

Beebe Healthcare
Margaret H. Rollins School of Nursing
N101 – Foundations of Nursing

	OA	RA
Patho	Gradual loss of articular cartilage due to the cartilage becoming less elastic this leads to the articular surface becoming worn and cracked thus leading to the formation of osteophytes.	Chronic systemic autoimmune disease, inflammation of the connective tissues in the synovial joints. Exact cause of RA is unknown. CD4 cells are activated stimulating monocytes and macrophages which release proinflammatory cytokines the more inflammation goes on it thickens the synovium where the articular cartilage meets leading to granulated and eroded surface of the cartilage.
Risk Factors	Age, decreased estrogen at post menopause, obesity, anterior cruciate ligament injury, frequent kneeling and stooping, smoking and trauma	Age, obesity, smoking, family history/genetic makeup, post menopause women
S&S	Inflammation, Joint Pain, Joint tenderness, Joint stiffness, Crepitation, Mild joint effusion, Joints aren't symmetric, decreased ROM	Joints tender, painful, and warm to touch, fatigue, anorexia, wt loss, stiffness, limited motion, signs of inflammation, tenosynovitis, deformity
Dx	Bone Scan, CT, MRI, x-ray, synovial fluid analysis	Anti-CCP, ANA, ESR/CRP, synovial fluid analysis, tissue biopsy, x-ray but only for progression
Tx	No cure- may manage with treatment such as drug therapy, injections, acupuncture, massage, tai chi, and natural supplements, surgical therapy	Heat and cold therapy, drug therapy, exercise, nutrition therapy, surgical therapy,
NI	Following ADL plans given by PT Elevation Allowing Rest Administering meds Ice or heat packs Educate	Assessment Administering meds ROM exercises Heat and ice packs Education Relaxation techniques

