RESULTS

Table (1): Sex distribution of examined cases.

Sex	No.	%
Male	249	21.31
Female	920	78.69
Total No. of patients	1169	100.00
Male/female ratio	1/3.9	

This table shows that 78.69% of examined cases were females and 21.31% of examined cases were males with the female:male ratio = 3.9:1 .

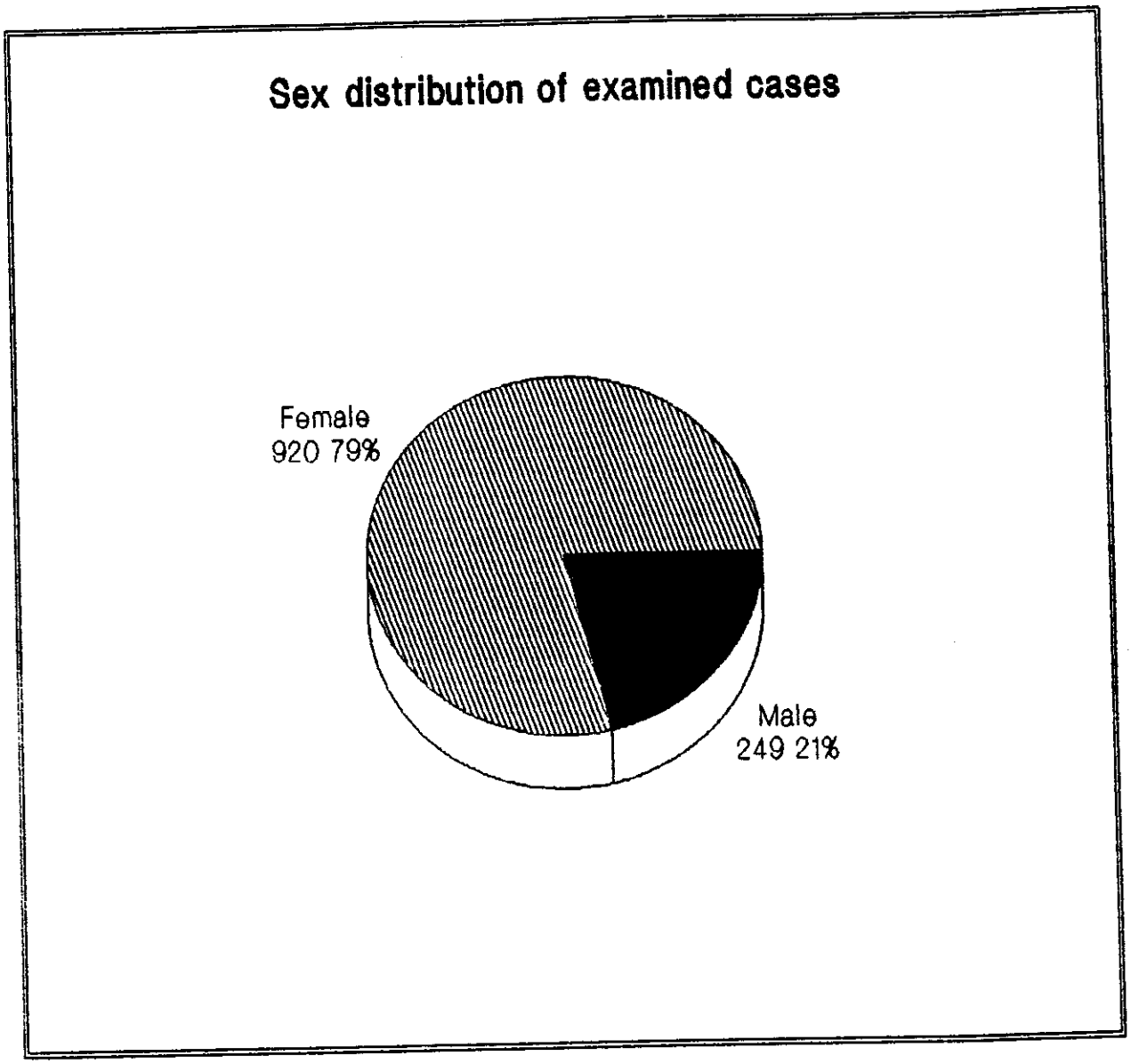
Sex distribution of examined cases
Female
920 79%
Male
249 21%

Figure (1)

Table (2): Age and sex distribution of examined cases.

Sex	Male		Female		Total	
Age distribution (years)	No.	%	No.	%	No.	%
16-	4	1.61	13	1.41	17	1.45
20-	27	10.84	129	14.02	156	13.34
30-	47	18.88	232	25.22	279	23.87
40-	77	30.92	231	25.11	308	26.35
50-	55	22.09	212	23.04	267	22.84
60+	39	15.66	103	11.20	142	12.15
Total	249	100.0	920	100.0	1169	100.0
Mean ± S.D.	45.43±12.24		42.69±12.27		43.27±12.24	

X^2 = 14.34 P<0.05

This table shows that the largest percent of male cases was among the age group 40-49 (30.92%) while in the female cases it was among the age groups 30-39 and 40-49 (25.22% and 25.11% respectively). Statistically, the difference between male and female age distribution, was significant (P<0.05).

Table (3): Marital status of examined cases.

	Male		Female		Total	
	No.	%	No.	%	No.	%
Not married	2	13.33	18	6.71	20	7.07
Married	13	86.67	250	93.28	263	92.93
Total	15	100.0	268	100.0	283	100.0

$\chi^2 = 0.78$ P>0.05

From this table, it is evident that most of the examined cases (92.93%) were married and the difference was not statistically significant (P>0.05).

