Surgical Treatment of Rheumatoid Arthritis in the Hand and Foot: A Longitudinal Analysis.

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Introduction

Rheumatoid arthritis (RA) is a systemic autoimmune disease that is persistent and frequently affects the hands and feet. It can cause severe pain, deformity, and impairment of function. Surgery is still an essential option for advanced cases, even though medicinal therapy has improved outcomes. The purpose of this long-term research is to examine the surgical management of RA in the hand and foot, with an emphasis on results, side effects, and the development of surgical methods over time. Patients with RA who had surgical procedures performed at a single academic medical centre over a ten-year period for hand and foot involvement were the subject of a retrospective longitudinal investigation. Information was gathered about the kinds of surgeries performed, the degree of the preoperative illness, the postoperative results, any problems, and the length of the follow-up. The operations covered by the study were fusion, tenosynovectomy, joint arthroplasty, and synovectomy.[1]

This longitudinal analysis highlights how surgical treatment for RA in the hand and foot is changing, with a growing trend towards minimally invasive and joint-preserving procedures. Although surgical procedures have significantly reduced discomfort and enhanced the function of the hands and feet, there is always a chance of problems, which makes postoperative surveillance and patient selection crucial. The study's conclusions add to our knowledge of the function of surgery in the treatment of advanced RA and offer suggestions for improving patient outcomes and reducing long-term morbidity. Patients with RA who had surgical procedures performed at a single academic medical centre over a ten-year period for hand and foot involvement were the subject of a retrospective longitudinal investigation. Information was gathered about the kinds of surgeries performed, the degree of the preoperative illness, the postoperative results, any problems, and the length of the follow-up. The operations covered by the study were fusion, tenosynovectomy, joint arthroplasty, and synovectomy.[2]

The trial comprised 180 patients in total. According to the data, the surgical management of RA in the hand and foot has changed over time, with a growing focus on joint-preserving and minimally invasive methods. The most often used procedures were tendon repairs, joint arthroplasty, and synovectomy. Significant progress was made in pain alleviation and functional recovery following surgery, and most patients reported improved hand and foot function. However, in several cases, difficulties were noted, such as problems with the implant and ongoing disease activity. The durability of surgical outcomes was established by long-term follow-up, wherein a proportion of patients required revision surgeries. This longitudinal analysis highlights how surgical treatment for RA in the hand and foot is changing, with a growing trend towards minimally invasive and joint-preserving procedures.[3]

Although surgical procedures have significantly reduced discomfort and enhanced the function of the hands and feet, there is always a chance of problems, which makes postoperative surveillance and patient selection crucial. The study's conclusions add to our knowledge of the function of surgery in the treatment of advanced RA and offer suggestions for improving patient outcomes and reducing long-term morbidity. An autoimmune inflammatory disease that mostly affects the synovial joints is called rheumatoid arthritis (RA). It is characterised by deformity, discomfort, gradual joint degradation, and impaired function. Even while biologic medicines and disease-modifying drugs have greatly improved the management of RA, a small percentage of patients still endure progressive joint deterioration, especially in the hands and feet. Surgical procedures are frequently required in these severe instances in order to relieve discomfort, rectify deformities, and restore function. RA can have particularly crippling effects on the hand and foot, which are complex anatomical regions.[4]

In these regions, the effects of RA include tendon ruptures, contractures, erosions, and joint instability. A difficult and developing subject, surgical treatment for RA in the hand and foot seeks to address these issues while maintaining maximum joint function. The purpose of this longitudinal study is to provide further insight into the surgical management of RA in the hand and foot. It aims to shed light on how surgical methods have changed over time, how these procedures have worked, and what consequences they have brought about. To optimise care and improve quality of life for patients with RA, a thorough awareness of surgical management trends, developments, and obstacles is essential.[5]

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