



Rheumatoid arthritis (RA) is a chronic long-term inflammatory autoimmune disease that causes pain, swelling, stiffness, and loss of function in the joints. RA can cause damage to your joints shortly after it starts—during the first 1 to 2 years. For this reason, it's important to diagnose and manage RA early.<sup>1</sup>

### **Treatment Goals**



For people with RA, the most important goal of treatment is to help you maximize long-term health-related quality of life. This can be done by:1,3

- · Controlling pain and other symptoms
- · Preventing or slowing damage to joints and bones
- Regaining normal function
- Improving your ability to participate in daily-life activities

The most important way to reach these goals is to reduce joint inflammation to the lowest level possible and to put RA into remission.



## **Treat to Target**





Treat to target or T2T is an approach to managing RA treatment that sets remission or low disease activity as the goal—which means few to no symptoms and less long-term joint damage. A rheumatologist (roo-muh-tol-uh-jist) will perform regular testing and evaluation of RA disease activity to monitor progress toward this goal. Your treatment plan may be adjusted if low to no disease activity isn't reached. These changes may include increasing the dosage of RA medicine, adding a new RA medicine, or switching to a different RA medicine. This process will continue until the goal is achieved.<sup>2</sup>

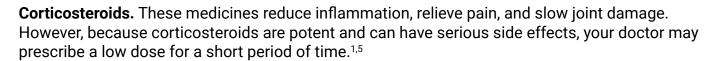
## **Medicines Used to Treat RA**



Although there is no cure for RA, there are medicines available to help relieve symptoms and stop or slow damage to your joints. No single treatment works for everyone with RA. Your doctor may prescribe a combination of treatments over your lifetime and make adjustments based on your symptoms and severity of disease. Talk with your doctor about your treatment options and the risks and benefits of different RA medicines.<sup>1,4</sup>



NSAIDS such as ibuprofen, aspirin, and naproxen may be used to decrease pain and lower inflammation.<sup>1,5</sup>



**Disease-modifying antirheumatic drugs (DMARDS).** DMARDS can help put RA into remission by slowing or stopping the progression of joint damage and deformity. DMARDs can take weeks or months to be effective.<sup>1,5</sup>

**Biologics.** These medicines are also DMARDs. They work quickly to slow or stop inflammation that leads to joint damage. Biologic DMARDS are usually reserved for those with RA that's harder to control. Serious side effects can occur with these medicines.<sup>1,5</sup>

Janus kinase (JAK) inhibitors. These medicines are also DMARDS. They work to block signals from within specific cells to stop inflammation. JAKs can also be used to treat RA that's harder to control. Serious side effects can occur with these medicines.<sup>1,5</sup>



Other treatments for RA may include physical therapy, occupational therapy, and surgery.1



Treating and managing RA usually takes a team that includes you the patient. Your health care team may include:1

- Your primary care doctor or other health care provider
- A rheumatologist (arthritis specialist)
- A physical therapist
- · An occupational therapist
- A dietitian
- · A nurse educator

### Regular medical checkups are important in managing RA. They help your doctor:1

- Monitor the progression of your RA
- Check the effectiveness of your treatments and make adjustments as needed
- Talk to you about any side effects and how they may be affecting you
- Monitor you for other medical conditions that are associated with RA or the medicines you take

When you receive ongoing care, it also gives your doctor the opportunity to determine if you need additional tests such as x-rays, ultrasounds, blood tests, and urine tests.

These visits also give you a chance to talk about your treatment and any questions or concerns you may have.

# Living with RA



Here are some things you can do to manage your RA and ease pain and fatigue. 1,6,7

**Be physically active.** Try to move every day. Take stairs instead of elevators if you're able. When running errands or going to work, park further away and walk more. Exercise more when your RA is not active. Talk to your doctor before you make changes to your physical activity level.



**Rest.** Get more rest when your RA is active and your joints feel painful, swollen, or stiff. Rest helps reduce inflammation and fatigue that can come with a flare. Preserve your energy and protect your joints by taking breaks throughout the day.

**Care for your joints.** Ask your doctor or physical therapist about tools, such as large grip items and zipper-pullers, which can help make some of your daily activities easier to do. Also ask about using a splint for a short time to help rest a painful joint.

**Topicals.** Try topical products that are applied directly to the skin, such as creams, gels, or patches to help reduce pain in a joint or muscle. Talk with your doctor first.

**Finds way to manage stress.** Techniques like yoga, meditation, massage, and acupuncture can help you feel less stressed, more relaxed, and less focused on your pain.

**Choose healthy foods.** Eating a balanced, nutritious diet is important for your overall health and can help maintain a healthy weight. Ask your doctor about an eating plan that's right for you.

**Monitor your symptoms.** Talk to your doctor about changes in your symptoms or if any new symptoms develop. This can help you and your doctor manage your pain if you have a flare.

**Get support.** Living with RA can be a challenge. If you feel depressed, anxious, or alone, talk to your doctor or mental health professional about finding support to help you cope. Talk to your family and friends to help them understand RA and how it affects you. Join an online or community RA support group.

**Don't smoke.** In addition to increasing your risk of getting RA, smoking can make the disease worse and lead to other health problems.

## Join a Self-Management Program





Learning how to manage your RA may help you have less pain and enjoy a better quality of life. Talk with your doctor or other health care professional about a self-management program. These programs can help you:<sup>1,7</sup>

- Reduce pain and stay active
- Cope with your emotions and the physical challenges of RA
- Feel you have more control over the disease
- Build more confidence to live a full and active life

#### References:

- 1. National Institute of Arthritis and Musculoskeletal and Skin Diseases. Rheumatoid arthritis. Reviewed November 2022. Accessed September 8, 2023. https://www.niams.nih.gov/health-topics/rheumatoid-arthritis#:~:text=Rheumatoid%20 arthritis%20%28RA%29%20is%20a%20chronic%20%28long-lasting%29%20autoimmune,swelling%2C%20 stiffness%2C%20and%20loss%20of%20function%20in%20joints
- 2. Singh J. The treat-to-target approach to rheumatoid arthritis. Arthritis-health. Updated June 15, 2021. Accessed March 15, 2024. https://www.arthritis-health.com/blog/treat-target-approach-rheumatoid-arthritis
- 3. deWit MPT, Smolen JS, Gossec L, van der Heijde DMFM. Treating rheumatoid arthritis to target: the patient version of the international recommendations. *Ann Rheum Dis.* 2011;70:891-895. doi:10.1136/ard.2010.146662
- 4. Shah B. Rheumatoid arthritis. American College of Rheumatology. Updated February 2023. Accessed September 8, 2023. https://rheumatology.org/patients/rheumatoid-arthritis
- 5. Bullock J, Rizvi SAA, Saleh AM et al. Rheumatoid arthritis: a brief overview of the treatment. *Med Princ Pract.* 2018;27:501-507. doi: 10.1159/000493390
- 6. Arthritis Foundation. Rheumatoid arthritis: causes, symptoms, treatments and more. Updated October 21, 2021. Accessed September 7, 2023. https://www.arthritis.org/diseases/rheumatoid-arthritis
- 7. Centers for Disease Control and Prevention. Rheumatoid arthritis (RA). Reviewed July 27, 2020. Accessed August 8, 2023. https://www.cdc.gov/arthritis/basics/rheumatoid-arthritis.html



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