

Table 1 Distribution of small joint erosions in 83 patients with RA

Joint	No of patients with erosions in joint	Proportion of patients showing changes in joints (%)		
		Symmetrical	Asymmetrical	Partially symmetrical
DIP	10	0	70	30
PIP	28	11	46	43
MCP	52	8	38	54
Wrist	56	59	41	NA

NA=not applicable.

The x rays were then read by two independent observers who recorded the number of erosions for each joint, for all joints in the metacarpophalangeal (MCP), proximal interphalangeal (PIP), and distal interphalangeal (DIP) groups. The wrist was considered as one joint, and no distinction was made between radioulnar and carpal changes. Only those erosions identified by both observers were analysed, and a group of joints was considered symmetrical if exactly the same joints on both sides were affected; partially symmetrical if both sides were affected but not necessarily in the same fashion; and unilateral if only one side was affected. Our results are shown in Table 1.

Erosions were commonest in the wrist (67%) and MCP joints (63%). Absolute symmetry was commonest in the PIP joints (11%), and it appears to be the exception rather than the rule for all groups of small joints. The prevalence of DIP erosions was similar to that reported by Halla (12% v 16%), but we noted a much higher percentage of unilateral involvement (70% v 22%). These observations were, however, frequently dependent upon the identifica-

tion of a single erosion in a single DIP joint and may therefore have been particularly sensitive to observer variation.

The traditional teaching that RA is a symmetrical polyarthritis is not reflected in the radiological appearance of these joints taken individually. If the numbers of patients with symmetrical and partially symmetrical involvement are added together so that symmetry represents involvement of similar groups of joints rather than specific single joints, then symmetry is common, and this would concur with the clinical observation of symmetrical involvement of groups of joints in RA.

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Reference

- Halla J T, Fallahi S, Hardin J G. Small joint involvement: a systematic roentgenographic study in rheumatoid arthritis. *Ann Rheum Dis* 1986; **45**: 327-30.

Note

International symposium on immunopathology of rheumatic diseases: antinuclear antibodies

This symposium will be held in Montpellier on 3 June 1987. Further details from Professor J Sany, Université de Montpellier, Centre Gui de Chauliac, Hôpital Saint-Éloi, 34059 Montpellier, France.