

# Aggressive nature of hand osteoarthritis

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In just two years, patients with hand osteoarthritis (OA) experienced a significant increase in pain and functional limitations, according to new data presented today at EULAR 2007, the Annual European Congress of Rheumatology in Barcelona, Spain. Statistically significant radiological progression was also detected in 20% of subjects.

OA is the most common form of arthritis. It generally affects older people, especially women and can occur in multiple areas of the hand and wrist, causing pain and stiffness and affecting everyday activities requiring fine motor control and hand grip e.g. writing. Over time, if left untreated, the bones that make up the joint can lose their normal shape, causing further pain and limited motion. However, knowledge about the progression of hand OA and effective therapies to prevent its progression has been lacking.

Led by Dr Stella Botha-Scheepers of Leiden University, The Netherlands, this study followed 172 patients (mean age 60.5 years, 78.5% women) with hand OA (defined by the American College of Rheumatology criteria) for two years, assessing: pain intensity upon lateral pressure in the DIP, IP, PIP and CMC 1 joints on a four-point scale; self-reported hand pain and functional limitations with subscales of the Australian/Canadian Osteoarthritis Hand Index (AUSCAN LK 3.0); and osteophytes and joint space narrowing in the right and left DIP joints, IP joints of the thumbs, PIP joints and CMC 1 joints through standardized radiographs.

Despite a relatively short follow-up period of two years, statistically significant increases in pain intensity on lateral pressure standard response mean (SRM) 0.67), AUSCAN pain scores (SRM 0.25) and AUSCAN function scores (SRM 0.23) occurred. Statistically significant radiological progression was also seen in 20% of patients, in terms of joint space narrowing (SRM 0.34) and osteophytes (SRM 0.35), with progression of osteophytes occurring more often in women and

middle-aged patients, and especially in women in an early post-menopausal stage.

Dr Botha-Scheepers commented: "The findings of this study underline the critical need for early, effective intervention in hand OA to prevent irreversible progression, given the dramatic deterioration of clinical and radiological disease status seen in just two years."

Hand OA tends to appear in a predictable pattern, most commonly affecting the small joints of the fingers and the joint at the base of the thumb. It can be diagnosed by medical examination and X-rays of the hand. Treatment options for arthritis of the hand and wrist include oral medication, injections, splinting and surgery.

Source: European League Against Rheumatism

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