

www.arthritis.org 800-283-7800

Psoriatic Arthritis

WHAT IS PSORIATIC ARTHRITIS?

Psoriatic (sore-ee-AAH-tick) arthritis is a condition that causes pain and swelling in joints and scaly patches on the skin. Psoriatic arthritis occurs in people with psoriasis (so-RYE-ah-sis), a chronic (long-lasting) skin disease. Not everyone who has psoriasis develops psoriatic arthritis.

Psoriasis is characterized by a scaly, itchy skin rash. This rash most commonly occurs on the elbows, knees and scalp. Psoriasis may cause changes in your fingernails and toenails including small, pinpoint depressions in the surface of the nails, called pitting.

The joint pain caused by psoriatic arthritis is often associated with swelling and redness of joints, particularly in the knees, ankles, fingers and toes. Some people with psoriatic arthritis also have neck and/or back pain and stiffness. This can limit movement. People who develop psoriatic arthritis may have either the skin or joint symptoms first. Both symptoms may appear at the same time.

Psoriatic arthritis affects both men and women. It usually develops between the ages of 30 and 55. Approximately 10 percent of people with psoriasis develop psoriatic arthritis.

WHAT CAUSES PSORIATIC ARTHRITIS?

The cause of psoriatic arthritis is not yet known. It is believed that genetics (hereditary factors), abnormalities of the body's immune system and the environment play a role in developing the disease. Some researchers believe that certain bacteria, such as streptococci, may play a role in psoriatic arthritis and cause chronic stimulation of the immune system. This stimulation of the immune system could result in arthritis in people with a genetic "susceptibility" to psoriatic arthritis.

WHAT ARE THE SYMPTOMS?

Common symptoms of psoriatic arthritis include:

- Pain and swelling in one or more joints, usually the wrists, knees, ankles and/or joints at the ends of the fingers or toes
- Swelling of fingers and/or toes that gives them a "sausage-like" appearance
- · Low back or buttocks pain
- Silver or gray, scaly spots on the scalp, elbows, knees and/or the lower end of the backbone
- Pitting, which is characterized by small depressions and/or detachment of fingernails and/or toenails

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The course of psoriatic arthritis varies. Most people do well and are able to lead normal lives. However, some people have chronic joint pain with inability to use the joints affected by arthritis. Persistent swelling of the membrane lining the joint, called the synovium (si-NOvee-um), can lead to joint damage and deformities of the joint.

WHAT ARE THE PATTERNS OF JOINT INVOLVEMENT?

Psoriatic arthritis can affect peripheral joints such as the knees, fingers and feet as well as joints in the spines. In most of these people, more than five joints (polyarthritis) are affected.

When peripheral joints are affected, psoriatic arthritis may occur in the same joints on both sides of the body ("symmetrical arthritis"). At the beginning of the disease, however, it is more likely to occur in different joints on either side of the body ("asymmetrical arthritis"). Some people only have swelling involving the outermost joints of the fingers or toes. In addition, the entire finger or toe may become painful and swollen, called a "sausage" digit.

Approximately five percent of people with psoriatic arthritis have arthritis only in joints of the spine, or spondylitis. This form of psoriatic arthritis usually affects the sacroiliac (sa-KROih-lee-ak) joints and joints in the lower back and neck regions. This leads to pain and stiffness in the buttocks, lower back, neck or along the spine. This may lead to restriction of back movement. Some people with psoriatic arthritis have both spinal involvement and joint involvement outside of the spine.

HOW IS IT DIAGNOSED?

To find out if you have psoriatic arthritis, your doctor will ask about your symptoms and perform a physical examination. The examination can detect abnormalities of joints such as tenderness, swelling, pain on movement of joints, or limitations in joint movement. In addition, your doctor will look for evidence of psoriasis on the skin or changes in your fingernails and toenails. Your doctor also may perform some or all of the following tests:

- · X-rays to look for changes in your bones and ioints
- Blood tests to rule out other diseases, such as rheumatoid arthritis
- Joint fluid tests to rule out gout or infectious arthritis

HOW IS IT TREATED?

The goal of treatment for psoriatic arthritis is to reduce joint pain and swelling, control patches of psoriasis on the skin and slow down or prevent joint damage. Common treatments, including skin care, medication and exercise are described on the following pages.