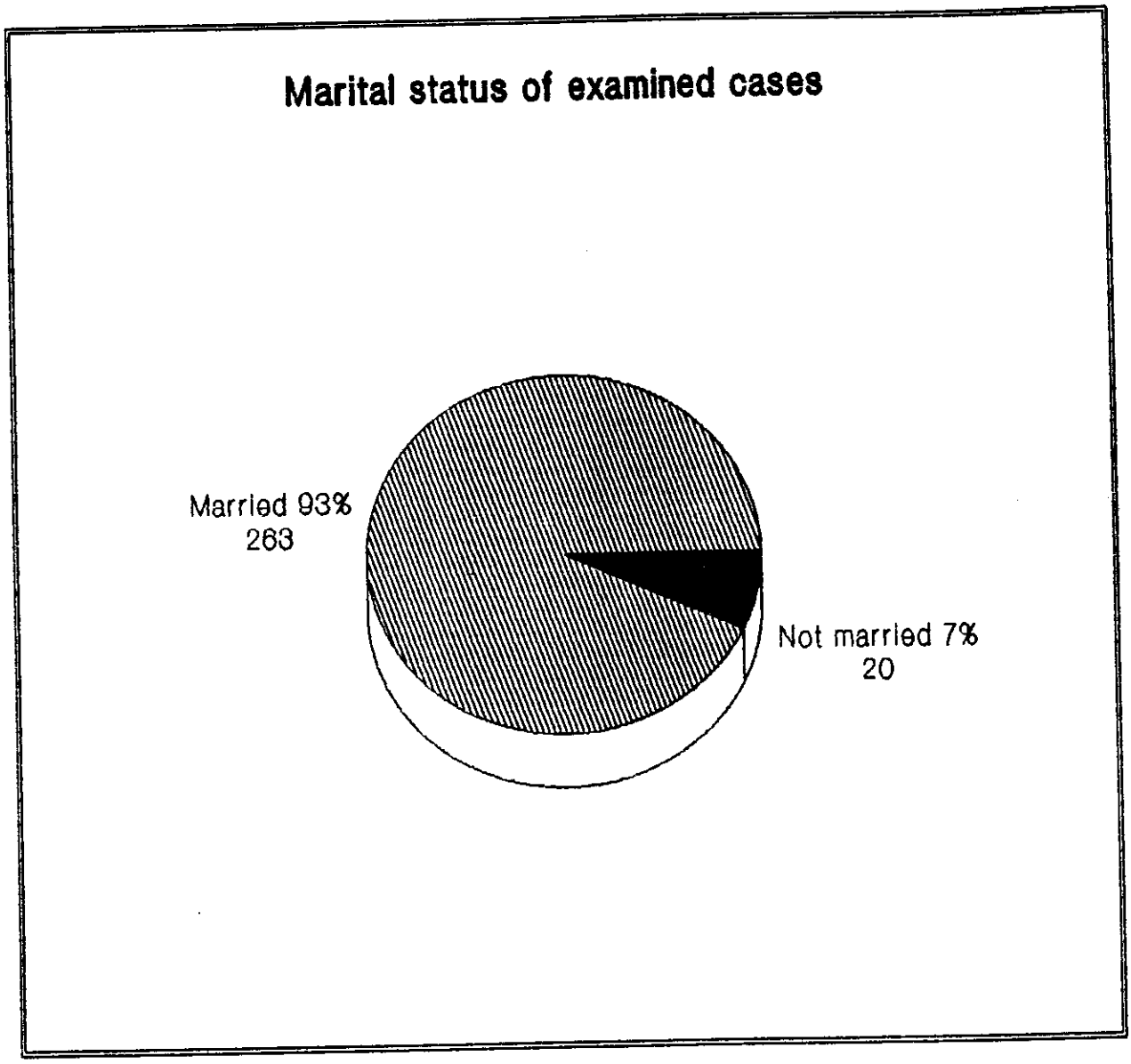
Marital status of examined cases
Married 93%
263
Not married 7%
20

Figure (2)

Table (4): Presence of positive family history of rheumatoid arthritis among the examined cases.

	Male		Female		Total	
	No.	%	No.	%	No.	%
Present	36	14.46	135	14.71	171	14.65
Absent	213	85.54	783	85.29	996	85.35
Total	249	100.0	918	100.0	1167	100.0

$X^2 = 0.01$ P>0.05

N.B.: Family history was not reported in 2 female cases.

This table shows that there was a family history of rheumatoid arthritis in 14.65% of examined cases, and statistically, the difference was not significant (P>0.05).

