

POLYMYALGIA RHEUMATICA

HISTORY AND PHYSICAL

- Demographics – average age is **74**, should not be considered if <50
- Proximal involvement, hip/shoulder girdle
 - **No objective weakness**
- Constitutional symptoms
- Rule out **giant cell arteritis** – headache, scalp tenderness, jaw claudication, vision changes
 - Should be done at every visit

INVESTIGATIONS:

- Basic: CBC and differential, Cr, ALT, CK, TSH, CRP, RF and anti-CCP*
- Nice to have:
 - Hepatitis B, C, HIV
 - CXR

TREATMENT:

- **Monthly** monitoring bloodwork
- Prednisone 15mg p.o once daily x 2 weeks, then prednisone 12.5mg p.o once daily x 2 weeks, then prednisone 10mg p.o once daily x 2 weeks, then prednisone 1mg every 2-4 weeks until off
 - Look for: > 80% improvement within 48 hours

DIFFICULTY TAPERING:

