

TABLE 358-3 ACR/EULAR Provisional Definition of Remission in Rheumatoid Arthritis

At any time point, patient must satisfy all of the following:

Tender joint count ≤ 1

Swollen joint count ≤ 1

C-reactive protein ≤ 1 mg/dL

Patient global assessment ≤ 1 (on a 0–10 scale)

OR

At any time point, patient must have a Simplified Disease Activity Index score of ≤ 3.3

Abbreviations: ACR, American College of Rheumatology; EULAR, European League Against Rheumatism.

Source: Reproduced with permission from DT Felson et al; American College of Rheumatology/European League Against Rheumatism provisional definition of remission in rheumatoid arthritis for clinical trials. *Arthritis Rheum* 63:573, 2011.

PHYSICAL ACTIVITY AND ASSISTIVE DEVICES

In principle, all patients with RA should receive a prescription for exercise and physical activity. Dynamic strength training, community-based comprehensive physical therapy, and physical-activity coaching (emphasizing achieving 150 min of moderate-to-vigorous physical activity per week) have all been shown to improve muscle strength and perceived health status, as well as improve DAS-28 scores and inflammatory markers. Foot orthotics for painful valgus deformity decrease foot pain and may reduce disability and functional limitations. Judicious use of wrist splints can also decrease pain; however, their benefits may be offset by decreased dexterity and variably curb grip strength.

SURGERY

Surgical procedures may improve pain and disability in RA with varying degrees of reported long-term success—most notably the hands, wrists, and feet. For large joints, such as the knee, hip, shoulder, or elbow, the preferred option for advanced joint disease may be total joint arthroplasty. A few surgical options exist for dealing with the smaller hand joints. Silicone implants are the most common prosthetic for MCP arthroplasty and are generally implanted in patients with severe decreased arc of motion, marked