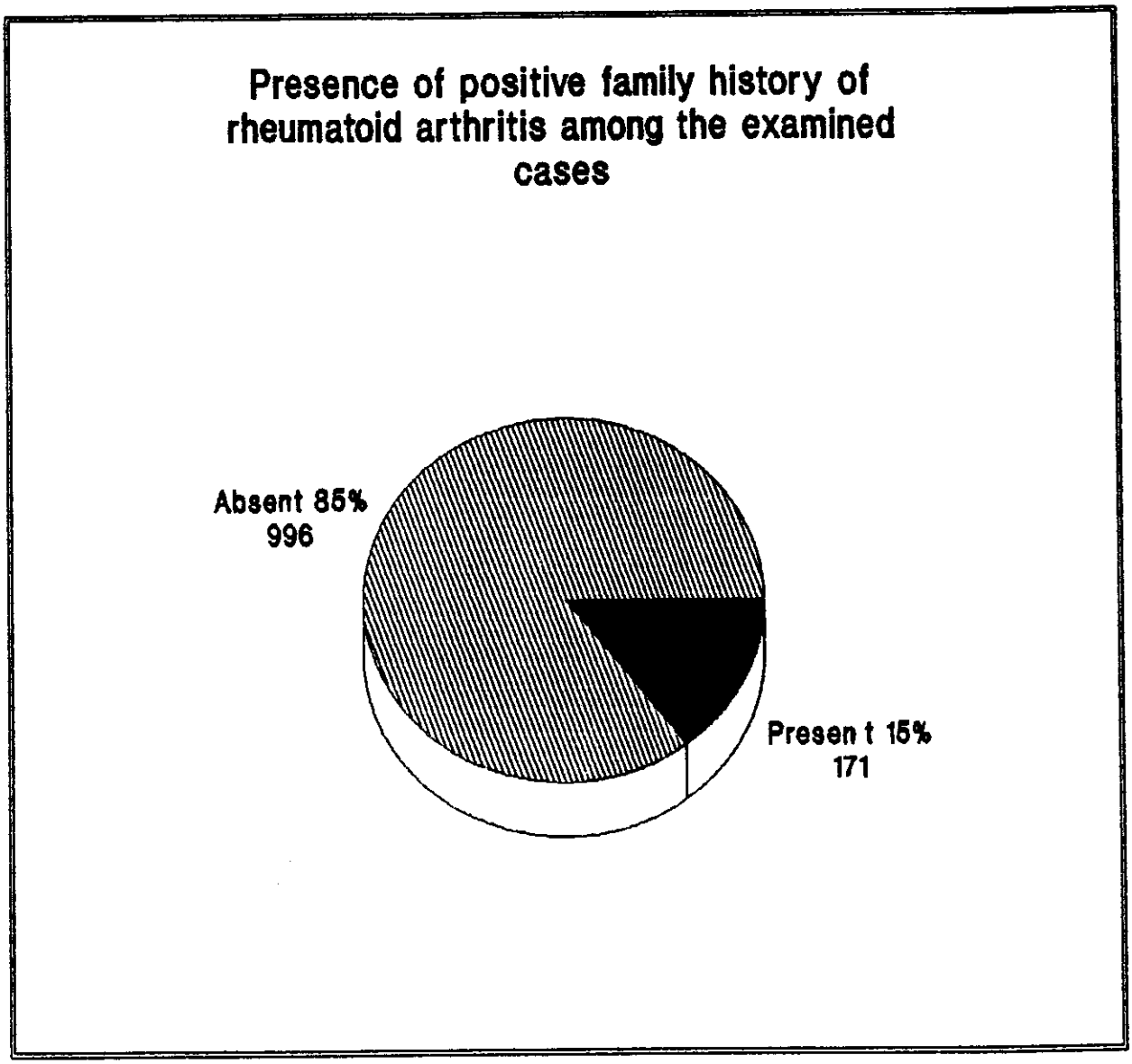
Presence of positive family history of rheumatoid arthritis among the examined cases
Absent 85%
996
Presen t 15%
171

Figure (3)

Table (5): Presence of precipitating factors.

	Male		Female		Total	
	No.	%	No.	%	No.	%
Present	4	1.61	64	6.97	68	5.83
Absent	245	98.39	854	93.03	1099	94.17
Total	249	100.0	918	100.0	1167	100.0

$\chi^2 = 10.28$ P<0.001

N.B.: Presence of precipitating factors was not reported in 2 female cases.

This table shows that there was a history of precipitating factors in 1.61% of the male examined cases while it was present in 6.97% of the female examined cases and the difference was statistically highly significant (P<0.001).

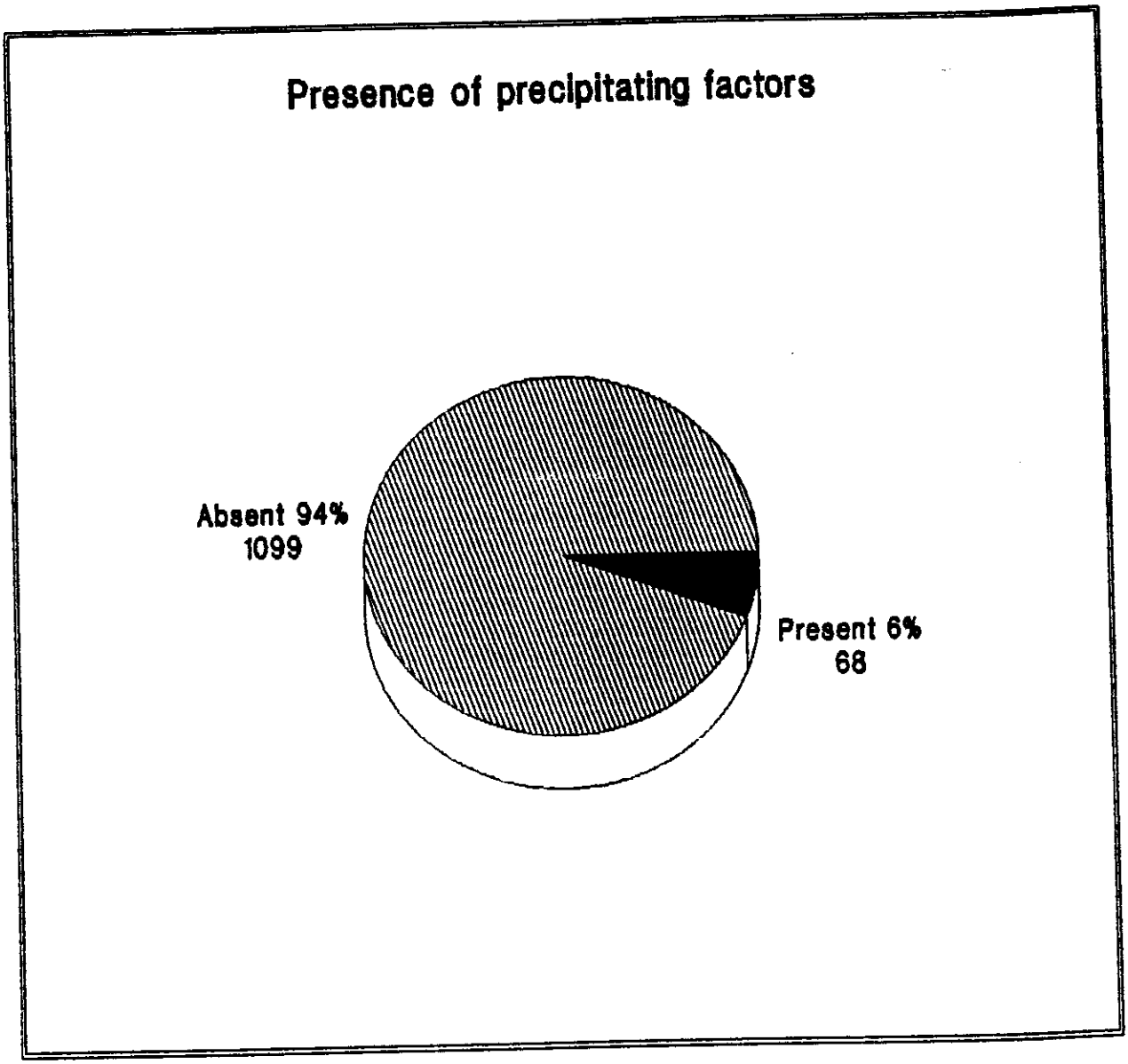
Presence of precipitating factors
Absent 94%
1099
Present 6%
68

Figure (4)

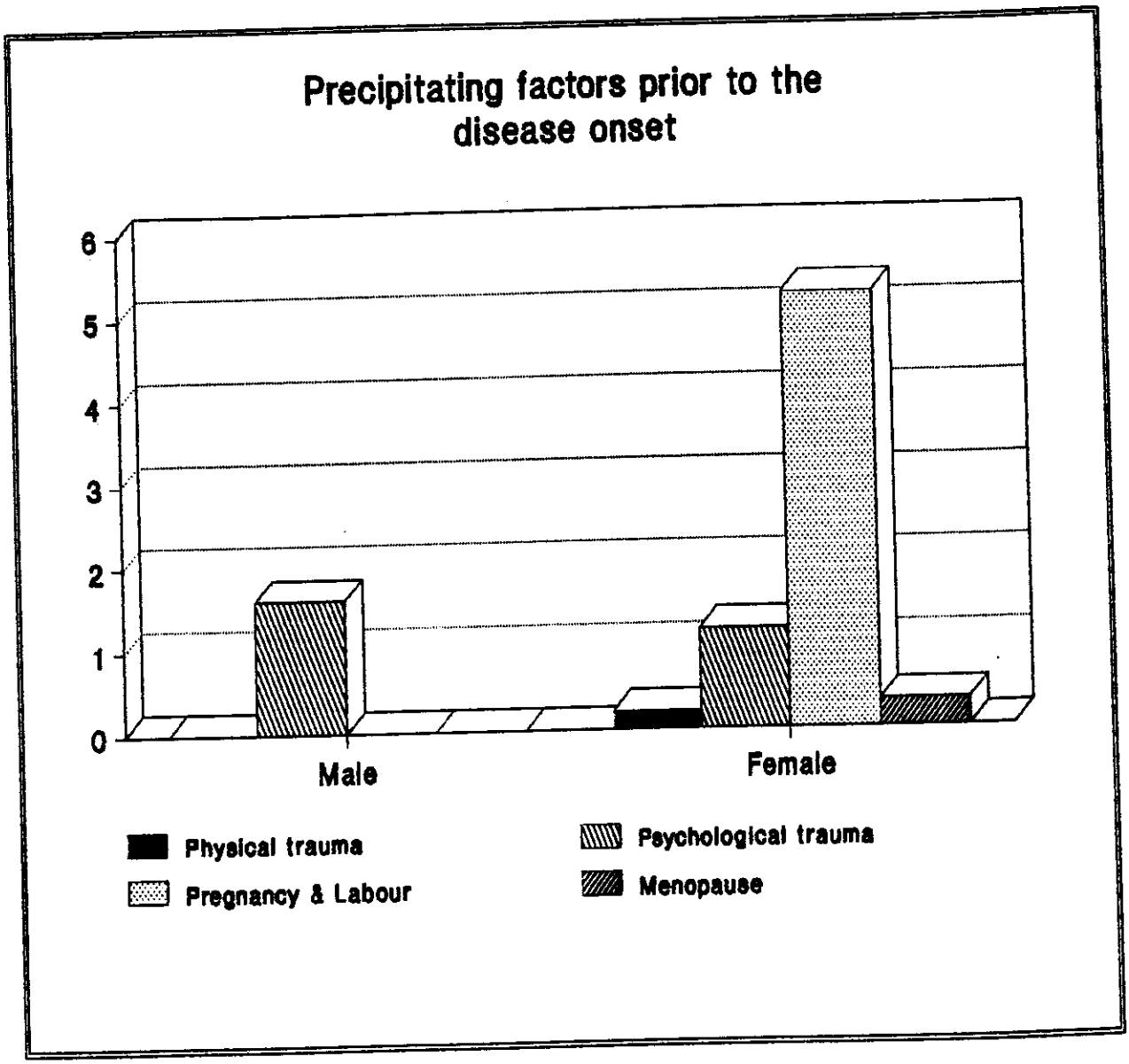
Precipitating factors prior to the disease onset
6
5
4
3
2
1
0
Male
Female
Physical trauma
Pregnancy & Labour
Psychological trauma
Menopause

Figure (5)

Table (6): Age of onset of rheumatoid arthritis of examined cases.

