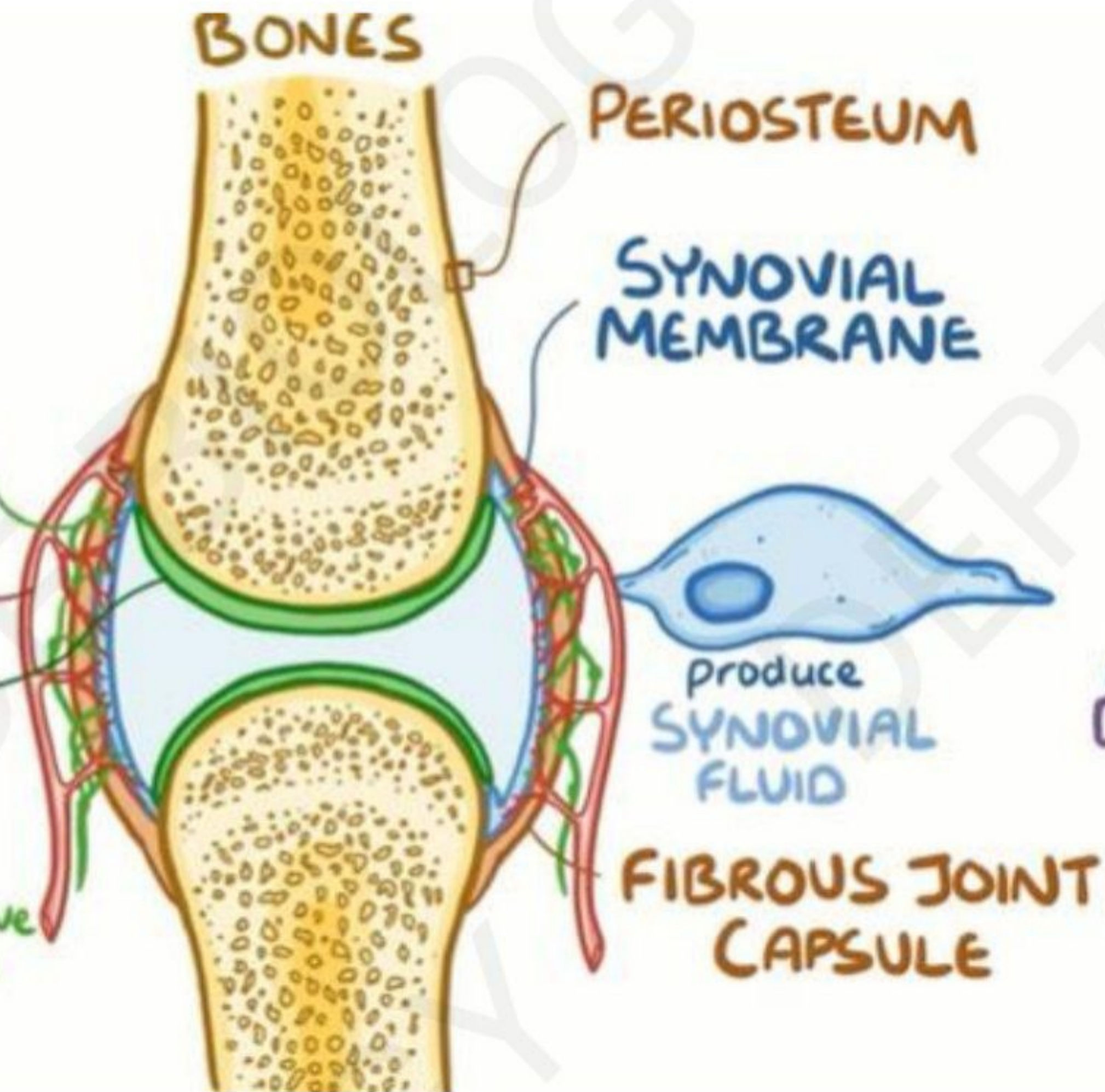
SYNOVIAL
MEMBRANE

produce
SYNOVIAL
FLUID

remove
DEBRIS

FIBROUS JOINT
CAPSULE

[DEPTH OF BIOLOGY]



DEPTH OF BIOLOGY

Rheumatoid arthritis is autoimmune disorder caused by interaction between genetic factor & environment.

