Rheumatic Diseases Diagnosis and Management

WARREN A. KATZ, M.D.

Rheumatic Diseases

Diagnosis and Management

WARREN A. KATZ, M.D.

Clinical Professor of Medicine and
Chief, Division of Rheumatology
Department of Medicine
Medical College of Pennsylvania;
Attending Physician in Medicine (Rheumatology)
Albert Einstein Medical Center
Philadelphia, Pennsylvania

With 28 Contributors



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Contributors

Joseph J. Biundo, Jr., M.D.

Associate Professor of Medicine and Chief of Section of Rheumatology and Rehabilitation

Holand W. Masleowitz, M.D.

Louisiana State University Medical Center; Chief of Rehabilitation Medicine and Director of Vocational Rehabilitation Unit Charity Hospital New Orleans, Louisiana

Samuel M. Bluefarb, M.D.

Professor and Chairman
Department of Dermatology
Northwestern University Medical School;
Senior Attending Physician,
Northwestern Memorial Hospital, Veterans Administration Lakeside Hospital, and Columbus Hospital
Chicago, Illinois

Mary P. Brassell, R.N., B.S.
Arthritis Rehabilitation Nurse Specialist
The Arthritis Center
Moss Rehabilitation Hospital
Philadelphia, Pennsylvanta

William A. Caro, M.D.

Associate Professor of Clinical Dermatology Northwestern University Medical School; Attending Dermatologist, Northwestern Memorial Hospital; Attending Pathologist, Veterans Administration

Lakeside Hospital
Chicago, Illinois

Sarle H. Cohen, M.D.

Assistant Clinical Professor of Medicine and Physical Medicine Temple University School of Medicine; Attending in Medicine, Albert Einstein Medical Center; Consultant in Rheumatic Diseases

Philadelphia Geriatric Center; Attending Physician, The Arthritis Center Moss Rehabilitation Hospital Philadelphia, Pennsylvania Norman A. Cummings, M.D.

Director, Arthritis Center,

Chief, Clinical Immunology and Connective Tissue Disease Section,

Associate Professor of Medicine, Department of Medicine

University of Louisville School of Medicine Louisville, Kentucky

George E. Ehrlich, M.D.

Professor of Medicine and Professor of Rehabilitation Medicine Temple University School of Medicine;

Director of Rheumatology and The Arthritis Center

Albert Einstein Medical Center and Moss Rehabilitation Hospital Philadelphia, Pennsylvania

Bernard E. Finneson, M.D.

Director, Low Back Pain Clinic and
Chief, Neurological Surgery, Crozer-Chester
Medical Center;
Chief, Neurological Surgery, Sacred Heart Hospital, Chester, Pennsylvania;
Emeritus Chief, Neurological Surgery, Taylor
Hospital, Ridley Park, Pennsylvania;
Clinical Associate Professor, Neurological Surgery, Hahnemann Medical College
Philadelphia, Pennsylvania

Daniel Gold, M.D.

Assistant Professor of Ophthalmology and Director, Retina Service
Department of Ophthalmology
Albert Einstein College of Medicine/Montefiore
Hospital and Medical Center
Bronx, New York

P. Kahler Hench, M.D.

Head, Division of Rheumatology
Scripps Clinic Medical Group;
Assistant Clinical Professor of Medicine
University of California, San Diego, School of
Medicine
La Jolla, California

Paul Henkind, M.D., Ph.D.

Professor and Chairman Department of Ophthalmology Albert Einstein College of Medicine/Montefiore Hospital and Medical Center Bronx, New York

Thomas G. Kantor, M.D.

Professor of Clinical Medicine and Head, Clinical Pharmacology Section Department of Medicine New York University School of Medicine New York, New York

Warren A. Katz, M.D.

Clinical Professor of Medicine and Division Chief, Division of Rheumatology Department of Medicine, Medical College of Pennsylvania; Attending Physician in Medicine (Rheumatology) Albert Einstein Medical Center

Philadelphia, Pennsylvania

Mark S. Kauffman, M.D.

Assistant Clinical Professor, Orthopedic Surgery, and Assistant Clinical Professor, Physical Medicine Temple University School of Medicine; Consultant to The Arthritis Center, Moss Rehabilitation Hospital; Associate Staff, Albert Einstein Medical Center; Deputy Director, Department of Orthopedics, Episcopal Hospital Philadelphia, Pennsylvania

Rodanthi C. Kitridou, M.D.

Associate Professor of Medicine University of Southern California School of Medicine: Director of Clinical Rheumatology Section of Clinical Immunology and Rheumatic Diseases LAC-USC Medical Center Los Angeles, California AMA Man Island

Morrie E. Kricun, M.D.

