

## Epidemiology and Treatment of Polymyalgia Rheumatica

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### DESCRIPTION

Polymyalgia Rheumatica is an inflammatory syndrome that leads to muscle pain and stiffness, particularly in the shoulders and hips. Complications and symptoms of Polymyalgia Rheumatica generally begin rapidly and are reduced in the morning. It sounds severe, even violent, but it responds exquisitely to suitable treatment. Polymyalgia Rheumatica (PMR) is painful and sometimes causes an immobilizing condition associated with Giant Cell Arteritis (GCA), a rare disease.

The main common indication of Polymyalgia Rheumatica is pain and rigidity in the shoulder muscles. It develops rapidly within a few days or weeks. Polymyalgia Rheumatica patients may experience pain in their neck and hips. It usually affects both sides of the body. The significant cause of Polymyalgia Rheumatica is unidentified. As per a recent study, it may be caused by viruses that affect the immune system.

Polymyalgia Rheumatica may develop due to a combination of environmental and genetic factors. People who are older than 50 years are mainly affected by Polymyalgia Rheumatica. This condition was mainly observed in women, rather than men. It is more common in people of European ancestry, although it can arise in all social groups. PMR can cause another condition called giant cell arteritis, which is also known as temporal arteritis. During this condition, arteries on either side of the forehead and in other parts of the body, such as the heart and lungs, become inflamed. If it affects the arteries present in the eyes, it can lead to blindness. More than 16% of people with PMR have the symptoms of giant cell arteritis, and more than 60% of those who are suffering from giant cell arteritis also have PMR. Giant cell arteritis and PMR may be variations of a similar infection. This mild inflammation in the joints and tissues causes pain and stiffness.

The average patient was over 70 years old at the onset of the disease. The significant symptom of Polymyalgia Rheumatica is pain in the shoulder and lower back with marked stiffness lasting at least an hour. Inflammatory indications, including erythrocyte sedimentation rate and C-reactive protein, are almost always elevated in the early stages of the disease. Some manifestations of Polymyalgia Rheumatica include malignancies,

infections, metabolic bone disease, and endocrine disorders. Giant cell arteritis occurs in at least 30% of patients, and symptoms and signs include new headaches, scalp pain, jaw pain when chewing, and visual disturbances (which should be evaluated by dynamic biopsy, temporal vessels). Polymyalgia Rheumatica is treated with glucocorticoids with an initial dose of 15 mg of prednisone per day and symptoms are markedly improved.

### Symptoms of Polymyalgia Rheumatica (PMR)

There are various symptoms of PMR, such as fatigue and loss of energy, fever and/or night sweats, weight loss, depression, headaches, and loss of appetite. In some circumstances, the onset of PMR can be rapid and theatrical, with severe signs mainly appearing overnight. In other circumstances, this disease appears slowly over a period of two weeks. Symptoms are frequently more visible later in a period of inactivity. The symptoms of PMR are similar to some disorders such as osteoarthritis, fibromyalgia, osteoarthritis, and rheumatoid arthritis. Hence, it is important to notice the symptoms before a diagnosis of PMR is made. There is no test to diagnose Polymyalgia Rheumatica. However, there are several blood tests that can diagnose the presence of inflammation.

Oral corticosteroids are used as first-line treatment for Polymyalgia Rheumatica. They improve muscle stiffness and reduce the pain of the disease. Painkillers such as paracetamol, which are known as non-steroidal anti-inflammatory drugs, can reduce pain. They are taken along with steroids. In order to prevent inflammation, one should not consume alcohol, foods with added sugar, margarine, red meat, refined carbohydrates, fried foods, sugary drinks, or processed meats, such as salami or hotdogs. A person suffering from Polymyalgia Rheumatica can recover from the disease in 5 years.

Although some types of IRIS have well-defined clinical symptoms and epidemiology, but there are no conclusive diagnostic tests or evidence-based therapeutic options. Drug-related side effects include diabetes, hypertension, hyperlipidemia, and osteoporosis. These side effects should be monitored and measures taken to prevent and manage them.

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