	Male		Female		Total	
	No.	%	No.	%	No.	%
16-	7	2.84	43	4.69	50	4.29
20-	50	20.24	196	21.35	246	21.12
30-	60	24.29	268	29.19	328	28.15
40-	60	24.29	225	24.51	285	24.46
50-	51	20.65	152	16.56	203	17.43
60+	19	7.69	34	3.70	53	4.55
Total	247	100.0	918	100.0	1165	100.0
Mean ± S.D.	40.91±12.92		36.26±11.95		38.82±12.16	

$\chi^2 = 12.01$ $P<0.05$

N.B.: Age of onset of the disease was not reported in 4 cases.

This table shows that the largest persent of cases had their age of onset at the age groups 30-39 and 40-49 (28.15% and 24.46% respectively).

Table (7): Disease duration of examined cases.

Duration (years)	Male		Female		Total	
	No.	%	No.	%	No.	%
<1	63	25.50	222	24.20	285	24.50
1-	106	42.90	393	42.81	499	42.80
5+	78	31.60	303	33.00	381	32.70
Total	247	100.0	918	100.0	1165	100.0

$\chi^2 = 0.26$ P>0.05

N.B.: The age of onset was not reported in 4 cases.

This table shows that the disease duration of most of the examined cases was 1-5 years (42.8%) and statistically the difference between males and females in the disease duration, was not significant (P>0.05).

Table (8): Duration of morning stiffness in examined cases.

	Male		Female		Total	
	No.	%	No.	%	No.	%
0-	57	27.01	134	18.74	191	20.60
5-	38	18.01	138	19.30	177	19.09
15-	20	9.48	94	13.14	114	12.30
25-	24	11.37	108	15.10	132	14.24
35-	22	10.43	94	13.14	116	12.51
60+	50	23.70	147	20.55	197	21.25
Total No. of patients	211	100.0	715	100.0	927	100.0

$\chi^2 = 11.13$ P>0.05

N.B.: Duration of morning stiffness was not reported in 242 cases.

This table shows that there was no significant difference statistically in the morning stiffness among male and female patients (P>0.05).

Table (9): First joint involved in the examined cases.

First joint involved	Male		Female		Total	
	No.	%	No.	%	No.	%
Hand	130	52.21	581	63.15	711	60.82
Knee	104	41.77	426	46.30	530	45.34
Wrist	84	33.73	363	39.46	447	38.24
Foot	75	30.12	280	30.43	355	30.37
Shoulder	63	25.30	216	23.48	279	23.87
Ankle	48	19.28	191	20.76	239	20.44
Elbow	43	17.27	163	17.72	206	17.62
Neck	34	13.65	156	16.96	190	16.25
LBP	32	12.85	128	13.91	160	13.69
Hip	33	13.25	126	13.70	159	13.60
TMJ	29	11.65	122	13.26	151	12.92
Heels	30	12.05	119	12.93	149	12.75
Subtalar	29	11.65	117	12.72	146	12.49
S-C.J.	29	11.65	116	12.61	145	12.40
Total No. of patients	249	-	920	-	1169	-

$\chi^2 = 3.8$ $P>0.05$

N.B.: Percent was calculated out of total number of patients in each group.

This table shows that the hand joints were the most common first joint involved in both male and female cases, and the distribution of the first joint involved was not significantly different between the male and the female cases (P>0.05).