Associate Professor Department of Diagnostic Radiology Hahnemann Medical College and Hospital Philadelphia, Pennsylvania

E. Carwile LeRoy, M.D.

Professor of Medicine and Director, Division of Rheumatology and Immunology Department of Medicine, Medical University of South Carolina Charleston, South Carolina

Roland W. Moskowitz, M.D.

Professor of Medicine and

Director, Rheumatic Disease Unit Case Western Reserve University School of Medicine; Consultant in Arthritis, Cleveland Veterans Administration Hospital; Associate Physician, University Hospitals Cleveland, Ohio

Leonard D. Policoff, M.D.

Department of Physical Medicine and Rehabilitation Rutgers Medical School of the College of Medicine and Dentistry of New Jersey; Director of Rehabilitation Medicine The Somerset Hospital, Somerville, New Jersey; Professor of Clinical Physical Medicine and Rehabilitation, The University of Pennsylvania School of Medicine Philadelphia, Pennsylvania

Clinical Professor and Acting Chairman

Naomi F. Rothfield, M.D.

Professor of Medicine and Chief, Division of Rheumatic Diseases University of Connecticut Health Center Farmington, Connecticut

John L. Sbarbaro, Jr., M.D.

Professor and Chief of Orthopaedic Surgery Medical College of Pennsylvania Philadelphia, Pennsylvania

Frank R. Schmid, M.D.

Professor of Medicine and Chief Arthritis-Connective Tissue Diseases Section Northwestern University Medical Center Chicago, Illinois

H. Ralph Schumacher, M.D.

Associate Professor of Medicine University of Pennsylvania School of Medicine; Chief, Arthritis Section Veterans Administration Hospital Philadelphia, Pennsylvania

Philip Spergel, Ed.D.

Director, Psychological Services Moss Rehabilitation Hospital; Assistant Clinical Professor of Rehabilitation Medicine . Temple University Health Sciences Center; Instructor, Departments of Psychology Temple University and LaSalle College Philadelphia, Pennsylvania

Harry Spiera, M.D.

Associate Clinical Professor of Medicine and Chief, Division of Rheumatology
Mount Sinai School of Medicine of the City University of New York;
Chief, Division of Rheumatology
Beth Israel Medical Center
New York, New York

Charles D. Tourtellotte, M.D.

Professor of Medicine and Chief of Rheumatology

Temple University School of Medicine;

Consultant in Rheumatology to Veterans Administration Hospital, St. Christopher's Hospital for Children, Episcopal Hospital, Jeanes Hospital, A. I. du Pont Institute (Wilmington), and Allied Services Institute (Scranton);

Chief of Rheumatology Service, Temple University Hospital

various challenges that are inevitable in

Philadelphia, Pennsylvania

Peter W. Vanace, M.D.

Associate Professor of Pediatrics Director, Division of Pediatric Rehabilitation Hahnemann Medical College and Hospital Philadelphia, Pennsylvania

C. Robert E. Wells, M.D.

Professor of Pediatrics
Temple University School of Medicine;
Senior Pediatric Cardiologist
St. Christopher's Hospital for Children
Philadelphia, Pennsylvania

Ts'ai-fan Yü, M.D.

Research Professor of Medicine

Mount Sinai School of Medicine

City University of New York

New York, New York

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Foreword

No branch of medicine has seen such an increase in importance and interest in recent years as that of the rheumatic diseases. From its place as a stepchild of medicine it has emerged as one of the leading contenders for the attention of students and younger physicians. As a result most physicians today are well versed in the more important and dramatic forms of these diseases, such as rheumatoid arthritis and systemic lupus. On the other hand many feel much less secure with regard to less well-defined diagnostic problems. Dr. Katz and his collaborators have written this book with the needs of such physicians in mind and have approached the subject of rheumatic disorders with emphasis on differential diagnosis.

There are, of course, chapters discussing the more important rheumatic diseases in standard fashion; and the principles of treatment also are covered. In addition a major section of the book is devoted to a regional consideration of musculoskeletal symptoms and signs in various parts of the body with a listing and brief discussion of their probable causes. Through this approach it has been possible to call to the reader's mind a number of possible articular and nonarticular causes which should be thought of but which are apt to be missed in the larger, more detailed rheumatologic treatises. The regional

chapters also contain useful, brief reviews of the essential anatomical and functional aspects of the various joints.

Two features which demand special comment are the many excellent illustrations which enrich the text and add greatly to the value of the book, and a series of ingenious "flow charts" illustrating the steps to be taken in reaching a diagnosis. These are presented on a problem-oriented basis with separate flow charts for various problems depending on the presenting feature, such as acute and chronic involvement of a single or of multiple joints. Indeed the book as a whole is problem-oriented, designed to be most helpful to the physician as he faces the various challenges that are inevitable in differential diagnosis.