Skin Care

- · Avoid using strong soaps.
- Use non-deodorant soaps.
- Use a lanolin cream or lotion. Your doctor may prescribe a corticosteroid cream to control scaly skin patches.
- · Put baby oil in your bath water.
- · Use a humidifier in the winter.
- Try using a synthetic vitamin D3 derivative ointment.



TRY LIGHT TREATMENT

Light treatments such as those listed here should only be tried upon your doctor's recommendation.

- Sit in the sun for short periods of time.
- Try a UVB (type B ultraviolet light) treatment.
- Try a PUVA light treatment. This is a combination of the prescription medicine psoralen (SORE-ah-len), taken either in pill form or added to a bath, and type A ultraviolet light.

TRY SPECIAL COSMETICS

Using special makeup can help conceal skin problems and make you feel better. Ask about special cosmetics at the cosmetic counter of any large department store. The cosmetic staff can teach you how to apply their products.

Medication

The benefits of the medications used to treat psoriatic arthritis include their abilities to help relieve joint pain and swelling and to help slow down joint damage. However, what works for you may not work for someone else with psoriatic arthritis. Take all medications as directed by your doctor and pharmacist.

Be sure to tell your doctor about all the prescription and over-the-counter (OTC) medications and/or herbal or dietary supplements you are taking. Taking some medications together may cause a bad reaction.

NONSTEROIDAL ANTI-INFLAMMATORY DRUGS (NSAIDS)

Nonsteroidal anti-inflammatory drugs, or NSAIDs, can help reduce joint pain and swelling. You may need to take NSAIDs for a few days, weeks or perhaps much longer, depending on your condition. Over-the-counter NSAIDs include aspirin, ibuprofen and naproxen sodium. Some NSAIDs are available only by prescription. Talk with your doctor about whether it is safe to take OTC medications in addition to the ones prescribed to you. OTC medications are often in lower doses and may control pain, but they may not control inflammation.

NSAIDs work by blocking the production of substances called prostaglandins (pros-ta-GLAN-dens) at the site of inflammation. All NSAIDs occasionally can cause stomach problems or a decline in kidney function. COX-2 selective inhibitors, such as celecoxib (*Celebrex*), rofecoxib (*Vioxx*) and valdecoxib (*Bextra*), are NSAIDs that may be safer for the stomach.

ETRETINATE

Etretinate is a vitamin A-like drug used to treat psoriatic arthritis. It usually is prescribed if other medicines have been unsuccessful. Etretinate is not recommended for children because it can interfere with bone growth. It can cause birth defects and must be used with birth-control measures in women to prevent pregnancy.

CORTICOSTEROIDS

Corticosteroids are synthetic forms of cortisol, a hormone your body makes. Your doctor may prescribe corticosteriod pills or creams, or may inject the medicine directly into muscles or painful joints. Oral corticosteriods, such as prednisone, in low doses may be needed to manage widespread joint inflammation.



DISEASE-MODIFYING ANTIRHEUMATIC DRUGS (DMARDS)

Disease-modifying antirheumatic drugs (DMARDs) slow down the progress of chronic forms of inflammatory arthritis, including psoriatic arthritis. They usually are slower acting and more powerful than NSAIDs. They work best if they are used before much damage from the disease has occurred. Your doctor must carefully monitor you when you take DMARDs.

Methotrexate

Methotrexate helps relieve joint pain, stiffness and swelling. It also can improve psoriatic skin lesions. You must not drink alcohol if you take methotrexate. Taking folic acid can reduce some of the side effects.

Leflunomide

Leflunomide (*Arava*) has recently been shown to be effective for the treatment of psoriatic arthritis. Clinical studies suggest it is comparable to methotrexate for improving the signs and symptoms of psoriatic arthritis.

Sulfasalazine

Sulfasalazine has been shown to be beneficial in treating people with psoriatic arthritis. Clinical studies have shown that sulfasalazine relieves joint pain, swelling and skin rash. People who are allergic to medications containing sulfa cannot take sulfasalazine.

Cyclosporine

Cyclosporine has been shown to be effective in treating the skin and joint problems of psoriatic arthritis.

Azathioprine

Azathioprine also suppresses the immune system and helps to relieve joint pain, stiffness and swelling in psoriatic arthritis.

Hydroxychloroquine

Hydroxychloroquine is sometimes prescribed to treat psoriatic arthritis. There are several possible eye problems that may develop with hydroxychloroquine. You should have an eye exam every six to 12 months while taking the drug.