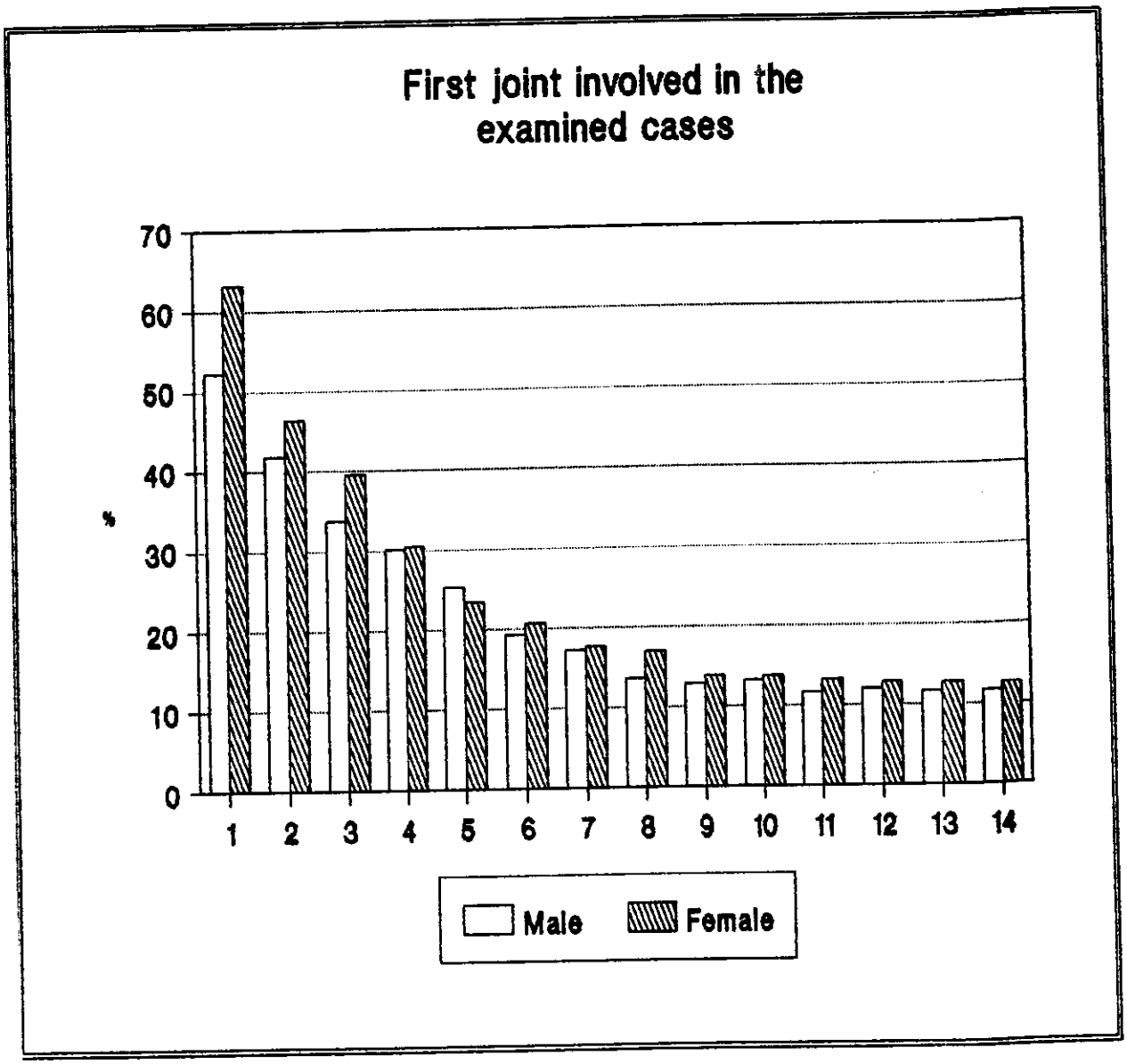

Figure (6)

1 = Hand
2 = Knee
3 = Wrist
4 = Foot
5 = Shoulder
6 = Ankle
7 = Elbow
8 = Neck
9 = LBP
10= Hip
11= TMJ
12= Heels
13= Subtalar
14= S-C.J.

Table (10): Upper limb joints involved in examined cases.

Joint	Male		Female		Total	
	No.	%	No.	%	No.	%
Wrist	212	86.53	873	91.47	1049	90.43
MCP	179	73.06	753	82.29	932	80.34
PIP	189	77.14	737	80.54	926	79.82
Shoulder	162	66.12	690	75.40	852	73.44
Elbow	161	65.71	633	69.18	794	68.44
TIP	12	4.89	48	5.24	60	5.17
Total No. of patients	245	-	915	-	1160	-

$\chi^2 = 0.88$ $P>0.05$

N.B.: * Upper limb joints involvement was not reported in 9 cases.
* Percent was calculated out of the total number of patients in each group.

This table shows that the wrist joint was the most common joint involved (90.43%) of the upper limb joints, while the TIP joints were the least affected joint (5.17%) and statistically there was no significant difference in the upper limb joints involved in the male and the female cases (P>0.05).

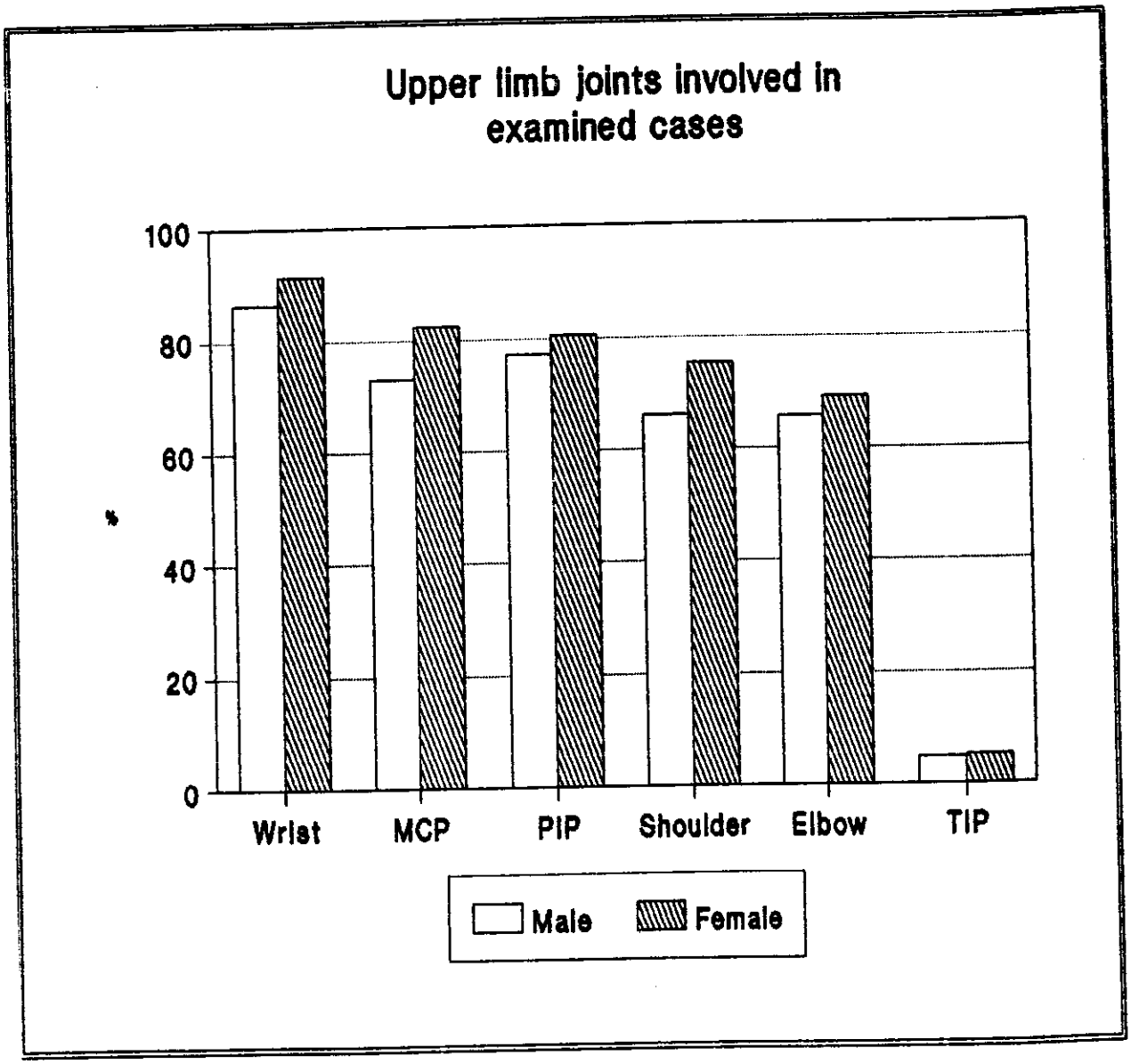
Upper limb joints involved in examined cases
100
80
60
40
20
0
%
Wrist
MCP
PIP
Shoulder
Elbow
TIP
Male
Female

