

How is rheumatoid arthritis diagnosed?

It can sometimes be difficult to diagnose rheumatoid arthritis (RA). There are other diseases that have similar symptoms to RA. Your doctor needs to carefully consider many factors to make a definite diagnosis of RA. **A diagnosis of RA cannot be made based solely on blood tests.** A rheumatologist can help make the diagnosis.

Things to consider in making a diagnosis of RA:

Your medical history

- Joint pains
 - Often affects 3 or more joints
 - Small joints (fingers, toes, and wrists) are most commonly affected and usually affects both sides of the body
- Joint stiffness
 - Hard to move, especially in the mornings or after long periods of inactivity
- Symptoms last for more than 6 weeks

Physical examination

- Synovitis (joints are swollen or feel "squishy")
- Joint deformities (something that is not a normal shape)

Imaging studies

- X-rays
 - Often done of hands and feet
 - May show signs of your joints breaking down
 - Can help with diagnosis and keep track of joint damage from RA
- Ultrasound
 - Uses sound waves to create a picture and can help find and watch for inflammation in your joints
- MRI
 - Uses large magnets and radio waves to look for inflammation in your joints, tendons, or ligaments
 - It is expensive and rarely needed to make a diagnosis of RA



“[Rheumatoid arthritis in the hand](#)” and “[Rheumatoid arthritis. Carpal fusion](#)” by [Wellcome Images](#) is licensed under [CC BY-NC 2.0](#).

Labs (no single test can confirm a diagnosis of RA)

- **Rheumatoid factor (RF)**
 - Often used to help diagnose RA
 - A positive test can also be seen with other autoimmune diseases (such as lupus or Sjogren's syndrome), with some infections, and with other medical conditions
 - Some healthy people have a positive test
 - About 20% of people with RA may test negative for RF
- **Anti-cyclic citrullinated peptide (anti-CCP) antibody**
 - Many studies have shown that this test if positive is more likely to be correct than RF testing
- **Tests for inflammation**
 - Sedimentation rate (also called SED rate or ESR) may help find out if you have an inflammatory disease
 - It can also be used to keep track of inflammation during treatment
 - ESR can also be high in infections, some bowel diseases, heart disease, kidney disease and with some cancers
- **C-reactive protein (CRP)**
 - Used to find or keep track of inflammation
 - While high levels suggest you may have inflammation, it does not explain why you have inflammation or where you have inflammation
 - High levels can also be seen with smoking, obesity, and lack of exercise

Importance of early diagnosis:

