Can Rheumatoid Arthritis Affect the Heart?

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How Does Rheumatoid Arthritis Affect the Heart?

People with RA have the highest risk for heart disease. This includes heart attack, stroke, atrial fibrillation, congestive heart failure, and atherosclerosis.

One study reported in *Nature Reviews Rheumatology* finds more than 50% of the premature deaths in people with RA are related to heart disease.

Here is what you need to know about how RA affects your heart, heart disease risk factors, and other potential causes of breathing problems and chest pain.

**Chronic Inflammation of the Muscle of the Heart**

Chronic inflammation, regardless of its source, is a risk factor for the development of heart disease. Research shows people who suffer from inflammatory conditions are more likely to have cardiac events.

Your risk for heart disease or heart failure is doubled with RA, especially if you have a rheumatoid factor (RF), this according to some 2013 study out of the Mayo Clinic, Rochester, Minnesota, USA. A rheumatoid factor is an antibody measure in the blood doctors use to diagnose RA.

One report in *the Journal of Internal Medicine* finds people with RA can have heart problems as early as the first year following diagnosis. So, it is clear that getting RA under control as soon as possible and addressing any additional risks is vital to preventing cardiovascular damage.

**How Does Rheumatoid Arthritis Affect the Heart and Lungs?**

When your RA flares up, the membrane surrounding your heart can also become inflamed. And the worse your RA is, the worse your flares will be, and this means a higher chance your heart is inflamed.

The inflammation around your heart is called pericarditis. With time, all that inflammation causes the heart membrane to get thick and tight, making it harder for your heart to do its job.

Rheumatoid nodules on your heart are also a real possibility. These firm lumps are a complication of RA and affect the way the heart works.

**Irregular Heartbeat**

People with RA have an increased risk of atrial fibrillation (AFib), a condition that causes irregular heartbeats. And AFib is also linked to strokes.
According to one Danish study, adults with RA are 40 percent more likely to have AFib, and they are also 30 percent more likely to have a stroke.

**Congestive Heart Failure**

A study reported in 2005 from researchers at the Mayo Clinic found RA patients had twice the risk for congestive heart failure. The risk was higher for RA patients who were RF-positive, and in all RA patients, the increased risk was there even in the absence of other cardiovascular risk factors.

A second Mayo Clinic study, this one reported in 2008, found when heart failure presented itself in RA patients, patients had no evidence of signs or symptoms, this compared to people without RA. Death with the first year following heart failure with RA is also higher.

The Mayo Clinic researchers conclude this data warrants better ways of screening people with RA for heart problems and to work towards improving survival rates after heart failure.

**Rheumatoid Arthritis and Cholesterol Levels**

There has been evidence linking medications used to treat RA to cholesterol increases, and this includes biologic and non-biologics, such as methotrexate. Too much cholesterol in your blood builds up in the arteries, causing atherosclerosis, a form of heart disease.

While additional research is needed to confirm the connection between high cholesterol and RA medications, people with RA should have their levels checked every 1 to 2 years because of their increased risk for heart disease.

**Breathing Problems**

RA inflammation can cause scarring and damage to lungs, and a condition called pulmonary fibrosis. With time, damage makes breathing harder.

Research from the National Library of Medicine finds 40% of people with RA have pulmonary fibrosis. And around 10 to 20% of deaths in patients with RA are related to lung problems, this according to one report in *Rheumatic Diseases Clinics of North America*.

It is important to mention any breathing difficulties you are having with your doctor, regardless of how minor they seem. Shortness of breath is the most common symptom of a lung problem.

Other symptoms include:

- A dry, hacking cough
- Extreme fatigue
- Weakness
- Loss of appetite
- Fever
- Pain with breathing

Symptoms may be mild at first and only occur with activity, but most, especially breathing troubles, will worsen with time.

**Chest Pain**

The same inflammation that causes joint pain causes inflammation of the ribcage, a condition called costochondritis. While costochondritis isn’t life-threatening, the pain can mimic a heart attack.
Research from the German journal, *Der Internist* finds up to 50% of the chest pain is caused by the musculoskeletal condition, such as RA.

If you have not previously experienced costochondritis, or if you experience new chest pain symptoms, you should get those checked out right way. It is better to be safe than sorry when it comes to your heart health.

**Determining Your Risk**

Having heart disease factors, such as high blood pressure, high cholesterol, being overweight and a family history of heart disease, are additional heart disease risk factors for someone with RA.

Further, the more severe your RA is, the more likely you are to experience cardiovascular problems. And the medications you take to treat RA also contribute to heart problems, including NSAIDs and corticosteroids, and should be taken with caution.

If you are a woman with RA and go through menopause before age 45, your risk for heart disease is even higher, this according to researchers out of the Mayo Clinic, Rochester, Minnesota, USA. This because estrogen levels are lower after menopause and your body needs estrogen to protect against heart disease.

Whether one risk factor applies to you or many, it is important to address these concerns with your doctor, so you can protect your heart and get ahead of problems.

**How to Protect Your Heart**

You can protect your heart by being active, eating a healthy diet, managing stress and working with your doctor to manage RA inflammation and lower your risk for heart disease.

Talk to your doctor about ways to stay physically active with RA and consider consulting with a dietitian to find the best diet to keep inflammation and weight down.

Make sure you know the symptoms that could indicate a problem with your heart. Symptoms such as pain or pressure in your chest or upper body, shortness of breath, lightheadedness, and nausea are signs something isn’t right with your heart.

And remember, just because your RA is controlled doesn’t mean you shouldn’t continue to prioritize your heart health. Continue to work with your doctor to find the best treatment course for you.