

MRI-identified damage tied to patient-reported RA function

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(HAQ) and Short-Form 36 physical component summary at remission and relapse, independent of clinical and radiographic measures. MRI-assessed damage was also associated with most of the [hand](#)-related HAQ items. The Sharp/van der Heijde method scores were not associated with patient-reported outcomes. At neither remission nor relapse was MRI-assessed inflammation associated with patient-reported outcomes.

"In analyses where MRI and X-ray damage were simultaneously compared with physical function, the associations between MRI damage and physical function [were] stronger than those between X-ray damage and physical function," the authors write.

More information: [Abstract/Full Text](#) [\(subscription or payment may be required\)](#)

(HealthDay)—There is a consistent association between magnetic resonance imaging (MRI) findings of damage in the wrist and hand and self-reported loss of function in patients with established rheumatoid arthritis (RA) in sustained clinical remission, according to a study recently published in the *International Journal of Rheumatic Diseases*.

Daniel Glinatsi, M.D., Ph.D., from the Copenhagen Center for Arthritis Research at Rigshospitalet in Glostrup, Denmark, and colleagues performed wrist/hand MRIs and radiographs of wrists/hands/feet in 114 established RA patients in clinical remission before tapering their biologic disease-modifying antirheumatic drugs. The associations between damage reflected on imaging studies and assessments for [health status](#), pain, and hand function were examined.

Seventy patients had relapses. The researchers found that MRI-assessed damage was associated with impaired health assessment questionnaire

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