

A man and a woman are seen from behind, standing on a grassy bank and looking across a calm lake towards a range of misty, forested mountains. Both individuals are wearing large, tan-colored backpacks. The man on the left is wearing a brown cap and a dark jacket, while the woman on the right has her hair tied back and is wearing a blue jacket. The scene is peaceful and scenic, with evergreen trees visible on the right side of the frame.

Rhumalgan[®]

Diclofenac

relieve joint inflammation



Lagap

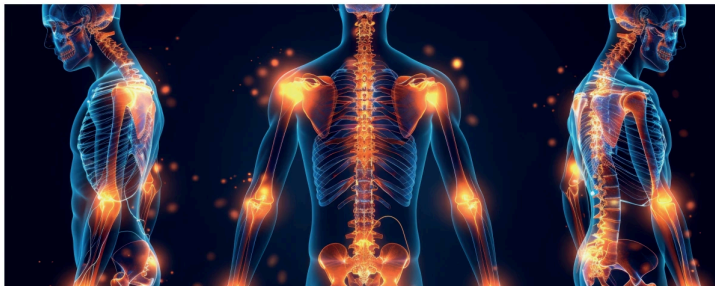
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Inflammation of the joints

1. Origins and Symptoms

Joint inflammation (arthritis) can have many causes: autoimmune diseases (rheumatoid arthritis), crystal deposits (gout), viral/bacterial infections, or trauma (sprains, impacts). Osteoarthritis (wear and tear) or overuse can also trigger inflammation. Being overweight, smoking and chronic stress also contribute to these conditions.

Symptoms include pain at rest or at night, swelling, local warmth, and morning stiffness.



Main causes of joint inflammation:

Chronic inflammatory (autoimmune) diseases:

Rheumatoid arthritis and psoriatic arthritis, in which the immune system attacks the joints.

Crystalline arthritis (deposits):

Gout (uric acid) or pseudogout (calcium pyrophosphate) cause intense pain.

Infectious causes:

Viruses (influenza, chikungunya) or bacteria that directly infect the joint.

Mechanical and traumatic causes:

Osteoarthritis (cartilage wear) causes inflammatory flare-ups, as do sprains, dislocations or overuse.

Contributing factors:

Being overweight, a sedentary lifestyle, smoking, poor diet (refined sugars) and stress. Symptoms include pain at rest or at night, swelling, localised heat and morning stiffness.

At-risk population

2. At-risk populations

Elderly people: osteoarthritis, osteoporosis, etc.

65% of those over 65

80% of those over 80

Athletes: joint injuries, overtraining, etc.
mainly amateurs

Manual labourers: physical overload, repetitive movements, etc.

Populations with comorbidities: diabetes, overweight and obesity, autoimmune diseases, etc.

3. Identify the causes of joint pain

Mechanical causes	Inflammatory causes	other causes	psychological causes
Osteoarthritis: progressive wear and tear of cartilage (physiological ageing, excess weight) Injuries: sprains, dislocations, fractures Overuse: repetitive movements, physical overload	Rheumatoid arthritis: autoimmune disease. Psoriatic arthritis Systemic lupus Erythematosus Gout: uric acid crystals. Calcium pyrophosphate arthritis (formerly pseudogout) Ankylosing spondylitis: chronic inflammation of the spine.	Infections: septic arthritis, influenza, COVID-19, Lyme disease, gonorrhoea, etc. Metabolic: menopause, osteoporosis, vitamin D deficiency, etc. Neurological: fibromyalgia, peripheral neuropathy, etc.	Depression Anxiety Social isolation Professional disengagement...

Symptoms Diagnosis

4. Physical symptoms

Most common symptoms:

- Redness, swelling and feeling of warmth
- Stiffness, acute pain, chronic pain
- Functional impact
- Reduced mobility with significant difficulties, loss of range of motion

Less frequent but also:

Skin rashes, spots, recent purple spots, sores in the mouth, nose or genitals, chest pain, shortness of breath, recent chronic or severe cough, abdominal pain, fever, sweating, chills, abnormal weight loss, redness and pain in the eyes, recent trauma.

5. Diagnostic methods, medical history, clinical examination, laboratory examination

Observation and examination of all joints to check for:

- swelling, redness, heat, tenderness, joint crepitus. Examination of the eyes, mouth, nose and genitals to rule out or detect wounds or other signs of inflammation.
- Inspection of the skin to check for rashes or spots.
- Palpation of the lymph nodes.
- Mobility test to measure inflammation and detect the source of pain: active and/or passive range of motion.
- imaging examinations such as X-rays, MRIs, CT scans,
- blood tests such as VS, CRP, Anti-DNA
- joint puncture

Treatments well-being

6. Drug treatment

The most common drug treatments are:

- PAIN RELIEVERS: paracetamol, NSAIDs, Coxibs
- CORTICOSTEROIDS: in injectable form in cases of severe inflammation.
- MORE SPECIFIC MEDICATION: colchicine (gout) biotherapy, antibiotics

7. Non-pharmacological approach

- PHYSIOTHERAPY

A variety of exercises to improve mobility

- LOCAL APPLICATION OF HEAT OR COLD

Heated pockets and belts, ice packs

- ERGOTHERAPIE

daily adaptation of movements to avoid maximum pain, use of specific tools

8 . Other means

- ALTERNATIVE AND COMPLEMENTARY MEDICINE

Acupuncture, glucosamine, turmeric and omega-3 supplementation

- CHIRURGIE

Prostheses implants, others

- Stem cells, PRP (platelet-rich plasma), TENS

Rhumalgan®

Diclofenac

relieve joint inflammation

Diclofenac is a potent non-steroidal anti-inflammatory drug (NSAID) used to reduce inflammation, pain and fever. It is indicated for the treatment of rheumatism, joint pain (osteoarthritis, arthritis, sciatica) and trauma (sprains, bruises, tendonitis). Available in tablets, gel, cream, powder, suppositories or injections, it usually requires a prescription.

It is certainly the most widely prescribed AIDNS in the world.

Rhumalgan®

Available in various forms.



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