

Identification of patients with early RA

- Inflammatory polyarthrititis (IP) with symptoms of >4-6 weeks
- The 3 S rule: suspect IP if ANY of the following
 - Morning stiffness >30 mins **Stiffness**
 - >2 swollen joints **Swelling**
 - MCP/MTP involvement **Squeeze +ve**

*Emery et al
ARD 2002*

Identification of patients with early RA

- 3S rule are sensitive but not specific (~55%)
 - Some overlap with OA, chronic pain etc
- In early disease won't distinguish RA/psor A
- Rheumatology should aim to see all patients within 12 weeks of symptom onset (BSR)
 - should not go through any intermediate system of care e.g. Tier 2 / ICAT etc

Potential pitfalls

- In early disease
 - ESR / CRP may be low
 - Rheumatoid factor may not be positive
- Response to NSAIDs reflect inflammation therefore don't delay referral if patient responds

Potential pitfalls

- Other diagnoses look similar:
 - SLE (South Asians/Afro-Caribbeans)
 - Chronic infections (Hepatitis/HIV)
 - Malignancy
- Immediate steroid therapy:
 - can mask symptoms
 - Delay definitive diagnosis