



Points To Remember About Polymyalgia Rheumatica

- Polymyalgia rheumatica causes muscle pain and stiffness in the neck, shoulder, and hip.
- The disorder mainly affects people over 50, especially women.
- Polymyalgia rheumatica is treated with medications, such as corticosteroids.
- If you have polymyalgia rheumatica, your doctor should also look for signs of another disorder, [giant cell arteritis](#).

What is polymyalgia rheumatica?

Polymyalgia rheumatica causes muscle pain and stiffness in the neck, shoulder, and hip. The pain and stiffness usually occur in the morning or when you haven't been moving for a while. It typically lasts longer than 30 minutes. For most people, the condition develops over time. But for some people it can start quickly – even overnight. In addition to stiffness, you may have a fever, weakness, and weight loss.

Polymyalgia rheumatica usually goes away within one year, but it could last several years.

People with polymyalgia rheumatica often have [giant cell arteritis](#) a disorder associated with inflammation of arteries located on each side of the head.

Who gets polymyalgia rheumatica?

Women are more likely than men to develop polymyalgia rheumatica. This disease mostly affects people over the age of 50, with highest rates at 70 to 80 years of age.

What are the symptoms of polymyalgia rheumatica?

Symptoms of polymyalgia rheumatica can include:

- Pain and stiffness in the neck, shoulder, and hip area.
- Flu-like symptoms, including fever, weakness, and weight loss.

What causes polymyalgia rheumatica?

Researchers don't know what causes polymyalgia rheumatica. It is associated with:

- Immune system problems.
- Genes.
- Environmental triggers, such as an infection.
- Aging processes.

Is there a test for polymyalgia rheumatica?

There is no single test to tell if you have polymyalgia rheumatica. The doctor usually bases the diagnosis on:

- Medical history.
- Symptoms.
- Physical exam.
- Blood tests.

How is polymyalgia rheumatica treated?

Polymyalgia rheumatica is treated by medications including:

- **Corticosteroids** such as prednisone. You will start with a low daily dose that is increased as needed until symptoms disappear. Your doctor may then gradually reduce the dose, and you will probably stop taking the medication after six months to two years. Your doctor will put you back on the medicine if symptoms come back. You will stop taking the medicine when symptoms completely go away.
- **Nonsteroidal anti-inflammatory drugs (NSAIDs)**, such as aspirin and ibuprofen. The medication must be taken daily, and long-term use may cause stomach problems. For most patients, NSAIDs by themselves do not make symptoms go away.

For more info

U.S. Food and Drug Administration

Toll free: 888-INFO-FDA (888-463-6332)

Website: <https://www.fda.gov>

Drugs@FDA at <https://www.accessdata.fda.gov/scripts/cder/daf/>. Drugs@FDA is a searchable

catalog of FDA-approved drug products.

Centers for Disease Control and Prevention, National Center for Health Statistics

Website: <https://www.cdc.gov/nchs>

American College of Rheumatology

Website: <https://www.rheumatology.org>

American Autoimmune Related Diseases Association, Inc.

Website: <https://www.aarda.org>

Arthritis Foundation

Website: <https://www.arthritis.org>

National Organization for Rare Disorders

Website: <https://www.rarediseases.org>

If you need more information about available resources in your language or other languages, please visit our webpages below or contact the NIAMS Information Clearinghouse at NIAMSInfo@mail.nih.gov.

- [Asian Language Health Information](#)
- [Spanish Language Health Information](#)