

Transcript Details

This is a transcript of an educational program accessible on the ReachMD network. Details about the program and additional media formats for the program are accessible by visiting:

<https://reachmd.com/programs/beyond-skin-deep/could-you-be-missing-symptoms-in-your-psa-patients/10149/>

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Could You Be Missing Symptoms in Your PsA Patients?

Announcer:

This is ReachMD, and you're listening to Beyond Skin Deep: Impacts of Psoriatic Arthritis, sponsored by Lilly.

Host:

Coming to you from the ReachMD studios in Fort Washington, Pennsylvania, I'm Dr. Matt Birnholz. On this episode, we caught up with Dr. Joseph Huffstutter, Assistant Clinical Professor at the University of Tennessee College of Medicine at Chattanooga. Dr. Huffstutter spoke with us about his communicative methods to uncover ongoing symptoms of psoriatic arthritis from patients who aren't comfortable sharing this information. Here's what he shared with us from his rheumatology practice in Hixson, Tennessee.

Dr. Huffstutter:

This is a difficult question to answer because patients have different pain tolerances. I have found that many of my psoriatic arthritis patients really just put up with a lot of problems and don't actively complain so that I have to do a very careful physical exam, not only squeezing their joints but taking them through a range of motion. Because enthesitis and dactylitis are such a prominent component of

this illness, then they may not have specific joint complaint, but as you do your joint exam, you'll find that they can't make a tight fist or can't extend their elbows completely or can't raise their shoulders over their heads and never really complain about it, so I think it's really important to do a careful physical exam. Periodic imaging can be helpful too, so that x-rays in a timely fashion or ultrasound can help you understand if they have got active synovitis. Lab may or may not be helpful. I have had patients that can destroy joints and have normal sed rates and CRPs, but then I've also had patients that will have had a high sed rate or CRP and that can move them toward agreeing to having therapy.

And the final thing that I want to mention, and I think it's key to really understanding how to control these symptoms, and that is to involve family members and significant others. I really think that's imperative. We encourage all our new patients to bring in their spouse or significant other or interested family member so that not only can they help relate their symptoms but also listen to what we have to say about the etiology and nature of the illness that they have. I can't tell you the number of times that patients will come in and say, "I'm doing great," and their spouse will call time out and say, "No, they are not doing great. Here is what I have to do to get them going every morning." And when confronted with these facts, the patient will say, "Yeah, I just didn't want to be a complainer, and I didn't want to think that I couldn't deal with this." And I try to tell patients that my goal is to be a good rheumatologist and to care for their arthritis, but I am a terrible mind reader. I've got to listen to them, and they need to tell me what's going on in their lives so that we can address these issues. Just because they complain of a particular problem doesn't obligate them to certain therapies, but we really need to lay our cards on the table and understand what's going on so that we can make informed decisions.

Host:

That was Dr. Joseph Huffstutter sharing methods to uncover hidden symptom control issues among patients with psoriatic arthritis. For ReachMD, I'm Dr. Matt Birnholz inviting you to be part of the knowledge.

Announcer:

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