

DAS 28

Quick reference guide

DISEASE ACTIVITY SCORE

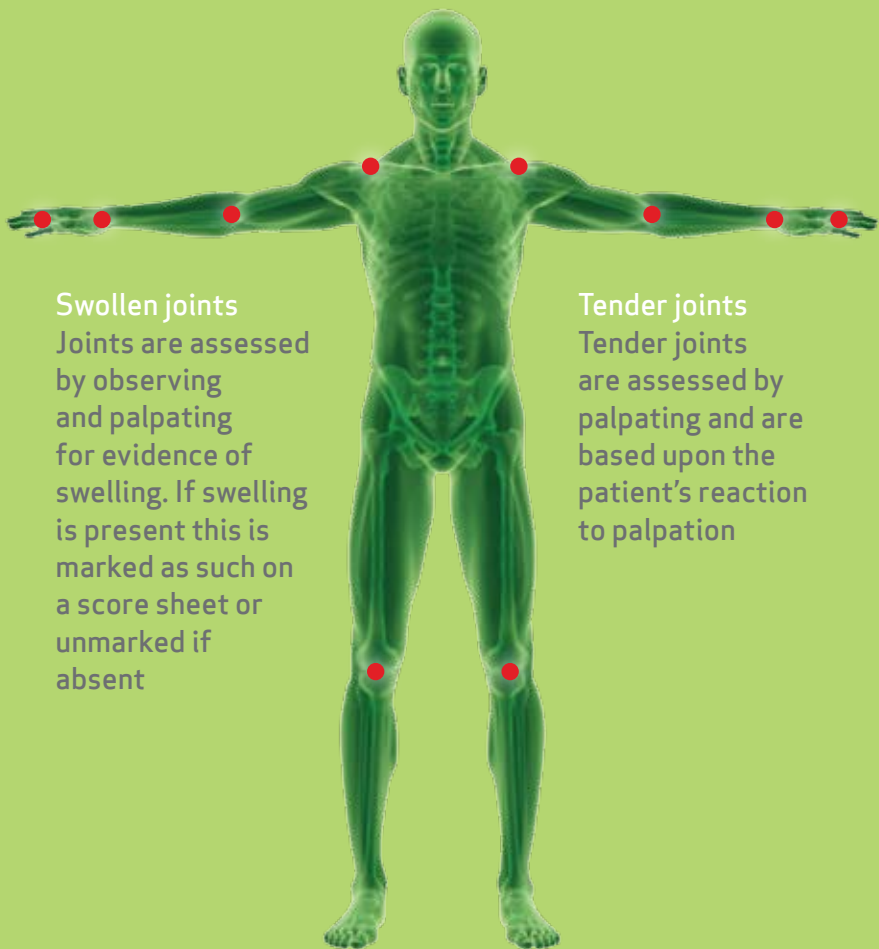
DAS



In collaboration with the National Rheumatoid Arthritis Society (NRAS), the development of this guide and associated DAS materials were sponsored by Roche Products Limited

The DAS 28 examination

The DAS 28 examination involves the assessment of 28 joints including the shoulders, elbows, wrists, knees and joints in the hand



Swollen joints

Joints are assessed by observing and palpating for evidence of swelling. If swelling is present this is marked as such on a score sheet or unmarked if absent

Tender joints

Tender joints are assessed by palpating and are based upon the patient's reaction to palpation

General examination techniques

- a) Compare the joint being examined with the same joint on the other side of the body to assess for differences



- b) View joints from all angles, including front, back and sides



- c) Review joints in motion (active and passive)
Note the range of movements and restrictions



- d) Palpate joints to assess for swelling and tenderness
Look for the patient's reaction to indicate areas of tenderness



- e) Feel for differences in temperature by sweeping the back of your hand over joints on both sides of the body



The DAS 28 examination – key stages

1. Shoulder joints



Grip the shoulder joint between your thumb and fingers with the patient's arm slightly flexed and initiate passive movement of the shoulder from 0 through to 50 degrees

