## Primary Care Assessment

### Symptoms & Signs
- Morning stiffness > 45 minutes
- Symmetrical joint pain, (particularly hands & feet)
- Synovitis (soft tissue joint swelling) on examination

### Red Flags
- Difficulties with ADLs
- Work absence, job loss
- Symptoms occurring post-partum

### Primary Prevention
- Smoking cessation – smoking is associated with increased risk and severity of RA

## Referral Advice

### Rationale
- Early intervention improves outcome
- Ideally patients should be seen in Secondary Care within 12 weeks of symptom onset

### Referral Criteria
- Any patient with new soft tissue swelling (i.e. SYNOVITIS) of one or more joints
- Women in post-partum period with new onset joint pain and stiffness
- Patients with joint pain and prolonged morning stiffness

### Investigations
- Do not wait for the results of investigations before referral if synovitis is present.
- Please send blood for FBC/ESR, U&E/LFT/CRP and RF – the results will be available at the patient’s OP appointment on Clinical Portal

## Secondary Care

### Assessment
- We aim to see patients with synovitis quickly, preferably within 2 weeks
- If the results of investigations taken in Primary Care are available, treatment can be started at the first visit

### Multi-Disciplinary Team
- Patients will be offered help from physio, OT and podiatry as required
- Patients will be given written educational material and a contact number for a named Clinical Nurse Specialist

### Treatment
- Virtually all patients will require DMARD therapy
- Outcomes improve dramatically with ‘intensive management’ of RA – frequent and detailed assessment of the joints (every 1-3 months)

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Early diagnosis, referral and treatment improves outcomes!