[DEPTH OF BIOLOGY]

GENETIC

- A person with a certain gene for human protein like human leukocyte antigen or HLA-DR1 & HLA-DR4 might develop rheumatoid arthritis after getting exposed to something in the environment.
- Due to susceptibility gene HLA-DR1 & HLA-DR4 ; immune cell get confused by these changes
- & no longer recognize this protein as self antigen

[DEPTH OF BIOLOGY]

ENVIRONMENTAL

- Like cigarette smoking or specific pathogen like a bad bacteria that lives in the intestine
- This environment factors cause modification of our own antigens such as IgG antibodies or other protein like type II collagen or vimentin.
- Can get modified through the process of citrullination
convert into
citrulline
- Amino acid like arginine found in this

ANTIGENS GET PICKED UP BY
ANTIGEN PRESENTING CELLS



LYMPH
NODE

[DEPTH OF BIOLOGY]

- * ANTIGEN PRESENTING CELLS activate CD4 T-helper cells

- * T-helper cells stimulate B-CELLS



- * B-CELLS PROLIFERATE

- * Differentiate into PLASMA CELLS



Produce specific
AUTOANTIBODIES
against self-antigens

[DEPTH OF BIOLOGY]

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In rheumatoid arthritis; T-helper cells & antibodies circulate & reach the joints.



[DEPTH OF BIOLOGY]

Now T-cell secrete cytokine like interferon γ & interleukin-17 to recruit more inflammatory cells like macrophages into joint space.



[DEPTH OF BIOLOGY]

Macrophages will also produce inflammatory cytokine like tumour necrosis factor $TNF\ \alpha$, interleukin-1 & interleukin-6, which together with T-cell cytokines.



Stimulate synovial cell to proliferate

[DEPTH OF BIOLOGY]

