

What Are the Symptoms of Psoriatic Arthritis?

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Spotting Early Warning Signs for a Better Prognosis and Easier Treatment

Psoriasis is well-known for thick, scaly patches of red, itchy skin, but the problem can run deeper than that. Around 30 percent of psoriasis sufferers will also see symptoms of the disease under their skin, in their joints (most often the small joints of the fingers and toes).

The symptoms can come on quite suddenly, or build up over a stretch of time. Some people will notice the inflammation in just one knuckle, while others will suffer extreme joint pain and swelling in several sites around their body.

Living with sore, swollen knuckles can be challenging and discouraging, but psoriatic arthritis is more than a discomfort — it can also be quite dangerous if left untreated. However, if you know how to spot the first signs of the condition, you stand a much better chance of bringing it under control and sidestepping permanent complications.

Telltale Signs and Symptoms of Psoriatic Arthritis

Psoriasis begins when your immune system mistakenly targets healthy tissue as a foreign invader and unleashes a powerful and damaging immune response to eradicate it. When that response is funneled to the joints instead of the skin, psoriatic arthritis develops.

Just as psoriasis inflames the skin tissue, psoriatic arthritis inflames the tissue in and around the joints. Some of the most common symptoms include:

Painful Joints and Tendons

Arthritis is a painful disease, in all its forms. Psoriatic arthritis brings pain to the joints, most often the knees, ankles, fingers, and toes, but sometimes in the lower back, too. The pain isn't limited to the bones: in many cases, the tendons or ligaments will also suffer. In fact, it's possible to mistake this as a sports injury, like tennis elbow or Achilles heel strain.

Swelling in the Joint and Beyond

Swollen knuckles are major hallmarks of psoriatic arthritis, but the tissue around the joints can also swell up. This will leave you with thick, puffy fingers and toes, without much discernable tapering towards the tips.

This symptom sets psoriatic arthritis apart from rheumatoid arthritis, which tends to only affect the area immediately around the joint.

Stiffness and Reduced Range of Motion

With swelling comes stiffness, and you'll probably notice less of range of motion in your affected joints. When the tissues are inflamed, there is less space for the bone to move in and around the joint, so the limb (or finger or toe) will no longer bend as far as before, or circle as wide.

Nail Changes on Fingers and Toes

As the small joints in the fingers and toes are affected, the nails can also bear signs of inflammation. You may notice the psoriasis nail surface becoming uneven, thickening, or beginning to change color.

Pits will often form, and the nail could lift away from the nail bed completely. Once the nail breaks up and chips away, your fingertip and toes could be more prone to injury or infection.

Fatigue

Psoriatic arthritis symptoms may show up in certain joints, but it is an autoimmune disease, and that means it can affect the whole body via the overactive immune response. It's not uncommon to feel worn out or experience psoriasis fatigue, since your body is focusing energy on fighting the (false) invader.

This inflammation can flare-up and calm down sporadically, or else it can stick with you once it first appears. If you don't begin treatment, the joint and tissue damage can get worse and worse until the joints are permanently disfigured.

Next page: how psoriatic arthritis is diagnosed.

Diagnosing Psoriatic Arthritis

Early detection, diagnosis and management is crucial, but it can be more difficult to arrive at the correct diagnosis than you may think. There are several types of psoriatic arthritis, and each can present a slightly different set of symptoms.

Symmetric psoriatic arthritis: half of all psoriatic arthritis cases fall under this category. Symptoms are symmetrical — they show up in the same place on both sides of the body, at the same time. In this sense, it bears more resemblance to rheumatoid arthritis.

Asymmetric psoriatic arthritis: asymmetric psoriatic arthritis doesn't appear in the same joints on each side of the body. Around 35 percent of psoriatic cases can be classified as asymmetric, and it's often milder than other forms of the disease.

Distal psoriatic arthritis: targeting the ends of the fingers and toes, the distal type can be more visibly disturbing than other types of psoriatic arthritis. In many cases, the small knuckles will become bulbous and the nails will begin to thicken, pit and lift from the nail bed.

Arthritis mutilans: the most severe form of psoriatic arthritis is also the least common — only about 5 percent of patients develop it. But for those who do, the symptoms can progress quickly, often causing permanent deformity in the tips of the fingers and toes.

Spondylitis: this form affects the joints in the neck and spine, and can mimic other common back pain when it acts up. However, like other forms of arthritis, symptoms sometimes show up in other areas, especially the knees and ankles.

If you have any of these symptoms, it's time to consult your doctor. They will begin with a physical exam and perhaps blood tests to search for inflammatory markers.

However, there is no single test that will reveal psoriatic arthritis, and your doctor may not be able to offer a final

diagnosis. Instead, expect a referral to a rheumatologist, who is better equipped to differentiate arthritic conditions.

Could It Be Something Else?

Psoriatic arthritis can mimic osteoarthritis (the most common type of arthritis), gout or rheumatoid arthritis, but each of these forms of arthritis calls for a different plan of action.

There are some helpful diagnostic criteria to rule out other conditions. For instance, if the inflammation comes on suddenly and severely affects a single joint, gout may be to blame.

On the other hand, if the joint in painful but there is hardly any swelling, it's more likely that the problem is osteoarthritis. The bottom line is that it can take some time, and several diagnostic approaches, to find the right diagnosis. Work with a doctor you trust, and communicate openly and honestly to help move the process along.