

Rheumatoid Hand

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A 48-year-old woman presented with history of symmetric inflammatory polyarthritis for 8 years. She was diagnosed as having rheumatoid arthritis on the basis of high-titer rheumatoid factor positivity (>1300 IU/mL) and elevated erythrocyte sedimentation rate (58 mm/h) and C-reactive protein (7.12 mg/dL). She has been on disease-modifying drugs (methotrexate, leflunomide, prednisolone) for the past 4 years. She could not afford biologics and developed deformities in the hands with significant functional limitation. Examination revealed dorsal subluxation of metacarpal

heads, ulnar deviation of fingers, swan neck deformity in multiple fingers, boutonniere deformity of the left fourth and fifth fingers, and hitchhiker's thumb on the right (Figure, arrows). Radiograph of the hands showed significant juxta-articular osteopenia with erosions at multiple metacarpophalangeal and interphalangeal joints and the previously mentioned deformities. It is unusual to find such varied and characteristic hand deformities in a single patient in the current biologic era and emphasizes the need to treat early and adequately to achieve low disease activity or remission.

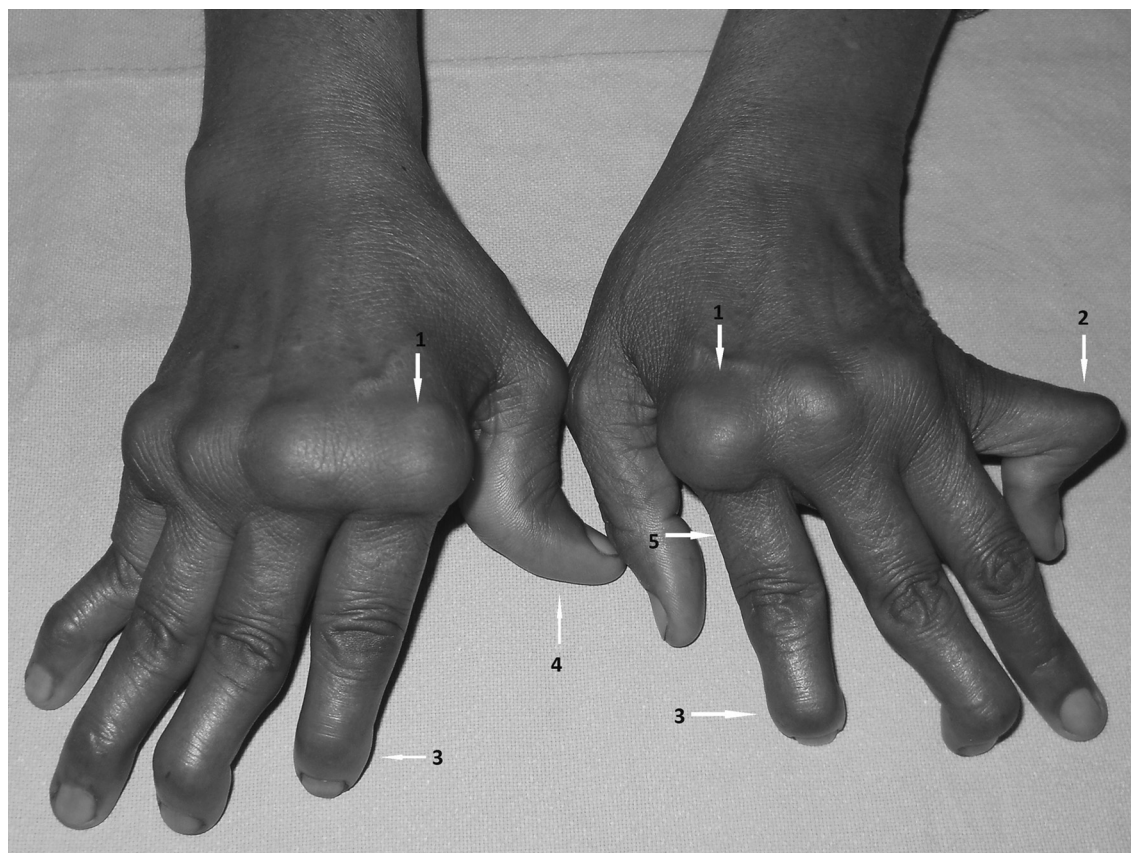


FIGURE 1. Photograph showing deformities typical of rheumatoid arthritis. Labels for arrows: (1) dorsal subluxation of metacarpal heads, (2) boutonniere deformity, (3) swan neck deformity, (4) hitchhiker's thumb, (5) ulnar deviation of fingers. Color available online only at www.jclinrheum.com.

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