Observe and ask the patient if the movement has caused any pain or tenderness

Palpate and observe carefully for swelling

2. Elbow joints



Flex the patient's elbow between 70 and 80 degrees and examine using both your hands

Place your thumb between the olecranon and lateral epicondyle and place your index finger in the ante-cubital fossa

Palpate on the epicondyles either side and observe for swelling

3. Wrist joints



Ask the patient to move their wrist up (dorsiflexion) and down (palmar flexion) through 10 to 20 degrees
Note any pain or disparity between joint movements



Use both your hands to examine the dorsal surface of the patient's wrist in a neutral position, palpating along the joint margin with your thumbs. Observe for pain and tenderness, as indicated by the patient

4. Hand joints

Two examination methods that can be adopted for joints in the hand:



1. The patient's hand is examined in a flexed position, with metacarpophalangeal joints flexed at approximately 50 degrees



2. The patient's hand is examined resting flat on a surface

a) Metacarpophalangeal joints



Palpate either side of the joint margins using both your thumbs. Continue until all joints have been examined

b) Proximal interphalangeal joints



Use your thumb and index finger on both hands to palpate all sides of the joint, feeling the lateral and medial joint margins and exerting pressure alternatively on the palmar and dorsal aspect of the joint. Continue until all joints have been examined

5. Knee joints



Use your examining hand to grasp either side of the patellofemoral joint to feel the medial and lateral joint margins

At the same time use your supporting hand to grasp above the knee, pushing down to enable the fluid in the joint to be more clearly identified



Sweep along the sides of the knees and observe the opposite side for a bulge of fluid as a result of the sweeping action

6. Record the results



During the examination ensure that all tender and swollen joint counts are recorded on the score sheet

7. Review blood results



Review and discuss your patient's most recent erythrocyte sedimentation rate (ESR) or C-reactive protein (CRP) results

8. Patient's global assessment of disease activity



Ask your patient to mark on the *Visual Analogue Scale* their level of pain and discomfort on the day of their assessment

9. Calculate DAS



Total up the swollen and tender joint count and combine with the patient's global assessment of disease activity and blood results to calculate the patient's disease activity score

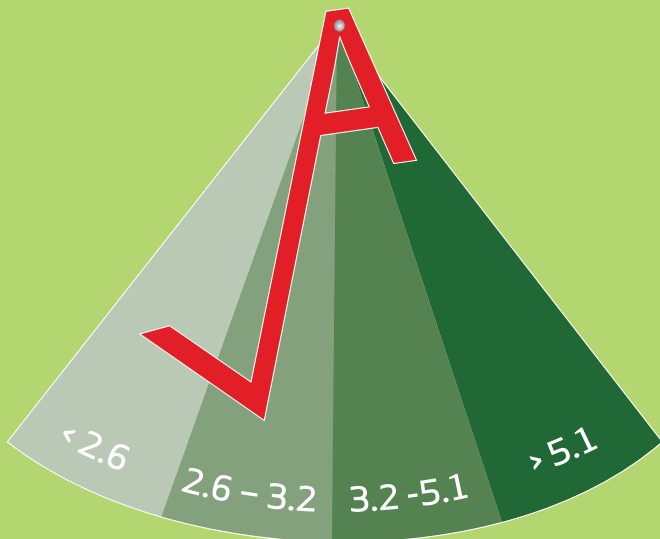
10. Patient consultation



Discuss the disease activity score with your patient and compare it against the previous result. Discuss what next steps (if any) need to be taken, including arranging their next appointment time



Finally, record the score in your patient's notes and in their 'Know about your DAS' booklet and wallet card if available



DISEASE ACTIVITY SCORE

- Disease remission¹
- Low disease activity¹
- Moderate disease activity¹
- High disease activity¹

For further copies of this guide or DVD, please contact the NRAS helpline on: 0800 298 7650 or visit: www.nras.org.uk/DAS

A patient version of the DVD and an information booklet are also available on request or can be downloaded from the NRAS website

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¹ J. Fransen, P.L.C.M. van Riel.

The Disease Activity Score and the EULAR response criteria.

Clin Exp Rheumatol 2005; 23 (Suppl. 39):S93-S99

