RHEUMATOID ARTHRITIS IS AN AUTOIMMUNE DISEASE RESULTING IN SYSTEMIC INFLAMMATORY DISORDER THAT MAY AFFECT MANY TISSUES AND ORGANS BUT PRINCIPALLY ATTACKS SYNOVIAL JOINTS.

THERE ARE FEW TIMES AS MANY WOMEN THAN MEN WITH THE DISEASE. COMMONLY BEGINS DURING CHILDHOOD AS WELL AS BETWEEN THE AGE OF 20 AND 55.

## MMA CLINIC FOR RHEUMATOLOGY

Military insured and patients with civilian health insurance coverage and GP's referral can seek an appointment scheduled via the Appointment Lines, every day from 07.30 a.m. to 03.30 p.m.

All citizens with civilian health insurance coverage who use the MMA service at their request are able to schedule the appointment Monday through Thursday, from 03.30 p.m. to 07.30 p.m.

APPOINTMENT SCHEDULING / CONTACT INFOR-MATION AT: +381 11 2662 717 +381 11 3608 498 +381 11 3609 398 +381 11 3609 399

MILITARY MEDICAL ACADEMY www.vma.mod.gov.rs vma@mod.gov.rs Belgrade, 17 Crnotravska St.

Contact telephone: +381 11 2661 122 +381 11 2662 755 Fax: +381 11 2666 164







The cause of rheumatoid arthritis is not yet Researchers have identified known. environmental factors (infections, female hormones, body's response to stressful events) which may trigger the disease in someone with a genetic propensity for it. They disable immune system which is responsible defending the organism from for microorganisms and attack joints. At the beginning soft tissues in joint narrowing space are swollen and synovium inflammable but whole process ends with mechanisms causing permanent deterioration of cartilage and bone until their complete destruction. In social sense, it can be disabling condition

for 50 % of patients if not adequately treated during the period of 10 years.

Patients with timely and proper treatment have better prognosis concerning joint deteriorations and functional ability saving. Early rheumatoid arthritis (RA) is arthritis which lasts shorter than 3 months. According to medical data obtained from Serbian Registry for Chronic Arthritis (undifferentiated and rheumatoid arthritis) CHARGER approximately 12 months passes from the period when symptoms occur to be diagnosed as RA. Chronic arthritis is the most aggressive disease form causing progressive deterioration of joint structures during the first year. Anatomic damages become irreversible.

Immunosuppressive drugs, namely methotrexate is the most commonly used agent to decrease progression of disease and prevent serious damages.

Signs and symptoms of RA are symmetric pains in joints, firstly reflected in small joints of the ands and feet, but larger joints like shoulder, elbows, knee and hips can also be involved. Pains increase during the rest and relaxation while motion induces them. Increased stiffness early in the morning is often a prominent feature of the disease and typically lasts from 30 minutes to more than an hour. Gentle movements may relieve symptoms during the day.

With intense pains body motion and locomotion become limited. Increasing deformity is consistent with the severe cases of the disease, as those in hand joints thus leading to the loss of their function. Timely diagnose is necessary to start up adequate treatment.

Rheumatologist is a physician who diagnoses disease of rheumatoid arthritis. Relevant information provided by a patient are those related to duration of pains, joints which are affected and existence of morning stiffness. "Lateral squeezing" is the examination method proving joint inflammation. Also, several other blood tests are usually done to allow for other causes of arthritis, such as the erythrocyte sedimentation rate (ESR), C-reactive protein, full blood count and other immunological tests (e.g. antinuclear antibody/ANA and rheumatoid factor). Radiographs (X-ray) demonstrate changes typical for RA. Although, when visible at X-ray disease is commonly at its later stage.

Internist rheumatologist is charged for carrying out its treatment. It consists of immunosuppressive therapy application including disease-modifying anti-rheumatic drugs. They are a diverse collection of drugs, among them frequently used methotrexate applied once a week with rare severe side effects. If not supported well the other antimalarials, sulfasalazine and leflunomide can be used, although with minor success rate.

In the early treatment phase it is necessary to apply corticosteroids which increase inflammation and in short-term smaller doses do not have significant adverse effects. In the last few years, so called biological therapy has given better treatment results comparing to classical treatment method.

Several medications different by effect mechanism but all derived by genetic engineering react on specific molecules involved in rheumatoid arthritis while injected subcutaneously or intervene. Those are very expensive drugs which should be approved by Republic Commission accordingly to International Standards.

Painkillers, or so called non-steroid anti-inflammatory drugs may reduce the pains but do not becalm disease development.

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