

# Difference Between Arthritis and Tendonitis

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## Key Difference – Arthritis vs Tendonitis

Arthritis and tendonitis are two **inflammatory** processes happening at two different components of the musculoskeletal system. The key difference between arthritis and tendonitis is the site of inflammation; arthritis **is the inflammation of the joints whereas tendonitis is the inflammation of the tendons**. Since both these conditions inflammation and pain, it may be difficult to differentiate at first.

## What is Arthritis?

Arthritis can be defined as inflammation of the joint or joints, resulting in pain and/or disability, joint swelling, and stiffness. Arthritis can be due to numerous causes such as **infection**, trauma, degenerative changes or metabolic disorders. Different types of arthritis have been described below according to the peculiar characteristics seen in each category.

### Osteoarthritis

**Osteoarthritis** is the commonest type of arthritis. It occurs as a result of the damages to the articular **cartilage** induced by a complex interaction of genetic, metabolic, biochemical and biomechanical factors. This gives rise to an inflammatory response affecting the cartilage, **bone**, **ligaments**, menisci, synovium, and capsule.

Usually, the incidence of osteoarthritis before 50 is uncommon but not unheard of. With the advancing age, some radiological evidence will appear indicating the likelihood of getting osteoarthritis in the future.

### Predisposing Factors

- **Obesity**
- **Heredity**
- Polyarticular OA is more common in women
- Hypermobility
- **Osteoporosis**
- Trauma
- Congenital joint dysplasia

## Clinical Features

- Mechanical pain with movement and/or loss of function
- Symptoms are gradual in onset and progressive
- Short-lived morning joint stiffness
- Functional limitation
- Crepitus
- Bony enlargement

## Investigations and Management

On blood testing, ESR is usually normal, but CRP level is slightly elevated. X-rays are abnormal, only in the advanced disease. Early cartilage injury and meniscal tears can be observed by MRI.

During the management of osteoarthritis, the aim is to treat the symptoms and disability, not the radiological appearances. Pain, distress, and disability can be reduced, and compliance with the treatment can be increased by proper patient education about the disease and its effects.

## Rheumatoid Arthritis

**Rheumatoid arthritis** is a type of inflammatory arthritis that causes synovial inflammation. It presents with inflammatory symmetrical polyarthritis. Rheumatoid arthritis is an autoimmune disease where autoantibodies are produced against IgG and citrullinated cyclic peptide.

The typical presentation of rheumatoid arthritis includes a progressive, symmetrical, peripheral polyarthritis which occurs over a period of a few weeks or months in patients between 30 and 50 years of age. Most of the patients complain of pain and stiffness of small joints of the hands (metacarpophalangeal, proximal interphalangeal) and feet (metatarsophalangeal). Distal interphalangeal joints are usually spared.

Diagnosis of RA can be made based on the clinical observations. NSAIDs and analgesics are used in the management of the symptoms. If synovitis persists beyond 6 weeks, try to induce remission with intramuscular depot methyl prednisolone 80-120mg. If synovitis recurs, the administration of Disease Modifying Anti-Rheumatic Drugs (DMARDs) should be considered.

## Spondyloarthritis

Spondyloarthritis is a collective term that is used to describe several conditions which affect the spine and peripheral joints with familial clustering and a link to type 1 HLA antigen. Ankylosing spondylitis, psoriatic arthritis, reactive arthritis, post-dysenteric reactive arthritis and enteropathic arthritis are included in this category.

### Clinical Features of Psoriatic Arthritis

- Mono- or oligoarthritis
- Polyarthritis
- Spondylitis
- Distal interphalangeal arthritis
- Arthritis mutilans

