

## 10 symptoms not to ignore

You already know that obvious symptoms, such as chest pain and severe abdominal pain, require immediate medical attention. But the not-so-obvious symptoms may leave you wondering whether you need to seek care. Here's a list of symptoms that merit at least a call to your doctor. While some of them are more urgent than others, none should be ignored.

### **1. Unexplained weight loss.**

Losing weight when you're not trying to may sound good, but in reality it can signal a health problem. If you've lost up to 10 percent of your weight during the past six months see your doctor.

unexplained drop in weight could be caused by overactive thyroid (hyperthyroidism), depression, liver disease, cancer or other noncancerous disorders, or disorders that interfere with how your body absorbs nutrients (malabsorption disorders).

### **2. Persistent or high fever**

Fever isn't an illness, but it is often a sign of one.



Most of the time, a fever means your body is fighting a common viral or bacterial infection. However, a persistent low-grade fever — over (38.9 C) that lasts for three days or more should be checked by your doctor. Similarly, if you have a high fever greater than (40 C) see your doctor as soon as possible.

Persistent fever can signal hidden infections, which could be anything from a urinary tract infection to tuberculosis. At other times, malignant conditions such as lymphomas — cause prolonged or persistent fevers, as can some medications.

### Inside this issue:

1. 10 symptoms not to ignore
2. Treatment of Rheumatoid Arthritis and Hepatitis C virus.

### Special points of interest:

- \* Sudden weight loss.
- \* Persistent high fever.
- \* Shortness of breath.
- \* Unexplained changes in bowel habits .
- \* And others .....



### **3. Shortness of breath**

Feeling short of breath — more than that caused by a stuffy nose or exercise — could signal an underlying health problem. If you're unable to get your breath or you're gasping for air or wheezing, seek emergency medical care. Feeling breathless when lying down, with or without exertion, also is a symptom that needs to be medically evaluated without delay.

Causes for breathlessness may include chronic obstructive pulmonary disease, chronic bronchitis, asthma, pneumonia, a blood clot in the lung (pulmonary embolism), as well as other heart and lung problems. Difficulty breathing can also occur with panic attacks, which are episodes of intense anxiety that cause physical symptoms.

### **4. Unexplained changes in bowel habits**

People often wonder what "normal" means in terms of bowel movements. It varies widely, but anywhere from three times a day to three times a week is considered normal. Know what is typical for you. Call your doctor if you notice unusual or unexplained changes such as Bloody stools, Diarrhea lasting a week, Constipation that lasts for more than three weeks, Unexplained urges to have a bowel movement, Black or tarry-colored stools.

Changes in bowel habits may signal a bacterial infection — such as campylobacter or salmonella — or a viral infection or parasitic infestation. Among other possible causes are inflammatory bowel disease and colon cancer.

### **5. Delirium**

is sudden severe confusion and rapid change in mental state, such as from lethargy to agitation. Close friends or family members may be the ones who notice this symptom. Immediate medical evaluation is warranted if you have any of the following

Sudden confused thinking, Disorientation — confusion about time or place, Sudden personality or behavior changes, such as becoming aggressive, Sudden problems with concentration or Memory.

Changes in behavior or thinking may be due to many problems, including infection, anemia, low blood sugar, or psychiatric conditions or medications, especially ones you've recently started taking .

### **6. Sudden severe headache**

Headaches are common and generally not a cause for concern. However, a sudden severe headache could signal a serious problem. Seek prompt medical attention if You experience Sudden severe headache like a clap of thunder, Headache accompanied by a fever, stiff neck, rash, confusion or seizures, New pattern of headaches after age 55.

The last item may indicate that you have temporal arteritis inflammation of the arteries in the scalp, brain and eyes a rare, but treatable condition that usually begins in middle age ,Other possible causes of severe headache may include a brain tumor or aneurysm.

### **7. Sudden weakness, loss of vision or speech**

If you have these signs or symptoms, minutes count. They're warning signs of a stroke or a transient ischemic attack (TIA), sometimes called a ministroke.

Seek immediate emergency medical care if you have Sudden weakness or numbness on one side of your body, Sudden dimness, blurring or loss of vision, Loss of speech or trouble understanding others, Unexplained dizziness or unsteadiness, or a sudden fall

Sudden severe headache, like a "bolt out of the blue".

### **8. Flashes of light**

The sudden sensation of seeing flashing lights may signal retinal detachment. Immediate medical care may prevent permanent vision loss.

### **9. Feeling full after eating very little**

Early satiety feeling full sooner than normal or after eating less than usual that lasts for more than a week should be checked by your doctor. Possible causes of early satiety include heartburn and irritable bowel syndrome, as well as more-serious problems such as gastric outlet obstruction or esophageal cancer or stomach problems.

### **10. Hot, red or swollen joint**

If one of your joints is swollen or inflamed, it may signal a joint infection, which requires emergency care. Other causes may include gout or some types of arthritis.

### **References**

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## **Treatment of Rheumatoid Arthritis and Hepatitis C virus**

Chronic hepatitis C virus (HCV) infection is present in about 1.8% of the American population and appears to affect a similar percentage of patients with rheumatoid arthritis (RA). Treatment of patients with co-existing rheumatoid arthritis [RA] and hepatitis C virus [HCV] poses a difficult therapeutic challenge because of the risk that the treatment of RA will aggravate hepatitis and increase viraemia. Many disease modifying antirheumatic drug [DMARDs], including methotrexate MTX and leflunomide, have the potential for hepatotoxicity, and drugs that are less hepatotoxic may not be adequate to control severe rheumatoid disease. Corticosteroids are a worrisome alternative because high dose methyl prednisolone has been shown to increase the HCV viral load up to 100-fold and lower doses may cause a more modest increase in levels of HCV viraemia.



**Deformities of long-standing rheumatoid arthritis**

Because the tumour necrosis factor (TNF) antagonists have no known liver toxicity, they represent an attractive treatment option for such patients; however, the effect of TNF blockade on chronic HCV infection is unknown. We investigated the influence of TNF antagonists on liver function and viral load to assess the safety of these drugs in patients with RA and chronic, stable HCV infection. Both retrospective and prospective studies are reported here.

## RESULTS

TNF antagonists are effective in the treatment of RA and have no known direct liver toxicity. Although there are concerns about their potential for exacerbation of infections, including reactivation of tuberculosis, the effect of TNF antagonists on the course of HCV infection is not established. We are aware of two case reports in which infliximab was used in patients with HCV infection and Crohn's disease, and in those cases infliximab treatment was not associated with progression of HCV viraemia or worsening hepatitis. In our series of 24 patients, liver function tests and HCV viral load did not worsen over the median of nine months (range 2–34) that patients were followed up. This lack of change in viral load and transaminases is in contrast with the changes commonly seen in heavily immunosuppressed HCV patients after organ transplantation, a finding that suggests that TNF antagonists, when used at recommended doses, do not accelerate HCV infection.

## References

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Address : M.U.S.T, 6 October City -  
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Fax / Phone: 02/38377643

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