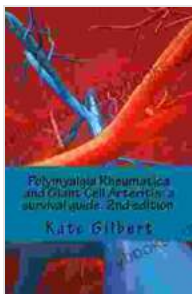


Polymyalgia Rheumatica and Giant Cell Arteritis: A Comprehensive Guide

Polymyalgia rheumatica (PMR) and giant cell arteritis (GCA) are two closely related inflammatory conditions that primarily affect older adults. PMR causes pain, stiffness, and tenderness in the muscles around the shoulders, neck, and hips. GCA causes inflammation of the arteries, particularly the temporal arteries in the head. Both conditions can lead to serious complications if left untreated.

Symptoms of Polymyalgia Rheumatica and Giant Cell Arteritis

The symptoms of PMR and GCA can vary from person to person. However, some common symptoms include:



Polymyalgia Rheumatica and Giant Cell Arteritis: a survival guide. 2nd edition by Kate Gilbert

★★★★☆ 4.5 out of 5

Language : English
File size : 496 KB
Text-to-Speech : Enabled
Screen Reader : Supported
Enhanced typesetting : Enabled
Word Wise : Enabled
Print length : 177 pages
Lending : Enabled

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- Pain, stiffness, and tenderness in the muscles around the shoulders, neck, and hips (PMR)

- Headaches, jaw pain, and vision problems (GCA)
- Fatigue
- Weight loss
- Fever
- Night sweats

Causes of Polymyalgia Rheumatica and Giant Cell Arteritis

The exact causes of PMR and GCA are unknown. However, it is believed that both conditions are related to the immune system. In PMR, the immune system attacks the muscles around the shoulders, neck, and hips. In GCA, the immune system attacks the arteries, particularly the temporal arteries in the head.

Diagnosis of Polymyalgia Rheumatica and Giant Cell Arteritis

PMR and GCA can be diagnosed based on a physical examination and a review of the patient's symptoms. Blood tests can also be used to confirm the diagnosis. In some cases, a biopsy of the temporal artery may be necessary to confirm the diagnosis of GCA.

Treatment of Polymyalgia Rheumatica and Giant Cell Arteritis

The treatment for PMR and GCA typically involves medications to reduce inflammation. These medications include corticosteroids, such as prednisone, and nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen or naproxen. In some cases, other medications may be necessary to control the inflammation.

Complications of Polymyalgia Rheumatica and Giant Cell Arteritis

If left untreated, PMR and GCA can lead to serious complications. These complications include:

- Permanent muscle damage
- Blindness (GCA)
- Stroke (GCA)
- Heart attack (GCA)

Outlook for Polymyalgia Rheumatica and Giant Cell Arteritis

The outlook for PMR and GCA is generally good. Most people with PMR experience a complete recovery within a few months of starting treatment. GCA is a more serious condition, but most people with GCA also respond well to treatment. However, it is important to note that GCA can cause permanent vision loss if it is not treated promptly.

Prevention of Polymyalgia Rheumatica and Giant Cell Arteritis

There is no known way to prevent PMR or GCA. However, early diagnosis and treatment can help to prevent serious complications.

If you think you may have Polymyalgia Rheumatica or Giant Cell Arteritis

If you think you may have PMR or GCA, it is important to see your doctor right away. Early diagnosis and treatment can help to prevent serious complications.

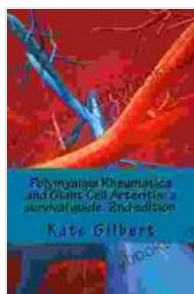
Additional Resources

- Mayo Clinic: Polymyalgia Rheumatica

- WebMD: Giant Cell Arteritis
- Arthritis Foundation: Polymyalgia Rheumatica

****Image Alt Attributes****

* ****Image 1:**** A woman with polymyalgia rheumatica experiencing pain in her shoulders. * ****Image 2:**** A man with giant cell arteritis experiencing pain in his head. * ****Image 3:**** A doctor examining a patient with polymyalgia rheumatica. * ****Image 4:**** A doctor examining a patient with giant cell arteritis. * ****Image 5:**** A group of people taking part in a support group for people with polymyalgia rheumatica and giant cell arteritis.



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