Figure (7)

Table (11): Lower limb joints involved in examined cases.

Joint	Male		Female		Total	
	No.	%	No.	%	No.	%
Knee	174	71.02	754	82.40	928	80.00
Ankle	172	70.20	708	77.37	880	75.86
Subtalar	151	61.63	661	72.24	812	70.00
Mid-tarsal	140	57.14	618	67.54	758	65.34
MTP	126	51.42	557	60.87	683	58.87
I.P	67	27.34	282	30.81	349	30.08
Hip	22	8.97	66	7.21	88	7.85
Total No. of patients	245	-	915	-	1160	-

$\chi^2 = 2.63$ $P>0.05$

N.B.: * Lower limb joints involvement was not reported in 9 cases.
* Percent was calculated out of the total number of patients in each group.

This table shows that the knee joint was the most common joint involved (80%), while the hip joint was the least affected joint (7.85%) of the lower limb joints in the examined cases, and statistically, there was no significant difference in the lower limb joints involved in the male and the female cases ($P>0.05$).

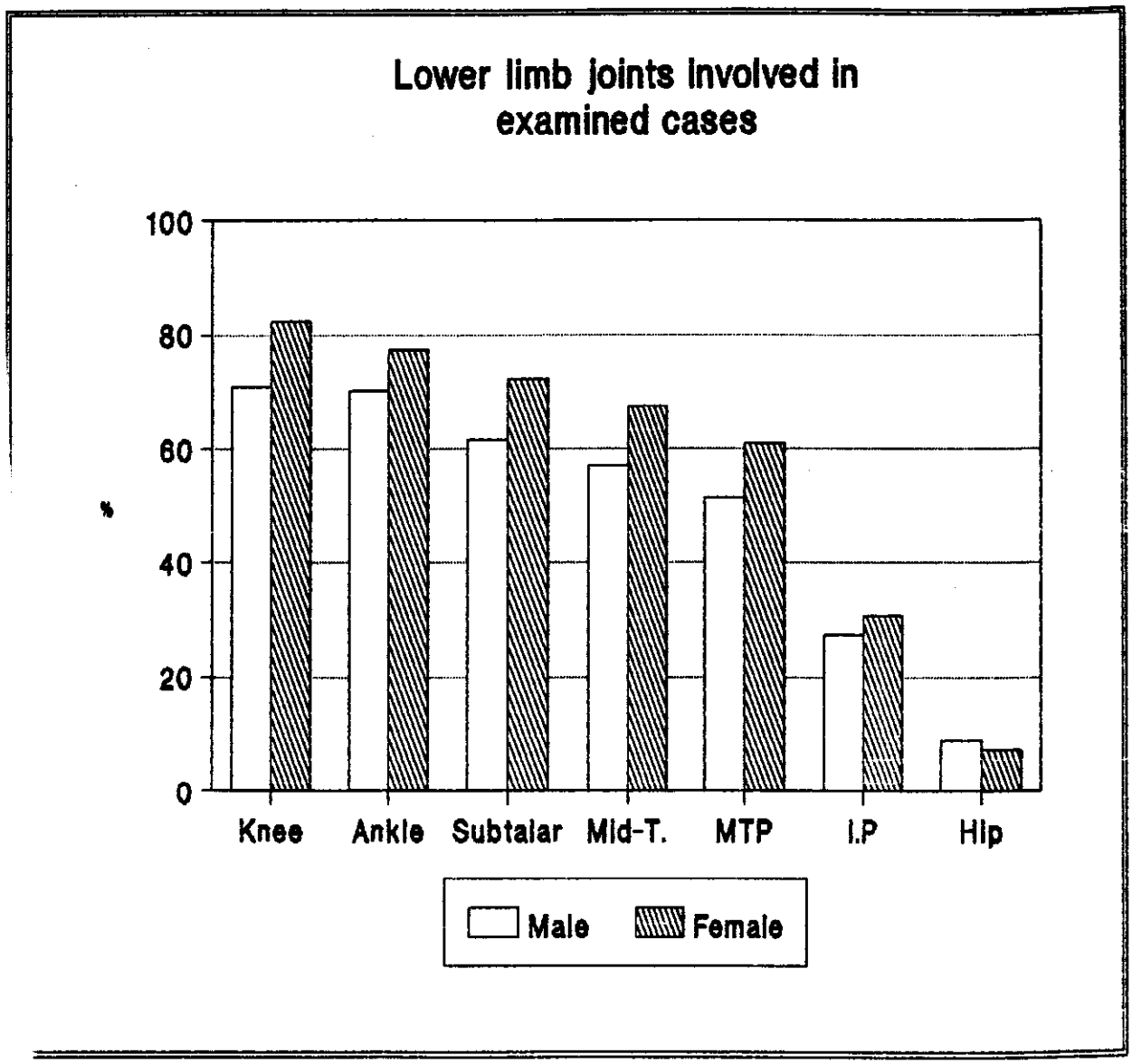
Lower limb joints involved in examined cases
100
80
60
40
20
0
%
Knee
Ankle
Subtalar
Mid-T.
MTP
I.P
Hip
Male
Female

Figure (8)

Table (12): Other joints involved in examined cases.

