

Rheumatoid Arthritis

Rheumatoid Arthritis (RA) is a chronic, symmetric inflammatory disease. It is the most common diffuse connective tissue disease and affects 1 - 2% of the adult population. Although RA can occur at any age, it is usually diagnosed in the third to fifth decades and affects women twice as often as men.

Typical symptoms and findings include:

- ▶ Morning stiffness
- ▶ Arthritis in multiple joints
- ▶ Symmetric arthritis (i.e. both hands)
- ▶ Rheumatoid nodules (subcutaneous nodules located under the skin)
- Involvement of joints in the hands or wrists
- Positive rheumatoid factor (blood test)
- ▶ Typical x-ray findings

RA is a systemic disease that can affect many other organs besides the joints, such as the heart and lungs. Other systemic effects include: weight loss, fever, and low blood counts.

50 - 70% of RA patients are disabled to some degree in 5 years and half will stop working within 10 years of diagnosis. RA accelerates mortality with moderate-severe RA having mortality ratios similar to coronary artery disease or stroke. When RA affects other organs besides the joints, the mortality is higher.

RA is treated with a variety of medications, many of which can be toxic. Common agents used include: aspirin, non-steroidal anti-inflammatory agents, gold (oral or injections), D-penicillamine, anti-malarials (ex: chloroquine), prednisone, and methotrexate. A new medication, given by injection, is Tissue Necrosis Factor (TNF) inhibitor. Early results are promising, although significant side effects are possible.

The rating for RA will depend upon the severity of disease. In the absence of other significant impairments, very mild RA with no functional disability or other organ involvement and treated with anti-inflammatories only, will be non-rated. Moderate disease and/or treatment with steroids, methotrexate, or gold would be rated Table B to D range. Severe disease (severe functional disability, wheelchair bound, or RA disease in organs besides the joints) will generally be declined.

To get an idea of how a client with a history of rheumatoid arthritis would be viewed in the underwriting process, feel free to use the Ask "Rx" perts on the reverse side for an informal quote.

This material is intended for insurance informational purposes only and is not personal medical advice for clients.

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{Name Phone Number E-mail Address Website Address}



Rheumatoid Arthritis - Ask "Rx" pert underwriter (ask our experts)

Producer	Phone	Fax	
Client	Age/DOB	Sex	
If your client has a history of Rheumato	d Arthritis, please answer the fo	llowing:	
1. Please list date of first diagnosis			
2. Is your client on any medications?			
☐ yes, please give deta	nils		
□ no			
3. Please check if your client has had a	ny of the following:		
□ weight loss	☐ lung disease		
☐ fever	☐ liver enzyme abnormality		
☐ low blood counts	☐ kidney disease		
☐ heart disease			
4. Which joints are involved?			
5. Please check functional ability:			
☐ fully active			
☐ sedentary			
☐ uses walker, cane, e	tc.		
$\ \square$ uses wheelchair			
6. Has your client smoked cigarettes in	the last 12 months?		
□ yes			
□ no			
7. Does your client have any other majo	r health problems (ex: cancer, et	c.)?	
\Box yes, please give deta	ails		
□ no			
After reading the Rx for Success on Rhe	numatoid Arthritis Inlease feel fre	ee to use this Ask "Rx" nert	· underwriter for an

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