INFLAMMATORY CYTOKINES

MULTIPLE ORGAN SYSTEMS
↳ Extra-articular problems

SKELETAL MUSCLE
↳ Protein breakdown

SKIN
RHEUMATOID NODULES
Macrophages
Lymphocytes
Necrosis

INTERLEUKIN 1 or 6

BRAIN Pyrogens → FEVER

LUNG

* INTERSTITIUM

Fibroblasts → SCAR TISSUE
↓ Gas exchange

* PLEURAL CAVITIES

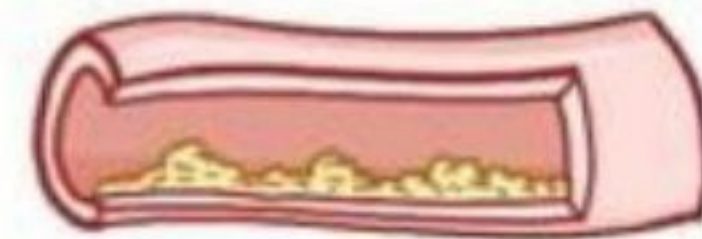
Fill with fluid → PLEURAL EFFUSION

LIVER - HEPCIDIN

↳ Causes ↓ Iron by inhibiting absorption + trapping in macrophages / liver cells

BLOOD VESSELS

Atheromatous plaques



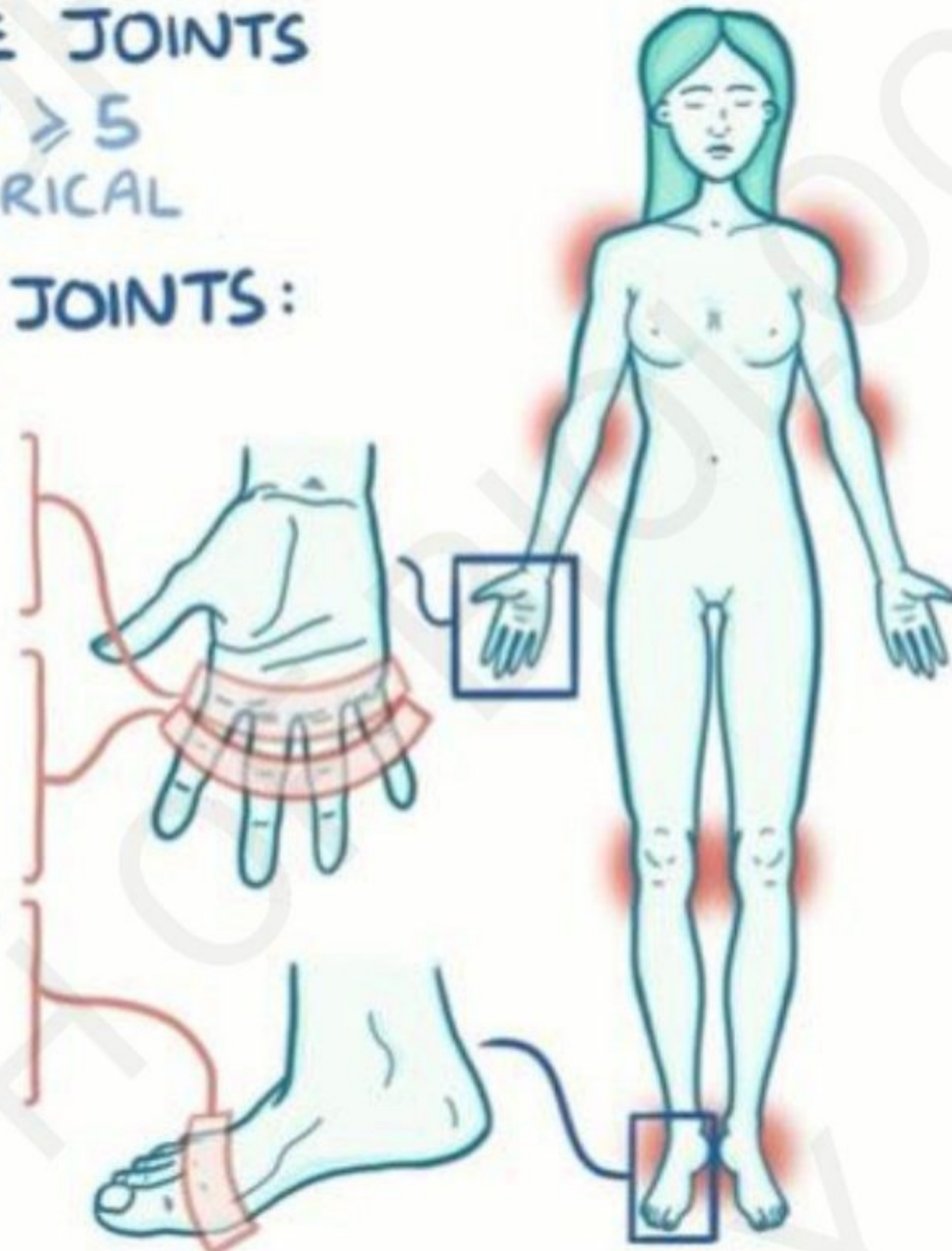
* **MULTIPLE JOINTS**

- ↳ USUALLY ≥ 5
- ↳ SYMMETRICAL

* **COMMON JOINTS:**

Small Joints

- ↳ Metacarpo-phalangeal (MCP)
- ↳ Proximal Inter-phalangeal (PIP)
- ↳ Metatarso-phalangeal (MTP)



* **AS DISEASE WORSENS**

Large Joints

- ↳ Shoulders
- ↳ Elbows
- ↳ Knees
- ↳ Ankles

* **FLARES**

(Sudden worsening)

