What Is Inflammatory Osteoarthritis?

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Understanding Inflammatory Osteoarthritis

When you hear the term “arthritis,” you probably think of your grandparent’s arthritis – the type of arthritis that comes with age or joint overuse.

This type of arthritis is called *osteoarthritis* and is undoubtedly the most common type of arthritis. In fact, according to researchers at Cleveland Clinic, upwards of 70 percent of adults between the ages of 55 and 78 suffer from osteoarthritis!

However, did you know that there are more than 100 different types of arthritis? Yes, 100! According to the Arthritis Foundation, the most common types of arthritis are osteoarthritis (OA), rheumatoid arthritis (RA), psoriatic arthritis (PsA), fibromyalgia, and gout.

There are also subtypes of arthritis.

One such subtype is inflammatory arthritis, which includes RA, PsA, ankylosing spondylitis, juvenile idiopathic arthritis, and systemic erythematosus (lupus), as well as various other less common types of inflammatory arthritis.

Although each type of inflammatory arthritis is different, with each its own set of symptoms, they all have one thing in common: they all cause inflammation of the joints.

What Causes Inflammatory Arthritis?

In general, most types of arthritis causes some degree of inflammation. But inflammatory arthritis causes an actual inflammatory response in the body.

The body’s immune system perceives that there is something to fight, although there is nothing foreign to battle. This is called an autoimmune disease – inflammatory arthritis conditions are generally this variety – and an autoimmune disease causes damage to the body when there was no illness or infection to fight.

As with other autoimmune diseases, doctors are unsure what starts the process. There does appear to be a genetic component to inflammatory arthritic conditions. For example, people with a family history of RA are known to have a higher risk of developing the disease.

Other risk factors for developing inflammatory arthritis include gender – women are more likely to develop these types of arthritic conditions. Age also plays a factor – they typically start between the ages of 40 and 60 (aside from the juvenile-onset conditions, of course.)

Smoking also seems to increase the risk, especially in those who also have a genetic predisposition. Smoking

may even worsen the intensity of these conditions. Being obese may also play a role, as can exposure to certain environmental factors.

For example, exposure to asbestos and silica is known to increase the risk of RA. Emergency workers who were exposed to dust at the World Trade Center also have seen a higher incidence of RA.

What Are the Symptoms of Inflammatory Arthritis?

The hallmark symptom of inflammatory arthritis is, of course, joint pain. Other symptoms often include:

- Joint redness
- Swelling of the joint
- Loss of joint function
- Joint stiffness

All of these symptoms may be present, or only a few of these symptoms may be present. Flu-like symptoms may also be associated with an autoimmune arthritis condition, and these include:

- Fever
- Chills
- Muscle stiffness
- Loss of appetite
- Headaches
- Fatigue

We may not know exactly what causes inflammatory arthritis, but we do know what causes the symptoms!

When inflammation occurs in the body, chemicals are released into the bloodstream and affected tissues. These chemicals then increase blood flow to the joints that are affected, causing an increase in redness and warmth. Swelling occurs due to the leaking of chemicals from the tissues. Pain is caused because nerves are stimulated during this process.

How Is Inflammatory Arthritis Treated?

There are no cures for any of the inflammatory arthritis conditions. Thus, the goals of treatment are to treat the pain, as well as to reduce inflammation, maintain joint movement and overall strength, as well as the muscular strength, to decrease stress on the joint, and to overall, treat the underlying joint disease.

Thus, treatment of inflammatory arthritis is multifaceted and tailored to each person’s needs. It also may change as the disease process changes. A typically plan includes medications, rest, exercise, and in some cases, surgery to repair joint.

The plan incorporates all (or most) of these treatment modalities, but is also dependent on “the type of disease, the person's age, type of medications he or she is taking, overall health, medical history, and severity of symptoms.”

Many drugs are used to treat inflammatory arthritic conditions. Pain reduction is important – the drugs that are often used treat not only pain but also reduce inflammation. Examples include nonsteroidal anti-inflammatory drugs (NSAIDs) such as aspirin, ibuprofen, and Celebrex. Occasionally, stronger medications called opioids are used as well.

Corticosteroids, such as prednisone, are used to treat inflammation. Often, they are used on a short-term basis due to side effects.

Medications can also be prescribed to slow the progression of the disease. Examples include certain

chemotherapy medications (which are most commonly associated with cancer), disease-modifying treatments, and biologic therapy.