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(英文原版)

Manual of
Rheumatology
and Outpatient
Orthopedic Disorders
Diagnosis and Therapy
Fourth Edition

配英汉索引

风湿病学和门诊骨科疾病手册

Edited by
Stephen A. Paget

Allan Gibofsky
John F. Beary, III



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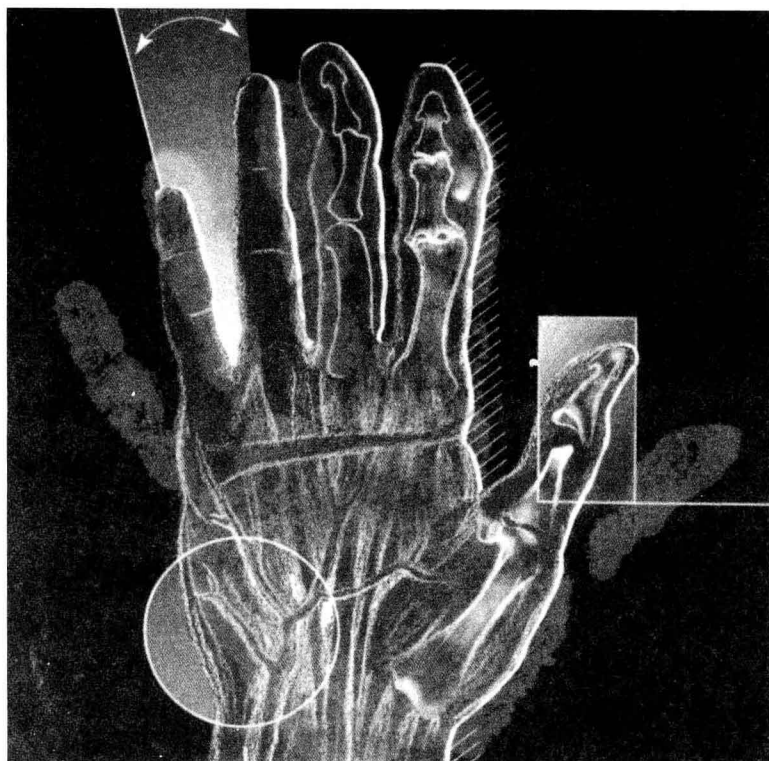
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With love, we dedicate this book of knowledge to our families:
Sandra Paget, Daniel, Matthew, and Lauren
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FOREWORD TO THE FIRST EDITION

Making and acting upon a decision are the critical events in any patient-physician encounter, although it is uncommon for either the patient or the physician to recognize the significance of this sequence. As the physician's experience with the problem at hand increases, the decisions and consequent actions often become more and more instinctual. In the early days of aviation, pilots, distrusting their primitive and frequently failing instruments, were said to have flown "by the seat of the pants"; so, too, may the physician go with the "feel" of the situation. This manual is built on facts. It describes the acquisition of needed facts from the physician-patient encounter in rheumatic disease, the integration of those data into a decision, and the action that logically results from that decision. It constitutes not only a reasonable substitute for experience for the younger physician but also an excellent yardstick against which the older can measure performance.

There was a time not long ago when the patient with rheumatoid arthritis was viewed as a collection of inflamed joints. The very concept of the disease as a systemic affliction, developed by clinicians of yesteryear such as Bauer, Ragan, Copeman, and Hench, was critical to the development of rheumatology as a discipline of internal medicine, while placing perhaps undue emphasis on systemic features. These pages help to restore the concepts that all that hurts is not systemic disease, that articular symptoms are the major feature of rheumatoid arthritis, and that those who would deal with disease manifesting as musculoskeletal pain must also be aware of local afflictions such as march fracture, tennis elbow, and slipped capital femoral epiphysis. These pages represent the happy juxtaposition of the medical and orthopedic surgical expertise of the Hospital for Special Surgery, a hospital with an enviable tradition of cooperation and of excellence in both disciplines.

The pearls are numerous and genuine, and yet no one will consider this manual all-encompassing. It would not be easy to compress a more practical and useful clinical introduction into fewer pages. The reader will use it as such: a personal introduction to the complex and fascinating pathophysiology of human locomotor disease.

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FOREWORD

The composition and authorship of the *Manual of Rheumatology and Outpatient Orthopedic Disorders* continue to reflect the fact that rheumatology and orthopedic surgery have a seamless interface in pursuit of education and patient care goals relative to musculoskeletal disease. The interrelationship of these two disciplines is a special and unique feature of the Hospital for Special Surgery, where many of the authors have served.

The primary goal of this manual has been to serve the needs of students and physicians-in-training. Yet professionals of all ages (perhaps especially senior colleagues) find it useful for reviewing miscellaneous things not successfully committed to memory. These include: American College of Rheumatology Criteria for Diagnosis and Classification of Rheumatic Disease, neurologic dermatomes, molecular targets of autoantibodies, normal laboratory values, details in the formulary, etc. Between the third and fourth editions, there has been an explosion of the rheumatologic formulary; new antiinflammatories and other drugs in the DMARD category; some based on new insights relative to the pathogenesis of rheumatoid arthritis.

Over the span of four editions, several new chapters have been added: antiphospholipid syndrome, rheumatic associations with HIV infection, diagnostic imaging, patient education, perioperative management, measuring functional status, etc. The emphasis remains the discussion of practical aspects of management of musculoskeletal disorders.

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PREFACE

It is currently estimated that approximately 41 million people in the United States have a musculoskeletal condition. Of these, more than 50% have some limitation of functional activity and many have to stop work entirely. Musculoskeletal and rheumatic symptoms account for about 15% of physician visits. The purpose of this manual is to concentrate the knowledge explosion in musculoskeletal disease to a succinct and easily retrievable form in order to improve the lives of our patients.

Extraordinary advances have occurred in the field of rheumatology since the third edition of this manual was published in 1993, and they are featured in the body of our manual as well as in the Appendix on Therapeutics. These include the use of tumor necrosis factor alpha antagonists for the treatment of refractory rheumatoid arthritis, the ascendancy of the use and effectiveness of combination disease-modifying regimens in the treatment in inflammatory arthropathies, and the availability of Cox-2-specific nonsteroidal antiinflammatory drugs that are safer for the gastrointestinal tract. Disease modification is a reality today in rheumatology, not only in rheumatoid arthritis and systemic lupus erythematosus, but also in our treatment of Lyme disease, septic arthritis, gout, vasculitides such as Wegener's granulomatosis, polyarteritis nodosa, Kawasaki's disease, and the antiphospholipid syndrome.

Nearly all chapters are authored or coauthored by present and/or past members of the Division of Rheumatic Disease or the Department of Orthopedic Surgery at Hospital for Special Surgery in New York City. As is often the case in clinical medicine, some problems have more than one potential solution; in these instances, for the sake of clarity and brevity, we identify the areas of controversy, then detail the approach employed at our Hospital. In all instances, our physicians have tried to carefully balance their years of experience with an evidence-based approach to their diagnostic and therapeutic choices.

Although medical information is ever expanding and increasingly complex, the time to absorb it is limited. Given the increasing clinical, academic, social, and family pressures, the physician needs to have a "reliable, old friend" to enable him or her to rapidly make accurate, state-of-the-art clinical decisions. This fourth edition of the *Manual of Rheumatology and Outpatient Disorders* is designed to distill a massive body of knowledge to a user-friendly form for the busy clinician. Our aim is to bring the "laboratory bench" to the office and bedside so as to meet the needs of internists, family physicians, rheumatology trainees, house officers, and students.

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