

# QUICK FACTS: REACTIVE ARTHRITIS | FOR HEALTHCARE

- Although the case definition is variable, Reactive Arthritis (ReA) -- formerly referred to as Reiter's Syndrome -- is generally regarded as an inflammatory condition that occurs 1-3 weeks after a gastrointestinal infection with symptoms lasting between 3-12 months.

- Single joint inflammation is the primary symptom, along with inflammation of the eyes and urinary tract, anemia is a secondary complication from ReA.

- Symptoms can present together, alone, or not at all. Some people diagnosed with ReA will develop chronic arthritis.

About 50% of people who develop ReA are genetic marker HLA-B27 positive -- even though it is present in less than 10% of the population.

**Infections that can trigger ReA include:**

**Salmonella**

**Shigella**

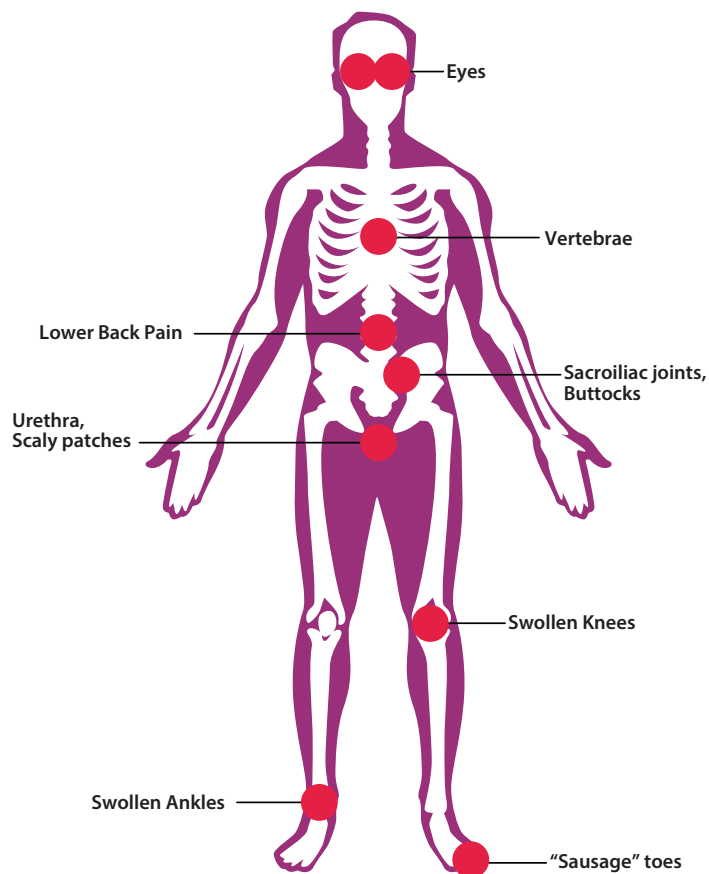
**Yersinia**

**Campylobacter**



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- There are no laboratory tests to diagnose ReA.
- Men and women are equally like to develop ReA from foodborne pathogens.
- 15-50% of patients will experience a second flare.

If your patient has a foodborne illness, checking for HLA-B27 is important. HLA-B27 is also related to longer arthritic flares.

SOURCES: 1. Am Fam Physician. 1999 Aug 1;60(2):499-503

2. [www.niams.nih.gov/Health\\_Info/Reactive\\_Arthritis/](http://www.niams.nih.gov/Health_Info/Reactive_Arthritis/)

## **Pathogen-specific Risk of Reactive Arthritis from Bacterial Causes of Foodborne Illness.**

A total of 1753 cases of gastroenteritis were identified. ReA incidence ranged from 0 to 4 per 100,000 person-years.

### **CONCLUSION:**

These data are consistent with prior studies and highlight the need for continued primary prevention efforts.

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# REACTIVE ARTHRITIS: DANA'S STORY

Dana was a happy, healthy three-year-old who loved preschool, playing at the park with her dog Abby, and traveling with her family. On a beautiful Easter Sunday in 2001 her life changed forever. My husband, our daughter, Dana, and I were so looking forward to brunch, after church, at a local resort hotel. It was a gorgeous day, and we were seated between an amazing view of the ocean and a wide array of gourmet food. I was not surprised that Dana, a typical three-year-old picky eater, did not want anything to eat except cantaloupe. She proceeded to fill her plate at least three times during brunch while my husband and I indulged in the other delicious fare. It was a wonderful afternoon and truly a memory we will not forget -- in more ways than one!

The next day, Dana complained of a headache and stomach ache. I contacted her pediatrician and was told it was just a virus. Over the next six days Dana continued to get worse. Her fever rose to 104°F, she had severe stomach cramping, and bloody diarrhea. Finally, after a visit to the emergency room, she was admitted to the hospital. After four days of blood tests, stool cultures, surgical consults, ultrasounds, a negative E. coli culture, and negative tests for parasites and rotavirus, the doctors were still unable to find anything conclusive. Dana was, however, able to keep fluids down, and her more severe symptoms had lessened so the doctor allowed us to take her home. We were relieved to finally be going home!

We were discharged from the hospital at 7:00pm. Two hours later, after having just tucked Dana into bed, the phone rang and we received news that no parent should ever have to get: Dana had a positive culture for Salmonella Poona blood poisoning, and they advised us to bring her back to the hospital immediately. She needed to begin an aggressive course of IV antibiotic treatment right away. We had asked if we could wait until the morning.

They said no. Because the Salmonella Poona was in her bloodstream it could produce more severe health consequences, including death. Fifteen minutes later we were in the car on our way to the hospital. It was a very long ride--as we wondered whether our daughter would live or die.

Dana was on multiple antibiotics for the next 5 days. It was painful to listen to her scream as the IV pushed this medicine into her 40 pound body. It was painful to watch as they attached heart monitors, oxygen, and catheters while they made sure her room was equipped with everything necessary should she "CODE". For five days I never left her side as I was not sure if when I returned she would be alive. After a long week, we were able to take Dana home to stay! A week after our discharge, the FDA warned consumers that an outbreak of foodborne illness associated with cantaloupe had caused numerous illnesses and deaths across 14 states. Our state was one of them and Dana was one of the victims. Although we were thrilled to be home, we were just beginning to learn how Dana's Salmonella Poona would become a debilitating and lifelong challenge for her, and our family.

Ten days after ingesting the cantaloupe, Dana started complaining of joint pain. She continued to complain of joint pain and soreness at ages 4, 5, 6, 7, 8, 9, and at age 10.

Pediatricians and orthopedists continually dismissed it as "growing pains". A day at Disney World, shopping, or playing with her beloved dog would turn into sleepless night of pain for Dana because her knees and ankles were sore. Not many people think that joint pain can be associated with foodborne illness, but it can, and more often than one might think.

At age 11, Dana was diagnosed with Reactive Arthritis (ReA). ReA is an inflammatory arthritis that can arise after certain foodborne illnesses. This condition affects Dana's life every day.

Despite the challenges that Dana faces daily because of her ReA, our family is blessed. Blessed because Dana is a survivor of a foodborne illness.

*Addendum: Now in her 20's, Dana still suffers from the consequences of her childhood foodborne illness. She continues to inspire others by her passion to spread awareness, and she's even written a children's book about the importance of food safety.*

*"The phone rang and we received news that no parent ever should have to get."*



DANA