- ↳ SWOLLEN
- ↳ WARM
- ↳ RED
- ↳ PAINFUL

* **STIFF**

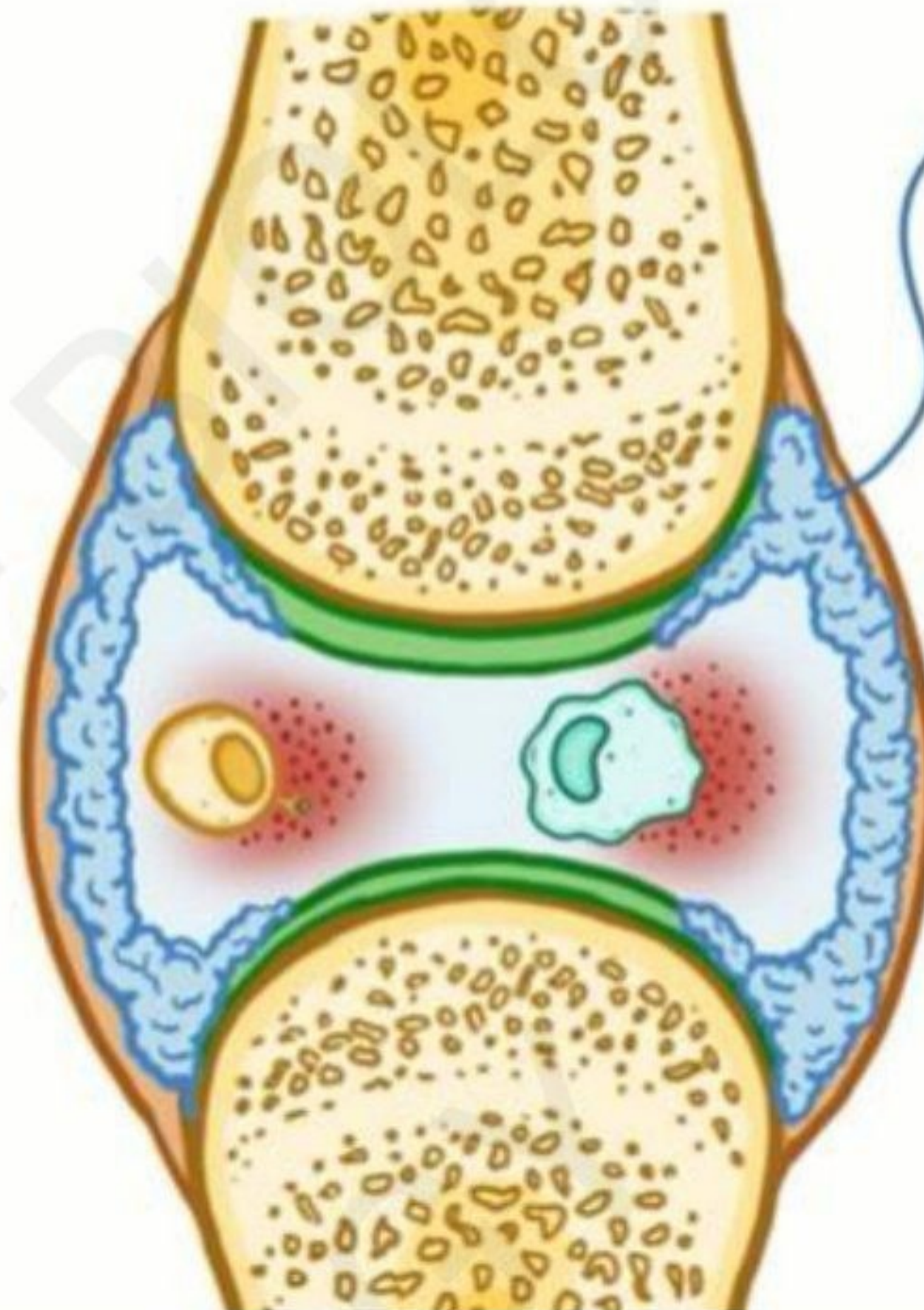
↳ Morning (after inactivity)

DEPTH OF BIOLOGY

The increase in synovial cell & immune cell creates a PANNUS, which is thick swollen synovial membrane with grannulation or scar tissue.

[DEPTH OF BIOLOGY]

T-CELLS
Secrete
CYTOKINES
↳ INTERFERON- γ
↳ INTERLEUKIN-17
↓
Recruits
MACROPHAGES
which produce
MORE CYTOKINES
↳ TNF- α
↳ INTERLEUKIN-1
↳ INTERLEUKIN-6



**SYNOVIAL CELLS
PROLIFERATE**
↓
PANNUS
Thick, swollen synovial
membrane with
GRANULATION TISSUE
↳ **FIBROBLASTS**
↳ **MYOFIBROBLASTS**
↳ **INFLAMMATORY
CELLS**

SPECIFIC DEFORMITIES

- Usually of the meta-carpo phalangeal joints in the hands such as ulnar deviation of fingers. [DEPTH OF BIOLOGY]
- Deformities also common in interphalangeal joints so called **BOUTONNIERE** or **BUTTON HOLE DEFORMITY**.
- This occurs when the extensor tendon in the back of finger splits & the head of proximal phalanges pokes through like a button/ button hole [DEPTH OF BIOLOGY]

SPECIFIC DEFORMITIES

[DEPTH OF BIOLOGY]

ULNAR DEVIATION



BOUTONNIERE "BUTTONHOLE" DEFORMITY

Extensor tendon splits



PIP FLEXION



DIP

HYPEREXTENSION

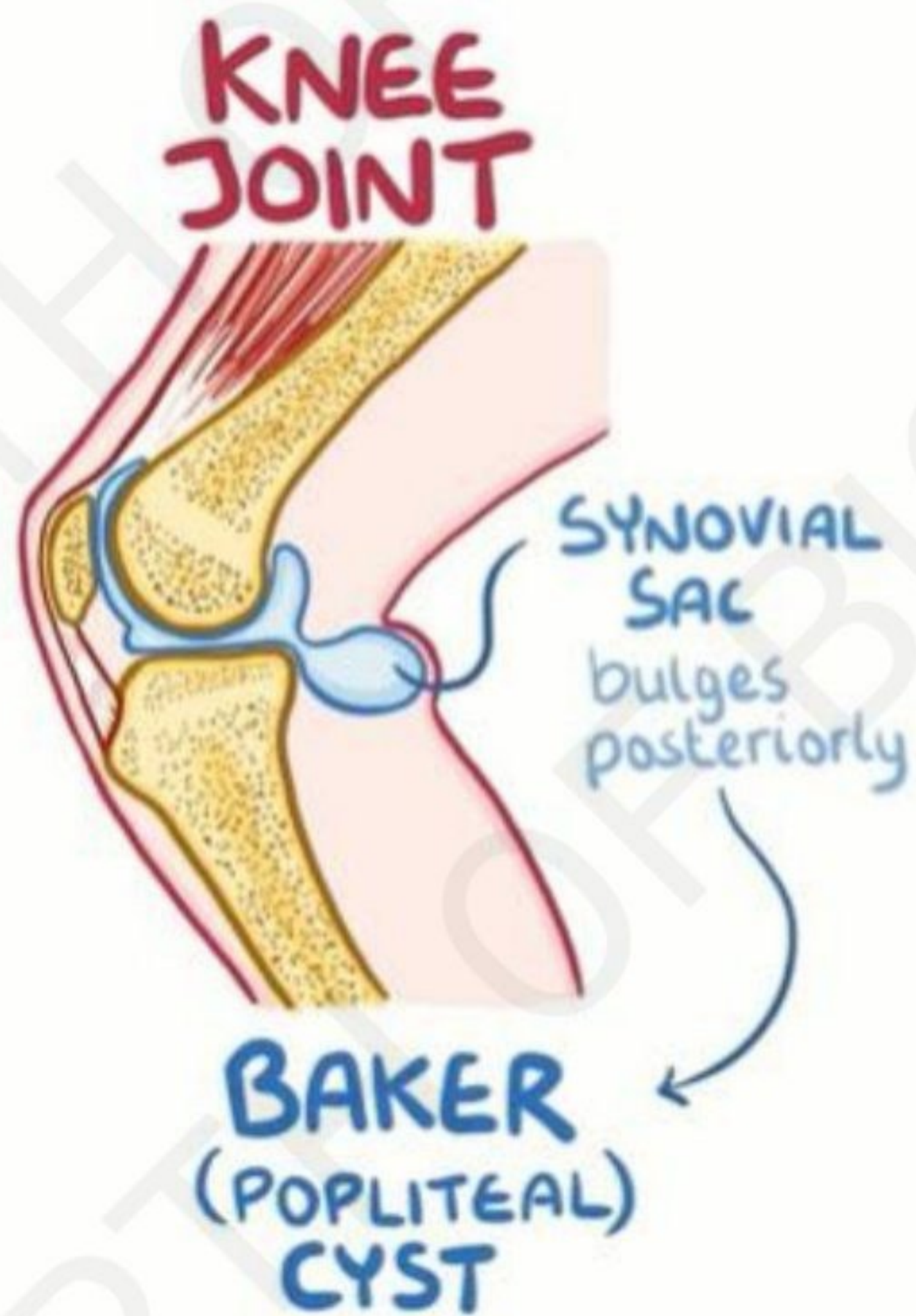
SWAN NECK DEFORMITY



PIP HYPEREXTENSION

DIP FLEXION

[DEPTH OF BIOLOGY]



EXTRA-ARTICULAR

- * FEVER
- * MALAISE
- * LOW APPETITE
- * WEAKNESS

Organ Specific:

- * RHEUMATOID NODULES
 - ↳ Pressure points (E.g. Elbow)
 - ↳ Rarely: Lung, heart, sclera
- * ↑ Risk of **ATHEROSCLEROSIS**
 - ↳ Heart attack, stroke
- * ANEMIA
- * INTERSTITIAL LUNG FIBROSIS
- * PLEURAL EFFUSIONS
 - ↳ Progressive shortness of breath

SWAN NECK DEFORMITY-

[DEPTH OF BIOLOGY]

- Extra articular manifestation include non-specific symptoms of inflammation such as- fever, low appetite, malaise or muscle weakness.
- Organ specific manifestation include rheumatoid nodules from bumps of tissue & these most commonly in the skin around pressure point [elbows].
- More rarely {heart, lung, sclera} [DEPTH OF BIOLOGY]
- Also increase rate of arthersclerosis [heart attack or stroke].
- There is also anemia, interstitial lung fibrosis & pleural effusion which can cause progressive shortness of breath

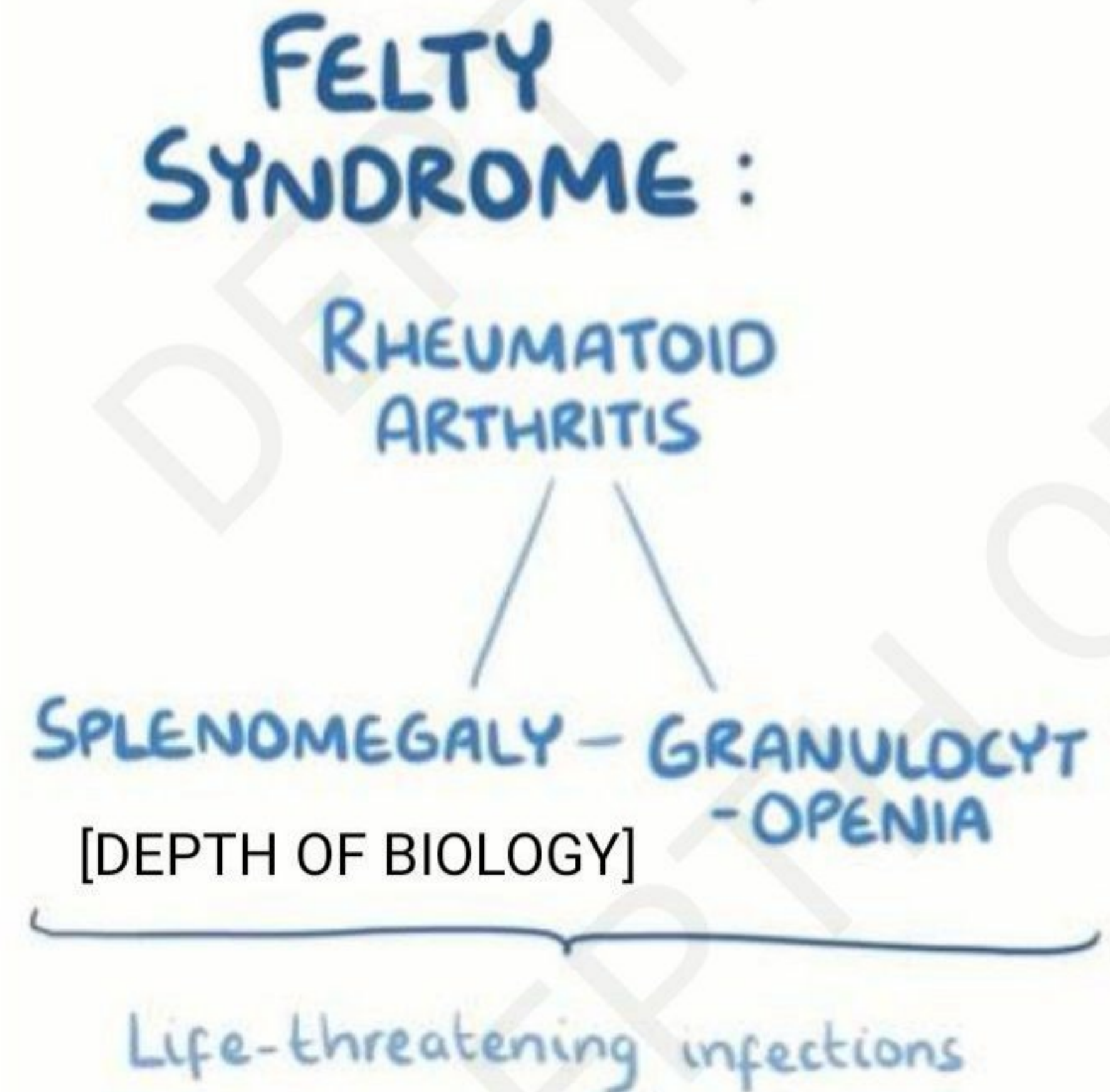
DEPTH OF BIOLOGY

- **FELTY SYNDROME-**

Serious condition in rheumatoid arthritis

Triad of rheumatoid arthritis , splenomegaly & granulocytopenia [DEPTH OF BIOLOGY]

It may lead to life-threatening infection



DIAGNOSIS

[DEPTH OF BIOLOGY]

1. **CONFIRMATORY BLOOD TEST-** looking for the presence of rheumatoid factor & anti citrullinated peptide antibody.
2. **X-RAY**: decrease in bone density around affected joints ; soft tissue swelling, narrowing of joint space, bonyerosion

[DEPTH OF BIOLOGY]

DEPTH OF BIOLOGY

TREATMENT

1. **DISEASE MODIFYING ANTI RHEUMATOID** MEDICATIONS-
methothreaxate, hydroxychloroquine, sulfasalazine ; helps
to suppress inflammation [DEPTH OF BIOLOGY]
2. There are variety of medication called biological response
mediators or biologics – some biologics such as ABATACEPT
work by suppressing the activity of T-cells or others
Such as rituximab- suppress B-cell
Anakinra- block interleukin 1 [DEPTH OF BIOLOGY]
3. Or give NSAIDS [non- inflammatory medication]