Orthopaedic Connection

Osteoarthritis or Rheumatoid Arthritis?

By Thomas J. Haverbush, M.D.
Orthopaedic Surgeon

Transforming patient information into patient understanding.

While osteoarthritis and rheumatoid arthritis both share the word arthritis, they are completely different. I find that my patients get confused by all the arthritis terms. Incidentally, did you know that there are more than one hundred different types of arthritis?

Relax, we are not going to cover all of them! I’m not that mean and besides I would lose all six of you who read this each week!

Osteoarthritis

Hopefully, a light bulb will go on. Last week I talked about hyaline cartilage being the magic stuff that covers the ends of bones in movable joints. Osteoarthritis is a disease of hyaline cartilage that cushions the ends of bones within a joint. Osteoarthritis is 90% of all arthritis cases in the world. Osteoarthritis = degenerative arthritis in which the joint surface begins to break down or wear out.

Stages

Healthy joint – no problem
Beginning – hyaline cartilage begins to wear away. It can take years.
Moderate – considerable loss of hyaline cartilage and moderate inflammation.
Advanced – total loss of hyaline cartilage, bones touch, spurs form, severe inflammation.

Causes

Genetic – blame your parents or grandparents
Mechanical stress on a joint
Excess weight
Previous injury – sports, etc.
Infection
Advancing age

Triple jeopardy – older person, who was in sports and now has excessive weight.

Rheumatoid Arthritis
It is completely different. RA is a so called autoimmune disease of the joint lining, that is, the synovium. It is the most common type of inflammatory arthritis.

**Friendly Fire**

It has been said that a faulty immune system engages in “friendly fire” somehow triggering a gradual destructive attack upon the joints as well as on organs throughout the body.

**Beginning**

RA usually begins in the joints of the hands and feet and often affects the same joint on both sides of the body. The synovial joint lining becomes inflamed and swollen. The synovium releases certain enzymes into the joint that, over time, eat away and destroy the hyaline cartilage. As the hyaline cartilage is destroyed the cushion is lost, and bones rub together causing increased pain and disability.

**Rapid Action**

Damage to joints occurs quickly in RA. 90% of patients show bone and joint erosion in the hands and feet within the first 2 or 3 years of onset.

Why does the immune system do this? No one knows. If I find out, I will be going to Sweden to accept the Nobel Prize in Medicine! I don’t expect to be going soon.

**OA, RA Differences**

- Osteoarthritis affects and damages mostly weight bearing joints. Rheumatoid arthritis can and does affect all joints and has effects throughout the body.
- Osteoarthritis is more common in people over 60. Peak onset for RA is between 30 – 40.
- Osteoarthritis in general seems to occur equally in men and women. Rheumatoid arthritis is more common in women.
- Osteoarthritis affects the outer or distal joints in fingers, whereas RA affects the knuckles.
- Morning stiffness is common to both, but lasts for hours in RA.

This is a depressing subject I’ll admit. The good part is that we are able to help most of these unfortunate patients at least somewhat to be more comfortable, if not pain free and to be more functional.

I deal with all the aspects of treatment of Osteoarthritis and some of the aspects of RA. Rheumatology, a subspecialty of Internal Medicine usually manages the many medical aspects of rheumatoid arthritis.

Check out our office teaching website [www.orthopodsurgeon.com](http://www.orthopodsurgeon.com), which takes you to Your Orthopaedic Connection for lots more great information.
Our goal is simple – To help people return to more pain free, functional lives. I specialize in you.

Good health. Good life. All the best to you.

Be well.

Dr. Haverbush