
Rheumatoid Vasculitis Factsheet

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Rheumatoid vasculitis (RV) is a serious complication of rheumatoid arthritis. It is associated with inflammation of the small and medium blood vessels. The cause is not known but is thought to be linked to a mixture of genetic and environmental factors. It can affect the skin, causing ulcers and rashes and the nerves, causing loss of sensation. Treatment is with steroids and medicines to reduce the activity of the immune system. Stopping smoking is a very important factor in controlling the condition.

Who gets RV?

A UK study found that in any one year about 8 in 1 million people have the diagnosis of RV. It is much commoner in men than women. People with RV are more likely to be smokers, have rheumatic nodules (lumps seen in people with rheumatoid arthritis, especially over the fingers and elbows), and have long-standing rheumatoid arthritis. People with the condition are more likely to have anti-inflammation proteins (rheumatoid factor antibodies) in their blood. Some people with RV also have Felty's syndrome (rheumatoid arthritis, large spleen and a lower than normal number of white cells called neutrophils in the blood).

Since the 1980s, the number of people with RV seems to have dropped in the UK. It is not known whether this is due to better treatment of rheumatoid arthritis or to a change in smoking habits.

What are the symptoms of RV?

You may get skin rashes and ulcers. If the nerves are affected, you may notice pins and needles, tingling and numbness. RV can affect many different areas of the body so the symptoms will depend on which part is involved. If the covering of your heart is affected (pericarditis) you may get chest pain. Pain, redness and problems with your eyesight may occur. Very rarely, the condition may affect your kidneys and prevent them from working properly.

You may start to feel tired and feverish, and lose some weight.

What are the symptoms of PAN?

At first you may just feel generally unwell and weak. You may lose weight or get aches and pains. PAN can affect any area of the body apart, but usually not the lungs and as it progresses you may get numbness and tingling in the hands or feet or tummy pain after eating. Cutaneous PAN causes a rash, bruising, nodules (small lumps) or skin changes due to poor blood circulation. Children may just feel ill and the disease may be difficult to spot in the early stages.

What is the treatment for RV?

All smokers with RV should be advised to stop. The type of treatment otherwise depends on the severity of the condition and the part of the body involved. Very mild problems often do not require specific therapy while more significant manifestations, such as nerve involvement, may be treated with steroids and medicines which reduce the activity of the immune system e.g. azathioprine or methotrexate. An antibiotic cream for inflamed areas of skin may be required.

More severe RV may need higher doses of steroids and a medicine called cyclophosphamide. Other medicines recently tried include anti-TNF antibodies and rituximab.

Are there any complications with RV?

There is a higher risk of infection both due to the condition and as a result of treatment. People with rheumatoid vasculitis are more likely to develop hardening of the arteries (atherosclerosis).

Does RV get better?

The future for people with RV depends on whether it is mild or severe, which parts of the body are affected and whether complications such as atherosclerosis have developed. Controlling symptoms may be challenging, especially as it mainly occurs in people who already have advanced rheumatoid arthritis. Fortunately, RV is becoming increasingly rare and new treatments are being discovered all the time.

Further reading

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