

Rheumatoid Arthritis



The Rheumatology service specialises in the diagnosis and treatment of diseases affecting the musculoskeletal system. Other than providing inpatient and outpatient consultation, our patients also benefit from in-house support services such as physiotherapy, occupational therapy and radiology services including bone densitometry studies. Patients are admitted through the emergency department, referred from polyclinics and general practitioners, or transferred from other departments within the Ng Teng Fong General Hospital or from other healthcare facilities such as nursing homes, community hospitals and other hospitals.

What is rheumatoid arthritis?

Arthritis refers to an inflammation of the joints (although this term is loosely used to imply any painful problem of the joints). There are different forms of arthritis, and rheumatoid arthritis (RA) is one of them.

RA is common, and affects about one in 100 people. It can develop at any age, but is most common in people between 20 and 50 years old. Women are three times as likely to be affected.

What causes RA?

A normal immune system is able to produce small proteins (antibodies) to fight germs such as bacteria and viruses in the body. In a healthy body, the immune system produces these proteins to fight against germs but not against its own body's tissues. Once the germs are killed, the immune system will "switch off".

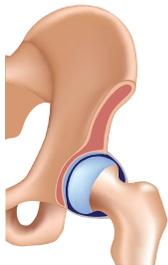
In some people, the immune system produces proteins that attack its own body's tissues, resulting in the development of an "auto-immune disease". The immune system is unable to "switch off" in time. There are many different auto-immune diseases, and RA is one. In RA, proteins attack the joints mainly to result in an inflammation.



What are the symptoms of RA?

Symptoms include pain and swelling of the affected joints and stiffness that worsens when you awake in the morning/after prolonged rest. Stiffness may last up to several hours. Tiredness, weight loss, numbness, tingling in the tips of fingers, and low grade fever are also common symptoms.

In the early stages, the joints of the fingers, wrists and feet are usually affected. Eventually, the wrists, elbows, shoulders, hips, knees, ankles and neck can also be affected.



Healthy hip joint



Rheumatoid arthritis

What is the difference between rheumatoid arthritis and osteoarthritis?

Osteoarthritis (OA) refers to the “wear and tear” in the joints. Although there are some inflammation in the joints, OA is very different from RA. Two bones meet to form a joint, and there is normally a cushion (cartilage) at the ends of these bones in the joint. In OA, this cushion breaks down and becomes thinner. The bone ends around the joint gets thicker and leads to symptoms such as pain and stiffness. Pain occurs after using the joint, but stiffness rarely lasts longer than a few minutes. Most patients with OA may experience only minimal joint discomfort, or remain pain-free.

What are the complications of RA?

RA usually begins with an inflammation in the joints. If inflammation persists, joints can become mildly or severely damaged and lead to permanent functional problems such as difficulty gripping objects, dressing and undressing oneself, feeding, bathing and walking. If it is diagnosed and treated early, damage to the joints can be prevented.

If inflammation is not well-controlled, fat deposits may develop on the inner lining of the blood vessels and increase the risk of heart attack or stroke. Less commonly, RA can cause an inflammation of the lungs, nerves, blood vessels and eyes, and raise one's risk of osteoporosis, especially in women whose monthly periods have ceased or in women receiving long-term steroids.



How is RA diagnosed?

There are different conditions that can cause joint pain or arthritis.

Diagnosis will be made based on:

- The pattern of your symptoms
- Your doctor's findings after examining your joints
- The results of your blood tests and X-rays



What are the treatment options?

Treatments for RA have improved vastly over the last two decades. New and effective treatments have also become available.

Medication

- Symptom-relieving treatments such as medications like paracetamol, nonsteroidal anti-inflammatory drugs and steroids. These are useful for treating symptoms such as pain, stiffness and swelling. Steroids may be prescribed as tablets (e.g. prednisolone), or injected directly into a painful joint. The use of steroids and non-steroidal anti-inflammatory drugs should be limited because of their risks.
- Disease-modifying drugs that prevent the progression of disease and development of joint damage. Examples include methotrexate, sulphasalazine and leflunomide.
- Biologics (a new class of drugs) given to patients who do not respond to standard drugs like methotrexate.

