

What is **polymyalgia rheumatica?**

Polymyalgia rheumatica (PMR) is an inflammatory condition that causes many (poly) painful muscles (myalgia). Morning pain and stiffness in the shoulders and hips are common. This usually lasts more than half an hour and improves once you start moving. General wellbeing can be affected including feeling very tired and generally unwell.



What are the symptoms?

- Pain and stiffness in both sides of the body particularly in the arms, shoulders, hips.
- Pain is enough to affect your ability to wash and dress yourself. Some people find it difficult to even get out of bed in the morning.
- Stiffness occurs in the morning, or after being inactive for some time. Pain and stiffness improve once you start moving.
- Fatigue (extreme tiredness).
- Loss of appetite. Unintended weight loss.
- Feeling low or depressed.

Giant cell arteritis (GCA) is a related condition that affects about one fifth of people with PMR. It involves inflammation of blood vessels in your temples. The symptoms of GCA include:

- Severe headaches and pain in the muscles of the head.
- Tenderness or swelling at the temples.
- Pain in the jaw, tongue, side of the face, scalp.
- Blurred vision, double vision, or changes in colour vision.

GCA can lead to permanent blindness so if you have any of the above GCA symptoms, contact your doctor immediately.

How is PMR diagnosed?

There is no specific test for PMR. Your doctor will ask you about your symptoms and will do a physical examination. They do blood and urine tests to support a diagnosis of PMR. If your doctor suspects PMR or GCA they will start you on steroid tablets like prednisone.

How can I help myself?

Lifestyle is an important part of managing symptoms and improving wellbeing. Activity usually helps to ease the pain and stiffness so exercise regularly.

- **Balance exercise** with rest so your body can recover from exercise and from your normal daily tasks.
- **Weight bearing exercise** like walking is good for most people with PMR. It also helps reduce the chance of osteoporosis (weak bones) which can be a side effect of long-term steroid use.
- A **hot** bath or shower can ease pain and stiffness.
- **Don't smoke.**
- **Healthy eating** involves eating five servings of vegetables and fruits every day.

- **Manage** stress and fatigue
- Your medication might have side effects that requires some dietary changes. Talk to your doctor about keeping your bones strong, preventing fluid retention and maintaining a healthy weight.



Who gets PMR?

Almost all people affected are over 50 years old. Most common incidence is 70 to 75-year-olds. PMR is more common in women.

It is thought to be connected to our genes as most people with PMR are of Northern European ethnicity, especially Scandinavian. People from Finland are genetically different from the rest of Scandinavia and have a much lower rate of PMR.

PMR commonly lasts about 2 to 4 years.

Medical management

Medical treatment starts with medication to reduce inflammation and manage symptoms - corticosteroids are the only effective medication. Other medications are sometimes used to allow the dose of steroids to be reduced. People usually need medication for PMR for a year or two.

Key points



PMR can be quite debilitating with pain and overwhelming fatigue, but treatment is available. See your doctor if you have pain and stiffness that lasts longer than two weeks. Medication can reduce your symptoms and allow you to return to your normal activities.



PMR does not increase mortality. PMR can last two to four years, and relapse is common.



Urgent treatment of GCA is needed to reduce the chance of permanent blindness.

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and find support**



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