

Rheumatology

AT A GLANCE



A QUICK REFERENCE GUIDE TO:

Axial Spondyloarthritis

Lupus

Osteoporosis

Rheumatoid Arthritis

Gout

And More...

Jack March | Rheumatology.Physio

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*PLEASE REMEMBER – THIS GUIDE IS NOT A
REPLACEMENT FOR CLINICAL REASONING,
IF YOU ARE UNSURE GET ADVICE*



Presenting Features

Back pain >3/12

Age of onset <45

Early morning spinal stiffness >30 mins

Better with activity, worse with rest

Night pain in the second half of the night

Good response to NSAIDs

Comorbid/PMH

Psoriasis

Iritis/uveitis

Crohns/colitis

Demographics

Age of onset <45

2:1 Male:Female

Non-Axial Features

Peripheral arthritis/synovitis 30%

Peripheral Enthesitis 40%

Dactylitis 7%

Fatigue

Family History

Inflammatory arthropathy

Imaging

MRI Spine - SpA Protocol

Bloods

HLA B27 +ve (85+%)

CRP and ESR – may be raised



Presenting Features

Peripheral joint pain/synovitis
Early morning joint stiffness >30 mins
Positive MCPJ/MTPJ squeeze test

Comorbid/PMH

Polymyalgia Rheumatica

Demographics

Peak onset age 30-60
2:1 Female:Male

Non-Articular Features

Tenosynovitis
Fatigue

Family History

Inflammatory arthropathy

Imaging

Diagnostic Ultrasound
Xray - Hands and Feet

Bloods

Anti-CCP +ve (95%)
Rheumatoid factor – prognostic value
CRP and ESR – may be raised

Presenting Features

Joint pain

AM joint pain/stiffness lasting <15 mins

Positional night pain

Worse with activity better with rest

Comorbid/PMH

Obesity

Other types of Arthritis

Low physical activity levels

Previous joint surgery

Previous joint injury

Demographics

Incidence increases with age

Non-Articular Features

None

Family History

Osteoarthritis

Imaging

Xray

Bloods

N/A except to exclude other conditions



Presenting Features

Low trauma fracture(s)
Symptomless

Comorbid/PMH

Early menopause
Low BMI
Crohns/colitis/IBD
Inflammatory Arthropathies
Smoking/high alcohol intake
Eating disorders or food intolerances

Demographics

Incidence increases with age
Uncommon prior to age 50
2:1 Female:Male

Family History

Parental fractured neck of femur
Osteoporosis

Extra-Articular Features

None

Bloods

N/A except to exclude other conditions

Imaging

DXA Scan



Presenting Features

Peripheral joint pain/synovitis
Early morning joint stiffness >30 mins
Inflammatory back pain

Comorbid/PMH

Psoriasis

Demographics

Peak onset age 10-20 & 30-50
1:1 Female:Male

Non-Articular Features

Peripheral Enthesitis
Dactylitis
Nail changes
Fatigue

Family History

Psoriasis
Inflammatory arthropathy

Imaging

MRI Spine - SpA Protocol
Diagnostic Ultrasound

Bloods

HLA B27 +ve (50-60%)
Rheumatoid Factor -ve (87%)
CRP and ESR – may be raised



Presenting Features

Widespread pain (4/5 regions)

Symptom Severity Scale 5+

Symptoms unchanged >3 months

Comorbid/PMH

Most LTCs implicated

Major surgery

Demographics

Peak onset age 20-50

7.5-9:1 Female:Male

Non-MSK Features

Fatigue

Cognitive impairment

Family History

Pain conditions or disability

Imaging

N/A except to exclude other conditions

Bloods

N/A except to exclude other conditions

PMR AT A GLANCE

Polymyagia Rheumatica



Presenting Features

- Bilat shoulder (90%) and/or bilat pelvic girdle pain
- Bilat shoulder and/or bilat pelvic girdle stiffness
- Symptoms worse in the early morning >30 mins

Comorbid/PMH

None Implicated

Demographics

- Peak onset age 65
- Uncommon prior to age 50
- 3:1 Female:Male

Non-MSK Features

- Malaise
- Depression
- Loss of appetite

Family History

PMR

Imaging

N/A except to exclude other conditions

Bloods

- ESR >40
- CRP may be raised

SLE AT A GLANCE

Systemic Lupus Erythematosus



Presenting Features

Multiple joint pains

Myalgia

Fatigue

Comorbid/PMH

Other autoimmune condition(s)

Demographics

6:1 Female:Male

Twice as likely in African American women compared to Caucasian women

Peak onset age 15-44

Non-MSK Features

Rashes

Multiple miscarriages

Fatigue

Hair loss

Cardiovascular disease

Family History

Lupus

Other autoimmune condition(s)

Imaging

N/A except to exclude other conditions

Bloods

ANA +ve (95%)

Secondary care bloods anti-dsDNA antibodies, low complement, anti-sm antibodies

Sjogrens

Syndrome AT A
GLANCE



Presenting Features

Myalgia

Fatigue

Multiple joint pains

Comorbid/PMH

Other autoimmune
condition(s)

Demographics

9:1 Female:Male

Peak onset age 50-60

Non-MSK Features

Dry eyes

Dry mouth

Fatigue

Family History

Sjogrens Syndrome

Other autoimmune condition(s)

Imaging

N/A except to exclude other
conditions

Bloods

Anti-Ro/La antibodies positive

Note: objective eye/mouth dryness tests are
available in clinic

Gout AT A and Pseudogout GLANCE



Presenting Features

Sudden onset often at night

Swelling, heat, redness, pain peaking after a few hours

Attack lasts a few days then settles

Comorbid/PMH

High BMI

High alcohol

Diabetes

Vascular conditions

Demographics

1/14 men (uncommon before puberty)

1/35 women (uncommon before
menopause)

Non-MSK Features

Gouty Tophi (in long standing disease)

Family History

Gout

Aspiration

To visualise Uric Crystals

Bloods

Uric Acid

Creatinine

Resources

Website

Rheumatology.Physio hosts a blog which goes into further detailed information on Rheumatology conditions. Written to be accessible for Therapists.

CPD Courses

Whole or half day bespoke CPD courses are available. Please visit Rheumatology.Physio for further details of courses in your area or if you wish to host in your department.

Twitter

Follow @physiojack for links to resources, updates and current developments.

Thank you for choosing this At
A Glance reference guide for
Rheumatology Conditions



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