Surgery

Surgery may involve replacing a damaged hip or knee joint with metal joints. With early use of effective treatments to control the inflammation and availability of some new drugs, the number of patients undergoing surgery has greatly decreased.

Outpatient visits

It is possible to prevent the disabilities caused by RA through early diagnosis and treatment. Attend all outpatient appointments with your doctors and take the medication prescribed to you promptly. It is important to have regular blood tests since most disease-modifying drugs can potentially affect blood counts and cause liver problems. Such symptoms may not be obvious in the early stages, but regular blood tests can detect them and allow your medication to be modified or discontinued (as needed).

Alternative therapy

Inform your doctor if you decide to take traditional Chinese medication (TCM) as they may interact with the medication prescribed. TCM should not replace the treatments prescribed by your doctor.

Supplements

You can take evening primrose oil capsules which are known to benefit patients with RA.

Other tips

Keep to a healthy and balanced diet with moderate regular exercise. Avoid smoking to lower your risk of heart disease, lung problems and osteoporosis. Smoking reduces the effectiveness of certain medication and should be avoided. Get your blood pressure checked, and test for diabetes and high cholesterol regularly.



What can I do?

RA and its treatments can increase your risk of catching an infection. Get an annual flu jab if you are above 65 years old, or if you are taking long-term steroids or certain disease-modifying drugs or biologics. A pneumococcal vaccine every five years is also recommended.

For more information

Ng Teng Fong General Hospital and Jurong Community Hospital

1 Jurong East St 21, Singapore 609606

www.ntfgh.com.sg | www.jch.com.sg

Clinic opening hours

Monday – Friday: 8.30am – 5.30pm

Saturday: 8.30am – 12.30pm (Selected clinics only*)

Dental Clinic: Monday – Thursday: 8.00am – 5.30pm, Friday: 8.00am – 5.00pm

*Please refer to our websites for more details.

General enquiries & appointments

General enquiries line: 6908 2222 (24-hr)

Fax: 6716 5500 | Email: contactus@nuhs.edu.sg

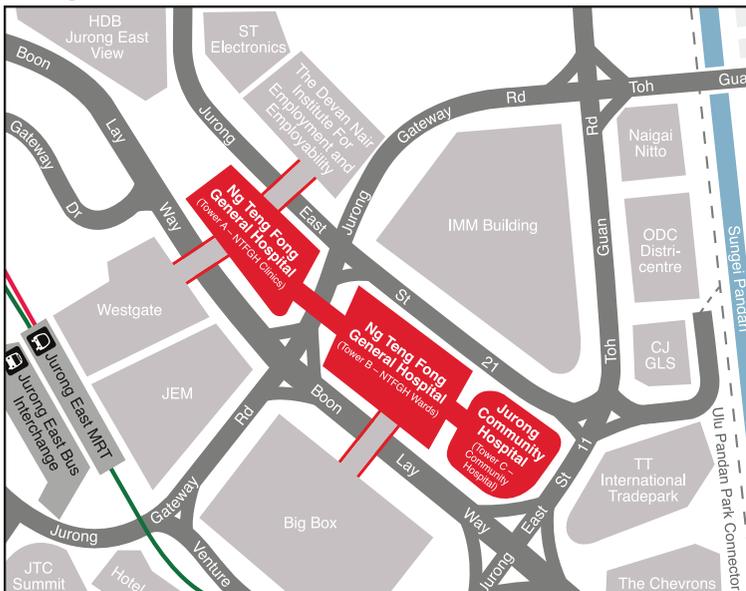
Appointment line: 6908 2222 (Monday – Friday: 8.00am – 5.30pm, Saturday: 8.00am – 12.30pm)

Fax: 6716 2200 | Email: appointment@nuhs.edu.sg

Dental appointment line: 6716 2233 (Monday – Friday: 8.00am – 5.30pm)

Fax: 6716 2200 | Email: JHCampus_Dental@nuhs.edu.sg

Getting there



By train

Alight at Jurong East MRT Station

By bus

Jurong East Bus Interchange

41, 49, 51, 52, 66, 66B, 78, 78A, 79, 79A, 97, 97E, 98, 98M, 105, 143, 143M, 160, 160A, 160M, 183, 183B, 197, 333, 334, 335, 506

Along Boon Lay Way

49, 99, 333, Private bus service 625, 990

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