Polymyalgia rheumatica

- Polymyalgia rheumatica is a common condition that causes pain and stiffness in older adults
- Symptoms include severe muscle aches and stiffness, unexplained weight loss and fatigue
- Polymyalgia rheumatica can be treated effectively with medication and lifestyle changes

Call our National Help Line on 1800 263 265

Polymyalgia rheumatica is a condition that causes pain and stiffness in older adults. Typical symptoms include moderate-to-severe muscle pain and stiffness, particularly affecting the neck, shoulders and thighs.

People aged 50 years and over are most commonly affected by polymyalgia rheumatica, and it becomes more common as you get older. It's a common condition and very treatable.

Polymyalgia rheumatica should not be confused with fibromyalgia - a condition that also causes pain and muscle stiffness, but doesn't cause inflammation.

Cause

Polymyalgia rheumatica produces inflammation and swelling in the larger joints of your body, such as your shoulders and hips, and in the tissues around these joints.

The inflammation is due to your immune system attacking the membranes lining your joints, but the reason for this is unknown. Your genetics and environmental factors (e.g. infections) are believed to play a role.

Symptoms

The symptoms of polymyalgia rheumatica usually develop over a short period of time (days/weeks) and may include:

- muscle pain and stiffness, particularly in your neck, shoulders, hips and upper arms
- fatigue (or tiredness)



- increased stiffness after you've been resting or inactive
- difficulty sleeping
- difficulty raising arms above shoulder height
- weight loss.

Not everyone will experience all of these symptoms. Each person with polymyalgia rheumatica will have their own unique set of symptoms.

Risk factors

Risk factors for polymyalgia rheumatica include:

- advancing age it's more common in people aged 50 years and over.
- gender women are more likely to develop the condition than men
- race Caucasian (white) people are most susceptible.

Diagnosis

No single test can diagnose polymyalgia rheumatica, so your doctor will make a diagnosis based on several factors. These include your medical history, a physical examination, tests that measure the levels of inflammation markers in your blood, and tests to rule out other possible causes.

Polymyalgia rheumatica and giant cell arteritis

Some people with polymyalgia rheumatica experience giant cell arteritis (also known as temporal arteritis). Giant cell arteritis involves painful inflammation of the blood vessels (arteries) of your skull. Your temples are tender to touch and chewing may cause some pain in the side of your face.

Giant cell arteritis can cause damage to the arteries of the eye, which can lead to blindness. This damage can be prevented if giant cell arteritis is treated promptly.







See your doctor if you experience headaches, blurred or double vision, if your temples are tender to touch and if chewing causes pain in the side of your face.

Treatment

Most people with polymyalgia rheumatica will be treated with oral corticosteroid medication. The amount prescribed will depend on your specific situation. A higher dose will be prescribed in more severe conditions and when giant cell arteritis is present.

The aim of treatment for polymyalgia rheumatica is to relieve your symptoms and slowly reduce the medication dose to the lowest possible amount without the return of symptoms.

You may also need to take other medications from time to time to help manage your pain. Pain-relieving medications (analgesics) and non-steroidal antiinflammatory drugs (NSAIDs) can provide temporary relief of pain and stiffness.

Creams and ointments can be rubbed into the skin over a painful area to relieve pain.

Complications of oral corticosteroids

Long-term use of oral corticosteroids can cause unwanted side effects, so it's important you see your doctor regularly while taking these medications. If you have any concerns about the side effects of corticosteroids, you should discuss them with your doctor.

Self-management

You can do many things to help yourself including:

Learn more about polymyalgia rheumatica – knowing as much as possible about your condition means that you can make informed decisions about your healthcare and play an active role in the management of your condition.

Get active – low-impact activities such as swimming or walking can help reduce muscle pain and stiffness. A physiotherapist or exercise physiologist can help design an individual program for you.

Learn new ways to manage pain – there are many things you can do to manage pain - and different strategies will work for different situations. For example, heat packs can help ease muscle pain, cold packs can help with inflammation, gentle exercise can help relieve muscle tension. Try different techniques until you find what works best for you.

Eat well – eating a balanced diet can help provide you with better energy levels, help to maintain your weight, and give you a greater sense of wellbeing.

Pace yourself – plan and organise your activities so you make the most of your energy.

Stay at work – it's good for your health and wellbeing. Talk to your doctor or allied healthcare professional about ways to help you to get back to or to stay at work.

Join a peer support group – dealing with a chronic condition can be isolating. Being able to speak with others who understand your condition can be a great

Where to get help

- Your doctor
- Rheumatologist
- MOVE muscle, bone & joint health National Help Line: 1800 263 265

Things to remember

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How we can help

Call our National Help Line and speak to our nurses Phone 1800 263 265 or email helpline@move.org.au

Visit our website move.org.au for information on:

- muscle, bone and joint conditions
- ways to live well with a muscle, bone and joint condition
- our new resource Managing your pain: An A-Z guide
- programs and services
- peer support groups
- upcoming webinars, seminars and other events.

More to explore

- **Arthritis Research UK** www.arthritisresearchuk.org
- **Better Health Channel** www.betterhealth.vic.gov.au