Polymyalgia rheumatica

Summary

- Polymyalgia rheumatica is a common condition that causes pain and stiffness in older adults.
- Symptoms include severe muscle aches and stiffness, unexplained weight loss and fatigue.
- Some people with polymyalgia rheumatica develop giant cell arteritis (inflammation of the arteries).
- Polymyalgia rheumatica can be treated effectively with medication and lifestyle changes.

Polymyalgia rheumatica is a condition that causes pain and stiffness in older adults. Typical symptoms include moderate-to-severe muscle pain and stiffness, particularly affecting the neck, shoulders, thighs and hips. People aged 50 years and over are most commonly affected by polymyalgia rheumatica, and it becomes more common as people get older. It's a common condition and very treatable. Polymyalgia rheumatica should not be confused with fibromyalgia – a condition that causes pain and muscle stiffness, but does not cause inflammation.

Symptoms of polymyalgia rheumatica

The symptoms of polymyalgia rheumatica usually develop over a short period of time (days/weeks) and may include:

- muscle pain and stiffness, particularly in the neck, shoulders, hips, thighs and upper arms
- increased pain and stiffness after you’ve been resting or inactive
- fatigue (or tiredness)
- difficulty sleeping (due to pain)
- difficulty raising arms above shoulder height
- weight loss
- slight fever.

Not everyone will experience all of these symptoms. Each person with polymyalgia rheumatica will have their own unique set of symptoms.

Cause of polymyalgia rheumatica

Polymyalgia rheumatica produces inflammation and swelling in the larger joints of the body, such as the shoulders and hips, and in the tissues around these joints. The inflammation is due to the immune system attacking the membranes lining the joint (synovium), but the reason for this is unknown. Genetics and environmental factors (such as infections) are believed to play a role.

Risk factors for polymyalgia rheumatica

Risk factors for polymyalgia rheumatica include:

- **advancing age** – the condition is more common in people aged 50 years and over. Polymyalgia rheumatica becomes more common as people age
- **gender** – women are more likely to develop the condition than men
- **race** – Caucasian (white) people are most susceptible.

Polymyalgia rheumatica and giant cell arteritis

Some people with polymyalgia rheumatica experience giant cell arteritis (also known as temporal arteritis). Giant cell arteritis involves painful inflammation of the blood vessels (arteries) of the skull. Symptoms include:

- **severe headache**
- blurred or double vision
- pain in the side of your jaw or face when chewing
- temples are tender to touch
- scalp tenderness.

Seek urgent medical attention if you experience any of these symptoms. If not treated promptly, giant cell arteritis can cause damage to the arteries of the eye, which can lead to blindness.

**Diagnosing polymyalgia rheumatica**

No single test can diagnose polymyalgia rheumatica, so your doctor will make a diagnosis based on several factors. These include your medical history, a physical examination, tests that measure the levels of inflammation markers in the blood, and tests (such as scans) to rule out other possible causes.

Tests to confirm or exclude polymyalgia rheumatica may include:
- blood tests to check for inflammation in the body by measuring the erythrocyte sedimentation rate (ESR) or the level of C-reactive protein (CRP)
- blood tests to rule out other conditions
- tests to check for giant cell arteritis – for example, biopsy of the temple arteries.

**Treating polymyalgia rheumatica**

Polymyalgia rheumatica can be treated with corticosteroids, pain-relieving medications, and non-steroidal anti-inflammatory drugs (NSAIDs).

**Corticosteroids**

Most people with polymyalgia rheumatica will be treated with oral corticosteroid medication. The amount prescribed will depend on your specific situation. A higher dose will be prescribed in more severe conditions and when giant cell arteritis is present.

The aim of treatment for polymyalgia rheumatica is to relieve the symptoms and slowly reduce the medication dose to the lowest possible amount without the return of symptoms.

Long-term use of oral corticosteroids can cause unwanted side effects, so it’s important you see your doctor regularly while taking these medications. If you have any concerns about the side effects of corticosteroids, you should discuss them with your doctor.

**Other medications**

You may also need to take other medications from time to time to help manage your pain. Pain-relieving medications (analgesics) and non-steroidal anti-inflammatory drugs (NSAIDs) can provide temporary relief of pain and stiffness.

Creams, gels and rubs can also be used. There is a large range available – from medicated gels to soothing liniments and heat rubs. Applying these to sore muscles or joints can provide temporary pain relief.

**Self-management of polymyalgia rheumatica**

You can do many things to help yourself if you have polymyalgia rheumatica, including:
- learn more about polymyalgia rheumatica – knowing as much as possible about your condition means that you can make informed decisions about your healthcare and play an active role in the management of your condition
- get active – low-impact activities such as swimming or walking can help reduce muscle pain and stiffness. A physiotherapist or exercise physiologist can help design an individual program for you
- enjoy a healthy, well-balanced diet – this can help provide you with better energy levels, reach and maintain a healthy weight, give you a greater sense of wellbeing and reduce your risk of other health problems
- ask your doctor to check your calcium and vitamin D levels – steroid tablets reduce the amount of calcium your body absorbs, while vitamin D is important in helping your body absorb and process calcium. With this in

betterhealth.vic.gov.au
mind, it is a good idea to check your calcium and vitamin D levels with your doctor and discuss the need for any supplements.

- don’t smoke – smoking cigarettes is not only bad for your general health, but it can also worsen your polymyalgia rheumatica symptoms and make it harder to treat.
- pace yourself – plan and organise your activities so you make the most of your energy.
- learn new ways to manage pain – there are many things you can do to manage pain – and different strategies will work for different situations. For example, heat packs can help ease muscle pain, cold packs can help with inflammation, gentle exercise can help relieve muscle tension. Try different techniques until you find what works best for you.
- stay at work – it’s good for your health and wellbeing. Talk to your doctor or allied healthcare professional about ways to help you to get back to or to stay at work.
- join a peer support group – dealing with a chronic condition can be isolating. Being able to speak with others who understand your condition can be a great relief.

Where to get help

- Your **GP (doctor)**
- **Rheumatologist**
- **Optometrist**
- **Musculoskeletal Australia** National Help Line Tel. **1800 263 265**

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

Musculoskeletal Australia - formerly MOVE

Content on this website is provided for information purposes only. Information about a therapy, service, product or treatment does not in any way endorse or support such therapy, service, product or treatment and is not intended to replace advice from your doctor or other registered health professional. The information and materials contained on this website are not intended to constitute a comprehensive guide concerning all aspects of the therapy, product or treatment described on the website. All users are urged to always seek advice from a registered health care professional for diagnosis and answers to their medical questions and to ascertain whether the particular therapy, service, product or treatment described on the website is suitable in their circumstances. The State of Victoria and the Department of Health & Human Services shall not bear any liability for reliance by any user on the materials contained on this website.

For the latest updates and more information, visit www.betterhealth.vic.gov.au

**Copyright © 1999/2020** State of Victoria. Reproduced from the Better Health Channel (www.betterhealth.vic.gov.au) at no cost with permission of the Victorian Minister for Health. Unauthorised reproduction and other uses comprised in the copyright are prohibited without permission.