

Disease	Typical age of onset	M:F Ratio (Prevalence /100K US population)	Typical Sites of Involvement	Clinical Manifestations	Lab Diagnosis (in addition to CBC with differential, UA, CRP & ESR)
Rheumatoid Arthritis <i>Chronic destructive autoimmune synovitis</i>	40-50 years	1:3 (500/100K)	Bilateral & symmetrical: small joints of the hand (PIP, MCP), wrist, elbow, knee, & foot (MTP),	Morning stiffness, warm, tender, swollen joints, provoked by inactivity, subcutaneous nodules. Associated with Sjogrens syndrome (dry mucous membranes)	RA factor, anti-CCP antibody test
Ankylosing Spondylitis <i>Chronic joint inflammation leading to bony fusion</i>	20-40 years	3:1 (130/100K)	Symmetric sacroiliitis, lumbar and lower thoracic spine, ribs, asymmetric lower extremities	Intermittant LBP and stiffness provoked by inactivity, night time pain, aortic regurgitation	HLA B27 (90%)
Psoriatic Arthritis <i>Inflammatory arthritis preceded by psoriasis</i>	35-45 years	1:1 (100/100K)	Asymmetric hands, wrists, ankles, feet, sacroiliitis, cervical spine, DIP joint	Psoriasis, enthesitis, dactylitis (sausage appearance), nail dystrophy	HLA B27 (40%)
Reactive Arthritis/ Reiters syndrome <i>Reaction secondary to enteric infection or UTI</i>	20-40 years	5:1 (35/100K)	Asymmetric sacroiliitis, lumbar spine and lower extremities	Nearly clinically identical to AS, provoked by inactivity, inflammation of the; joints, urinary tract and eyes, ulcerations of the skin and mouth enthesitis, dactylitis, uveitis, aortic regurgitation, "flu-like" symptoms	HLA B27 (80%)
Enteropathic Arthritis <i>Chronic inflammatory arthropathy secondary to Crohns or UC</i>	Any age	1:1 (65/100K)	Symmetric sacroiliitis, lower extremities	Self-limiting but recurrent- correlating with bowel disease	HLA B27 (30%)
SLE <i>Chronic autoimmune disease of skin, joints and organs</i>	16-55	1:10 (45/100K)	Asymmetric fingers, hands, wrists and knees	Fatigue, headache, joint pain disproportionate to swelling, fever, "flu-like" symptoms, malar rash (50%), photosensitivity, hair loss, discoid lesions, migratory pattern, episodic. Associated with Sjogrens syndrome. 11 diagnostic criteria	Leukopenia, ANA, Sjogren's syndrome A, Sjogren's syndrome B antibodies
Scleroderma <i>Overproduction of collagen in skin and/or organs</i>	30-50	1:4 (25/ 100K)	"Localized" affects only skin, "Systemic" affects organs; esophagus, colon, lung, heart, kidneys	Raynauds, GERD, skin changes: tight, thickened or shiny skin (especially fingers and face)	
Lyme Disease <i>Bite from black-legged tick infected with Borrelia burgdorferi</i>	Bimodal age 5-19 and >30	1:1 (9/100K)	Polyarticular, knee	Initial "flu-like" symptoms beginning days or weeks post tick bite, expansile "bullseye" rash (75%), if untreated, episodic pain and swelling of joints. Late symptoms include; paresthesias, weakness, facial paralysis	ELISA for Lyme, Western blot
Septic Arthritis <i>Joint infection via puncture or spread from another body infection</i>	young & elderly (>65)	1:1 (8/100K)	Monoarticular, adults- knee, children- hip	Low-grade fever (40-60%), pain (75%), and impaired range of motion.	Joint aspiration & culture, blood culture
Gout <i>Uric acid crystals accumulate in and around joints</i>	>40	9:1 (500/100K)	Monoarticular, great toe, less commonly ankle or knee	Sudden, severe joint pain and swelling lasting days, tophaceous deposits at the helix of the ear or extensor surfaces of fingers	Uric acid in blood, joint aspiration
Pseudogout/ CPPD <i>CPPD crystals accumulate in joints</i>	>60	1:1 (130/100K)	Monoarticular, knee, less commonly ankle, wrist or elbow	Sudden, severe joint pain and swelling lasting days	Joint aspiration
Polymyalgia Rheumatica <i>Acute inflammatory myopathy</i>	70	1:2 (52/ 100K)	Hip and shoulder girdle	Rapid development of "flu-like" symptoms, especially myalgia and inactivity stiffness, limited range of motion, weakness, fever, weight loss. Associated with Giant cell arteritis (15% of cases).	ESR, CRP
Polymyositis <i>Chronic progressive inflammatory myopathy</i>	45-60	1:2 (<.8/100K)	Symmetrical skeletal muscles near trunk; hips, thighs, shoulders, upper arms and neck	Mild joint and muscle tenderness, fatigue and shortness of breath. Slowly progressive muscle weakness leading to difficulty moving swallowing or speaking. Dermatomyositis affects skin also.	CPK, urine myoglobin, serum aldolase, EMG/NCV and muscle biopsy