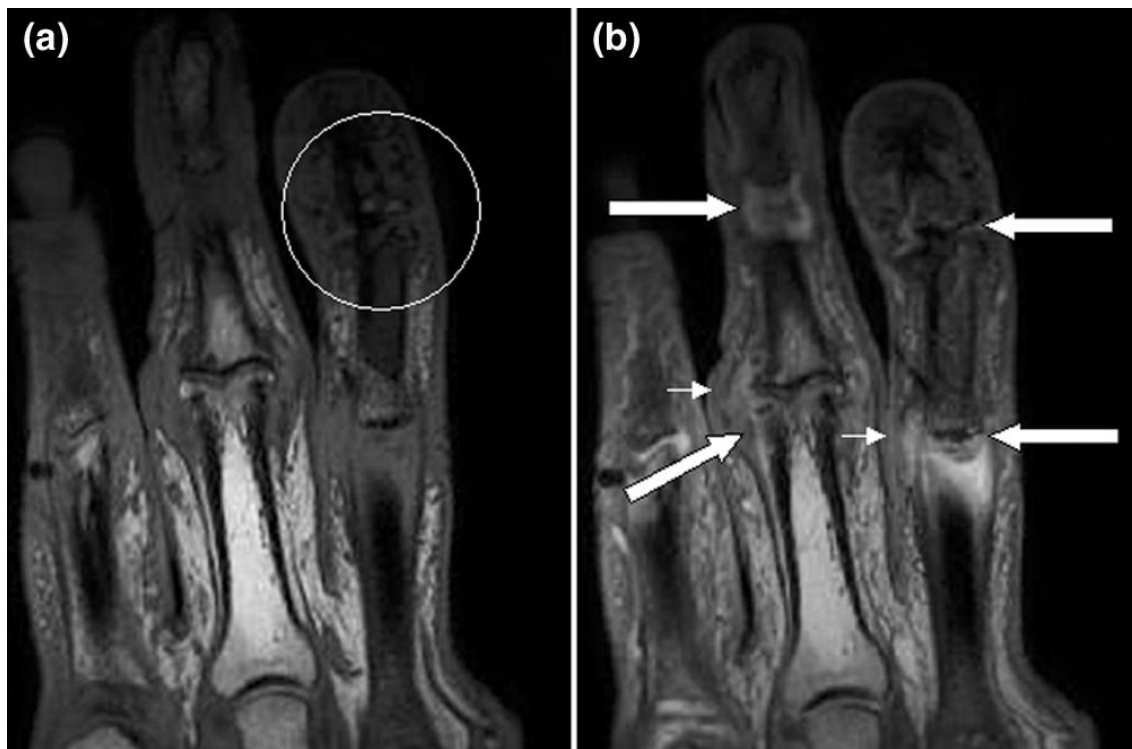


Figure 01: Psoriatic arthritis fingers

### Clinical Features of Ankylosing Spondylitis

- Back pain
- Pain in one or both buttocks
- Retention of the lumbar lordosis during spinal flexion

Regular NSAIDs to improve the signs and symptoms and morning exercises aiming at the maintenance of the spinal morbidity, posture and chest expansion are often required in the management of the disease.

## **What is Tendonitis?**

A tendon is a thick fibrous cord that attaches muscles to bone. Any inflammation or irritation of a tendon can be defined as tendonitis. Pain and tenderness just outside a joint are usually caused by this condition. Tendonitis most commonly affects the tendons around the shoulders, elbows, wrists, knees, and heels. Tennis elbow, Pitcher's shoulder, Swimmer's shoulder, Golfer's elbow and Jumper's knee are some of the common names used to describe tendonitis occurring at different sites.

Tendonitis is much more likely to occur from the repetition of a particular movement over time. It can be triggered by a sudden injury. A majority of people develop tendonitis as an occupational hazard where repetitive movements exert an undue stress on the tendons.

## **Risk Factors**

- Age
- Occupations involving repetitive motions, awkward position. Frequent overhead reaching, vibration, and forceful exertion
- Sports

## **Clinical Features**

- Dull ache on moving the affected limb or joint
- Tenderness
- Mild swelling

If your signs and symptoms interfere with day-to-day activities for more than a few days, seek medical advice.

## **Investigations and Diagnosis**

Diagnosis predominantly depends on the physical examination. An X-ray may be needed to exclude other conditions giving rise to the same signs and symptoms.



**Figure 02: Calcific tendinitis**

## **Management**

Management of tendonitis aims at relieving the pain and reducing the inflammation. The pain associated with tendonitis can be alleviated by using analgesics and corticosteroids. Platelet-rich plasma injection has been observed to be beneficial. The affected muscle-tendon unit can be strengthened by doing specific exercises regularly. Recovery from tendonitis can be expedited by rest, ice, compression, and elevation.

## **What is the difference between Arthritis and Tendonitis?**

<b>Arthritis vs Tendonitis</b>	
An inflammation of a joint is defined as arthritis.	An inflammation of a tendon is defined as tendonitis.

## Effect

This affects the joints.

This affects the tendons.

## Summary – Arthritis vs Tendonitis

Both these conditions are caused by inflammation of the musculoskeletal system. The difference between arthritis and tendonitis is their site of inflammation; arthritis is the inflammation of joints whereas tendonitis is the inflammation of tendons.

### References:

1. Kumar, Parveen J., and Michael L. Clark. Kumar & Clark clinical medicine. Edinburgh: W.B. Saunders, 2009. Print.

### Image Courtesy:

1. “Psoriatic arthritis fingers ar1934-1” By Fiona McQueen, Marissa Lassere and Mikkel Østergaard. – Magnetic resonance imaging in psoriatic arthritis: a review of the literature. Arthritis Research & Therapy 2006, 8:207. doi:10.1186/ar1934 (CC BY 2.0) via [Commons Wikimedia](#)
2. “Calcific tendinitis marked” By user:elmundoKreis eingezeichnet von user:drongo – File:Calcific tendinitis.jpg (CC BY-SA 3.0) via [Commons Wikimedia](#)

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