

Reactive arthritis

Reactive arthritis is a form of arthritis that occurs after the body has fought a bacterial infection. Infections that have been known to lead to this condition in some people include food poisoning, gastrointestinal infections and chlamydia. The joints of the legs and feet are most commonly affected. Unlike other forms of arthritis, reactive arthritis does not destroy the affected joint. Reactive arthritis was formerly known as Reiter's syndrome.

Normally, when a person is suffering from an infection, the immune system steps in to fight the culprit. In a person with reactive arthritis, however, this immune system activity continues after the infection has been cleared. This leads to swelling of the joints, although the joints themselves are not infected.

While reactive arthritis can occur at any age, it tends to affect people (mostly males) aged between 20 and 50 years. In most cases, the condition resolves by itself over the course of a few months. In some cases, the symptoms may linger for longer or may recur. Reactive arthritis is not contagious.

Symptoms

The symptoms of reactive arthritis depend on the affected joint but can include:

- Pain, swelling or stiffness in a joint (arthritis)
- The arthritis develops some weeks after a bacterial infection
- Usually, one to five joints are affected
- Pain and stiffness may be worse in the morning
- Lower back pain
- Painful feet when walking.

Reactive arthritis may affect other parts of the body as well as the joints, including:

- **Eyes** – conjunctivitis or 'pink eye', watery discharge, blurry vision or sensitivity to light. Uveitis – inflammation of the iris and the ciliary body, the muscle that focuses the eye – may develop. This is rare with the first attack, but more common with recurring arthritis.
- **Skin** – reddened scaly patches.
- **Muscles** – aches and pains.
- **Tendons** – inflammation of tendons may occur. The Achilles tendon and the tendon that runs along the sole of the foot are commonly affected. Tendonitis may cause the toes or fingers to swell.
- **Reproductive and urinary systems** – women may have infections of the cervix. Men may have infections of the penis, epididymis or testicles. Both men and women may develop genital sores or painful urination.

Known causes

Bacterial infections that are known to cause reactive arthritis include:

- The food poisoning bacterium *Salmonella*
- Bacteria that cause gastrointestinal illness such as *Shigella*, *Yersinia* or *Campylobacter*
- The sexually transmitted infection chlamydia (caused by the bacterium *Chlamydia trachomatis*).

Most people who catch one of these bacterial infections don't develop reactive arthritis. The reason for this is unclear. About half the people who develop reactive arthritis have a certain gene known as HLA-B27. It seems that people who develop reactive arthritis may be genetically predisposed.

Diagnosis

There is no specific test for reactive arthritis. Diagnosis may include:

- Physical examination
- Medical history
- Urine tests
- Full blood count tests
- X-ray examinations
- Arthrocentesis – a sample of joint fluid is taken and tested in a laboratory (this is done to rule out conditions such as gout that may cause similar symptoms).

Treatment

There is no cure for reactive arthritis. Medical care aims to manage the symptoms until the person gets better. Treatment may include:

- Antibiotics aim to destroy the bacteria that caused the initial infection; however, antibiotics don't treat the symptoms of reactive arthritis.
- If the condition developed as a result of infection with the bacterium *Chlamydia trachomatis*, the person's sexual partner or partners must also be treated with antibiotics.
- Non-steroidal anti-inflammatory drugs (NSAIDs) may help to ease the joint inflammation and pain.
- Corticosteroids may be used to treat tendon inflammation.
- Cortisone injections into the joint may be given in severe cases.
- Disease-modifying anti-rheumatic drugs (DMARDs) may be given in cases of prolonged reactive arthritis.
- Physical therapy (such as stretching and gentle exercises) can help to keep the affected joint mobile and strengthen the surrounding ligaments, tendons and muscles.
- Low impact exercises such as walking, stationary cycling, water aerobics or swimming may be recommended. Consult with your doctor before starting any exercise program.
- Uveitis is a medical emergency requiring specialist treatment.

Self-care suggestions

Suggestions include:

- Rest as much as you can.
- Try hot showers or baths and heat packs – heat eases muscular aches and pains.
- Use cold packs to ease joint pain.
- Practice meditation or deep breathing exercises – feeling mentally relaxed can help you cope with physical pain.

Where to get help

- Your doctor
- Rheumatologist
- Arthritis Victoria Tel. (03) 8531 8000 or 1800 011 041

Things to remember

- Reactive arthritis is a type of arthritis caused by certain types of bacterial infection.
- Unlike other forms of arthritis, reactive arthritis does not destroy the affected joint.
- There is no cure for reactive arthritis – medical treatment aims to manage the symptoms until the person gets better.

Want to know more?

Go to [More information](#) for support groups, related links and references.

This page has been produced in consultation with, and approved by:

Arthritis Victoria incorporating Osteoporosis Victoria

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