Most medical texts are concerned solely with diseases. This book shows the concern of the authors with patients also and contains many practical suggestions for helping them understand and cope with the day-to-day and personal difficulties they face.

Although Rheumatic Diseases—Diagnosis and Management is designed primarily for the general physician there is much in it which is of interest and value to the experienced rheumatologist.

CURRIER McEWEN, M.D.

Preface with by significant street, and professional Preface with modern

This book is designed for physicians who wish to sharpen their acumen in the diagnosis of rheumatic disorders. By virtue of our medical training, we often become disease-oriented. That is, we learn about one typical illness or another, particularly if it has some exotic appeal. Most textbooks on rheumatology foster this approach—one chapter on rheumatoid arthritis, another on gout, another on osteoarthritis, for example. Unquestionably, these larger volumes serve as valuable references. The casual reader may depend upon them for a detailed treatment of both old and new topics in rheumatology, but the busy clinician may need a more immediate helping hand. Furthermore, the patient is complaint-oriented. Instead of confronting his physician with his own diagnosis, he relates one or more symptoms. It is a fortunate patient who has his miseries computed instantaneously into a single, correct diagnosis. But how many times have we seen the patient who has been to several other physicians, each of whom diagnosed according to the limits of his specialty. A man with a painful left shoulder might find that his family physician labels his condition rheumatism, and the rheumatologist diagnoses arthritis. The orthopaedist calls it a torn muscle, the cardiologist treats him for angina pectoris, and the gastroenterologist suspects splenic flexure syndrome. Any one diagnosis may ultimately be correct, but too often by overemphasizing the disease, we fail to appreciate the diagnostic clues that the patient

sets before us! I accept the challenge presented to me by my students and colleagues to bridge the gap from symptoms to disease; from patient to physician.

Pathogenesis and pathology are presented in

In an effort to achieve this goal, the book is divided into four major sections. Part One deals with both obvious and more subtle clinical manifestations of the rheumatic diseases. In each chapter the author discusses a separate region of the musculoskeletal system, its functional anatomy, techniques of physical examination, the assessment of symptoms and signs referable to these areas, and ample differential diagnoses of the rheumatic diseases and those nonrheumatic enti-· ties that mimic them. There are separate discourses on the skin, mucous membranes, and eyes as mirrors of systemic disease. An analysis of those variables that enter into diagnostic decision-making ends the section.

In Part Two the various rheumatologic laboratory and roentgenographic procedures are highlighted. Within recent years, there have been many new biochemical and immunologic determinations that, in some respects, have served to confuse the clinician. Specialized isotopic and roentgenographic contrast studies, formerly esoteric, are now routine in many institutions. The significance, indications, advantages, and pitfalls of these ancillary examinations are individually set forth.

The chapters of Part Three more completely describe the clinical diagnostic features of individual disease entities referred to under differential diagnosis in Part One. Pathogenesis and pathology are presented in the context of their clinical setting. There are, however, cross-references to more elaborate discussions. Each of the chapters ends with a description of the management program recommended for each disorder. It is, of course, important not only to know which therapeutic resources are available, but also to appreciate how to use them. The unilateral approach to the patient is passé; we now marshall the skills of the pharmacologist, physiatrist, surgeon, and psycho-social team.

Part Four deals with the indications, modes of action, side effects, contraindications, and alternatives to the many thera-

is divided into four major sections. Part One

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peutic modalities that the physician will use in treating his patient.

Each of the collaborating authors has been charged with the task of keeping his or her chapter as current as possible, but not so completely referenced so as to lose sight of the major objective—to teach the essence of diagnosis and management. We recognize that medicine, being an inexact science, is fraught with controversy. We have attempted to present a point of view (usually widely agreed upon).

Cross-referencing is used with moderation; but at the expense of lengthening the book, repetition has been employed intentionally as a teaching device.

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ment of both old and new topics in theu-

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WARREN A. KATZ, M.D.

Acknowledgments

On the steps of Boston City Hospital several years ago, Dr. Hubert I. Caplan steered me into the field of rheumatology. To him I owe my first acknowledgment with thanks. Recognition also goes to subsequent mentors, Hans Waine, M.D., and Currier Mc-Ewen, M.D., along with their staffs. I appreciate the assistance of my 28 collaborating authors who strove for excellence, endured, and often provided editorial comment on my own chapters. George E-Ehrlich, M.D., provided several illustrations and many cases that formed the basis for much of this book.

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I am obliged to Joseph Lee Hollander, M.D., my friend and admired colleague, himself the editor of *Arthritis and Allied Conditions* and other texts on rheumatology, who has encouraged me in the writing of this book.

Ellen, my wife, encouraged, suggested, criticized, typed, read and reread many parts of the manuscript and galleys. Thank you, Ellen, for your patient waiting and for standing by my side. To you this book is dedicated!

WARREN A. KATZ, M.D.

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