Malaysian Family Physician 2006; Volume 1, Number 2&3

Online version: http://www.ejournal.afpm.org.my/

Test Your Knowledge

A MIDDLE-AGED MAN WITH SYMMETRICAL POLYARTHRITIS OF THE HANDS

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Das Gupta E. Test Your Knowledge: A man with symmetrical polyarthritis of the hands. Malaysian Family Physician. 2006;1(2&3):89-90

A 42 year old remiser presented with bilateral symmetrical polyarthritis of the hands for 2 months (see Figures 1 and 2 below). He gave history of early morning stiffness lasting for about 15 minutes. No one in his family has the same type of joint pain. What are the findings and what is the diagnosis?

Figure 1. Both hands

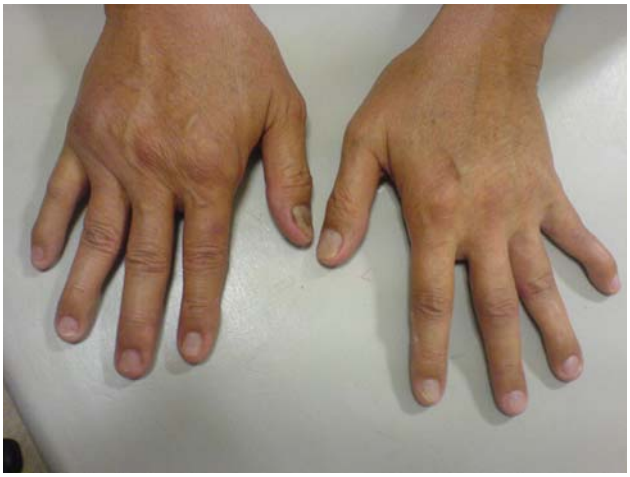
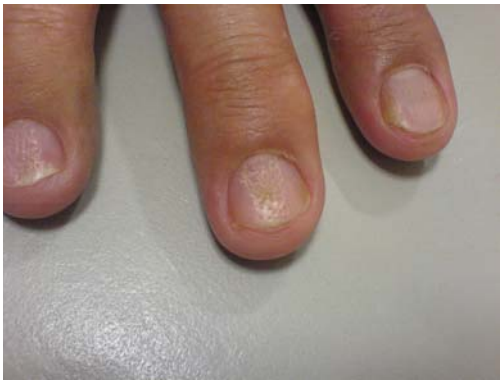


Figure 2. Second, third and fourth digits of right hand



See page 90 for answer

ANSWERS: SUDDEN VISUAL LOSS IN A YOUNG MAN

1. Central serous retinopathy (CSL).
2. CSL is a localised detachment of the sensory retina at the macula, the elevation causing an acquired hypermetropia which can be corrected with a plus lens, e.g. a magnifying glass.
3. CSL is a self-limited disease of young men with type A personality, the condition usually resolve within 1-6 months. However, a small number of cases may pursue a more chronic course and in an even smaller number the condition may progress to permanent visual impairment. This mandates all cases to be referred for evaluation by the ophthalmologist.

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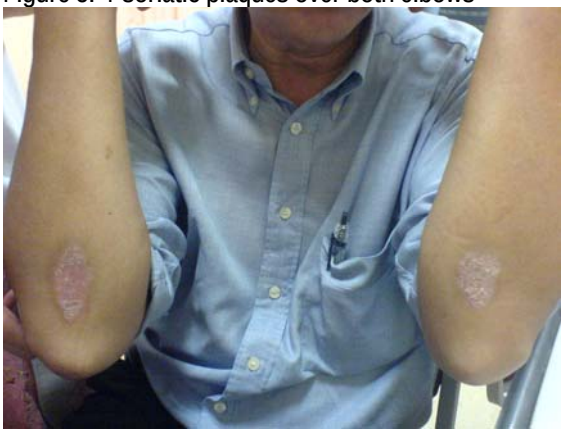
ANSWER: A MIDDLE-AGED MAN WITH SYMMETRICAL POLYARTHRITIS OF THE HANDS

There are swelling of bilateral second and third metacarpophalangeal joints. There is 'swan neck' deformity in the fourth and fifth digits of the right hand, and fifth digit of the left hand. There is onycholysis of fourth digit of right hand and nail pitting was noted in most digits. Even though there is bilateral deforming arthritis, the nail changes do not support the diagnosis of rheumatoid arthritis. The diagnosis is most likely psoriatic arthritis. Typical nail changes in psoriasis are: pitting, ridging, hyperkeratosis and onycholysis.

The patient was examined thoroughly for rashes and psoriatic plaques were found on both his elbows (Figure 3).

Figure 3: Psoriatic plaques over both elbows



Psoriasis is an inflammatory skin condition. Psoriatic arthritis affects 10-20% of people with psoriasis. It is a sero-negative spondyloarthropathy. It occurs more commonly in patients with tissue type HLA-B27. More than 80% of patients with psoriatic arthritis will have psoriatic nail lesions characterised by pitting of the nails, or more extremely, loss of the nail itself (onycholysis). Psoriatic arthritis can develop at any age, however on average it tends to appear about 10 years after the first signs of psoriasis. For the majority of people this is between the ages of 30 and 50, but it can also affect children. Men and women are equally affected by this condition. Many people have psoriasis long before they develop arthritic symptoms, and a few have joint pain for decades before skin symptoms appear. But to receive a diagnosis of psoriatic arthritis, one must have signs and symptoms of both conditions.

There are 5 types of arthritis described in psoriasis:

1. Asymmetric or oligoarthritis. Usually, the digits of the hands and feet are affected first, with inflammation of the flexor tendon and synovium occurring simultaneously, leading to the typical "sausage" appearance (dactylitis). Fewer than 5 joints are affected at any one time.
2. Symmetrical arthritis(rheumatoid like). It is differentiated from Rheumatoid Arthritis by the presence of distal interphalangeal (DIP) joint involvement, the relative asymmetry, the absence of subcutaneous nodules, and a negative test result for rheumatoid factor (RF).
3. Distal interphalangeal joint predominant. It occurs in only 5-10% of patients, primarily men. Involvement of the nail with significant inflammation of the paronychia and swelling of the digital tuft may be prominent, occasionally making appreciation of the arthropathy more difficult.
4. Spondylitis. This occurs in approximately 5% of patients with psoriatic arthritis and has a male predominance. Sacroiliitis occurs in 28% of affected people.
5. Arthritis mutilans. Resorption of bone (osteolysis) with dissolution of the joint, observed as the "pencil-in-cup" radiographic finding, leads to telescoping motion of the digit.

FURTHER READINGS

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