TUMOR NECROSIS FACTOR INHIBITORS

The tumor necrosis factor (TNF) inhibitor etanercept (*Enbrel*) is approved by the FDA for reducing the signs and symptoms of active arthritis in adult patients with psoriatic arthritis. Infliximab (*Remicade*) and another anti-TNF agent, adalimumab (*Humira*), are currently being studied for psoriatic arthritis.

Exercise

Exercise is an important part of your treatment. It can limit the pain and swelling of arthritis that can make your joints stiff. Exercise also can improve flexibility, strengthen muscles, improve sleep, strengthen the heart, reduce weight and improve physical appearance. Work with your doctor or physical therapist to develop an exercise program that's right for you.

Rest

Generally, a normal amount of rest and sleep is sufficient to decrease fatigue and reduce joint inflammation. In a very few people, however, psoriatic arthritis may cause extreme fatigue. If this happens, you may need to rest more than usual and learn how to pace your activities and use your energy wisely throughout the day.



Heat and Cold Treatments

Heat and cold treatments can temporarily relieve pain and reduce joint swelling. Examples of treatments include soaking in a warm tub or placing a cold pack on the painful joint. Talk to your doctor or physical therapist about what treatments may be best for you.

Splints

Splints help rest your joints. They may be useful if you have joint inflammation or problems with joint alignment or stability. Using splints helps decrease joint pain, swelling and stiffness. Your doctor, physical therapist or occupational therapist can help determine the best splint for you and when you should wear it.

Surgery

Most people with arthritis will never need surgery. However, if your joints are severely damaged by arthritis or when other treatments don't lessen the pain, your doctor may recommend joint replacement surgery. In this surgery, joints damaged by arthritis are replaced with artificial joints. Benefits of joint replacement include reduced pain and improved function.

RESEARCH

Since 1948, the Arthritis Foundation has invested nearly \$320 million on research to help prevent, control and cure arthritis and related diseases such as psoriatic arthritis. Much of this research has focused on furthering our understanding of the role of genetics and abnormalities in the immune system. For instance, the Arthritis Foundation is currently funding a study aimed at learning how certain immune cells and a natural regulatory molecule

suppress the development of associated arthritis. Such research is necessary for the development of novel therapies to prevent and treat psoriatic arthritis.

FOR MORE INFORMATION

Contact your local Arthritis Foundation chapter for a complete list of free brochures about different forms of arthritis and related diseases, treatments and self-management techniques. A variety of programs and services such as those listed below also may be available in your area.

Services

- Arthritis Self-Help Course Learn how to take control of your own care in this six-week (15-hour) class for people with arthritis.
- Arthritis Foundation Aquatic Program
 (AFAP) Join in the fun of this warm water exercise program designed for individuals with arthritis and related conditions.
- PACE® (People with Arthritis Can Exercise)
 Program Enjoy the benefits of exercise by participating in our basic or advanced levels of exercise classes, or exercise at home by purchasing an Arthritis Foundation exercise videotape.

THE ARTHRITIS FOUNDATION

The mission of the Arthritis Foundation is to improve lives through leadership in the prevention, control and cure of arthritis and related diseases. The Arthritis Foundation is your partner in taking greater control of arthritis and the impact it has on the lives of millions of people affected by the disease.

The Arthritis Foundation supports research with the greatest potential for advances and has



invested more than \$320 million in these efforts since its inception in 1948. Additionally, the Arthritis Foundation supports key public policy and advocacy efforts at a local and national level in order to advance its policy agenda and make a difference on behalf of 70 million people living with arthritis. The Arthritis Foundation also offers a large number of programs and services nationwide to make life with arthritis easier and less painful and to help you become an active partner in your own health care.

Contact us at (800) 283-7800 or visit us on the Web at www.arthritis.org to become an

Arthritis Advocate or to find out how you can become involved in helping us improve people's lives and overcoming the nation's number one cause of disability.

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For more information: The Arthritis Foundation offers a wide variety of books, brochures and videos about different forms of arthritis, treatment and self-management techniques to help you take control of your arthritis. To order any of these products, become an Arthritis Foundation member or to subscribe to the Arthritis Foundation's award-winning consumer health magazine, Arthritis Today, call (800) 283-7800. Call or visit our Web site (www.arthritis.org) to find out how you can take control of your arthritis and start living better today!

This brochure has been reviewed by the AMERICAN COLLEGE OF RHEUMATOLOGY.



The mission of the Arthritis Foundation is to improve lives through leadership in the prevention, control and cure of arthritis and related diseases.







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