	Male		Female		Total	
	No.	%	No.	%	No.	%
C-spine	78	31.38	361	39.45	439	37.84
TMJ	39	15.91	257	28.08	296	25.51
S-C J.	15	6.12	147	16.06	162	13.96
Total No. of patients	245	-	915	-	1160	-

$\chi^2 = 7.66$ $P<0.05$

N.B.: * Other joints involvement was not reported in 9 cases.
* Percent was calculated out of the total number of patients in each group.

This table shows that C-spien, TMJ and S-C joints were much more commonly involved in female than in male examined cases, and the difference was statistically significant ($P<0.05$).

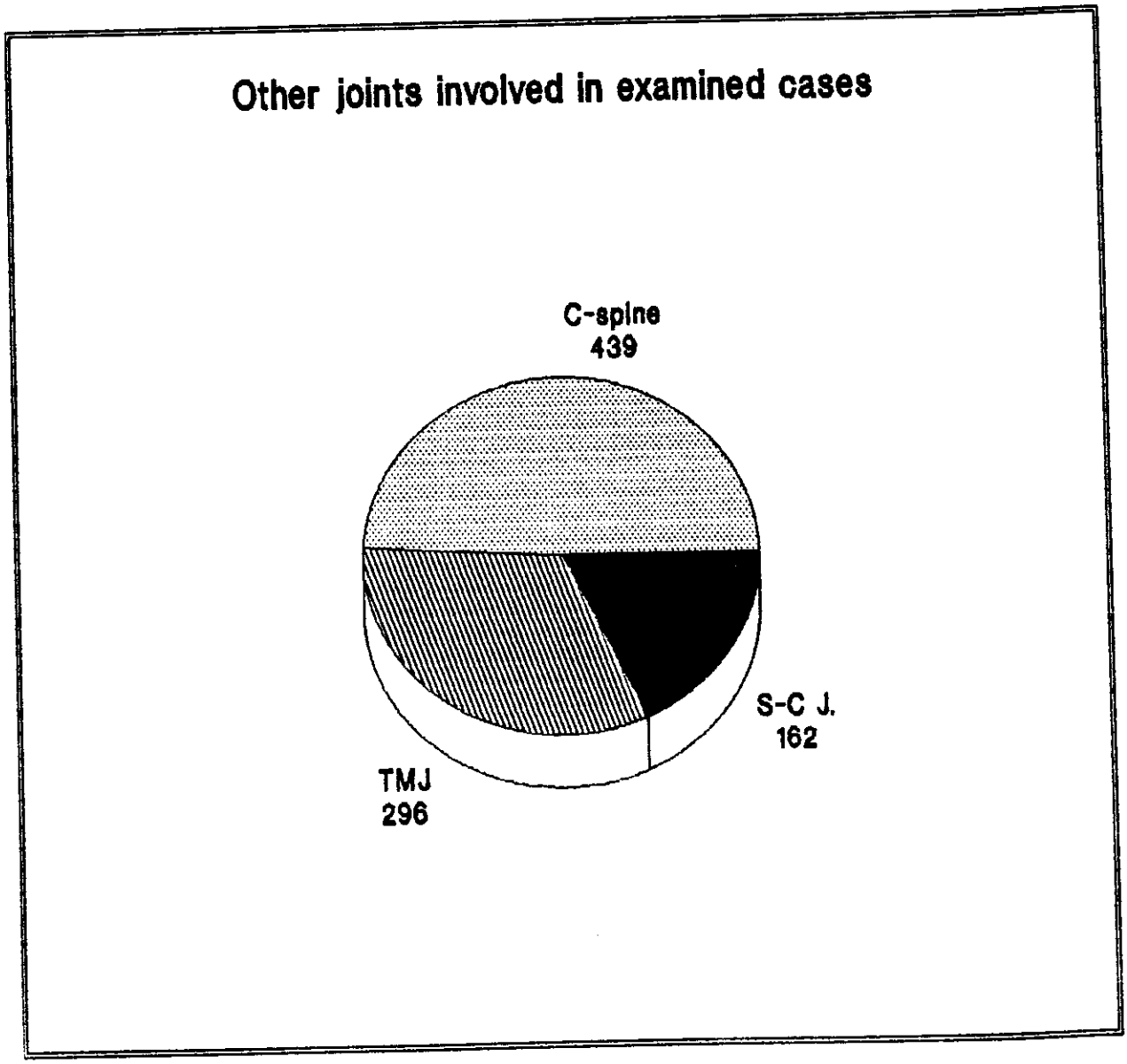
Other joints involved in examined cases
C-spine
439
S-C J.
162
TMJ
296

Figure (9)

Table (13): Deformities present in examined cases.

	Male		Female		Total	
	No.	%	No.	%	No.	%
Absent	165	66.27	613	66.63	778	66.55
Present	84	33.73	307	33.37	391	33.45
Total No. of patients	245	100.0	915	100.0	1160	100.0

$\chi^2 = 0.01$ P>0.05

This table shows that 33.45% of examined cases developed deformities, and the difference between male and female examined cases was not significant statistically (P>0.05).

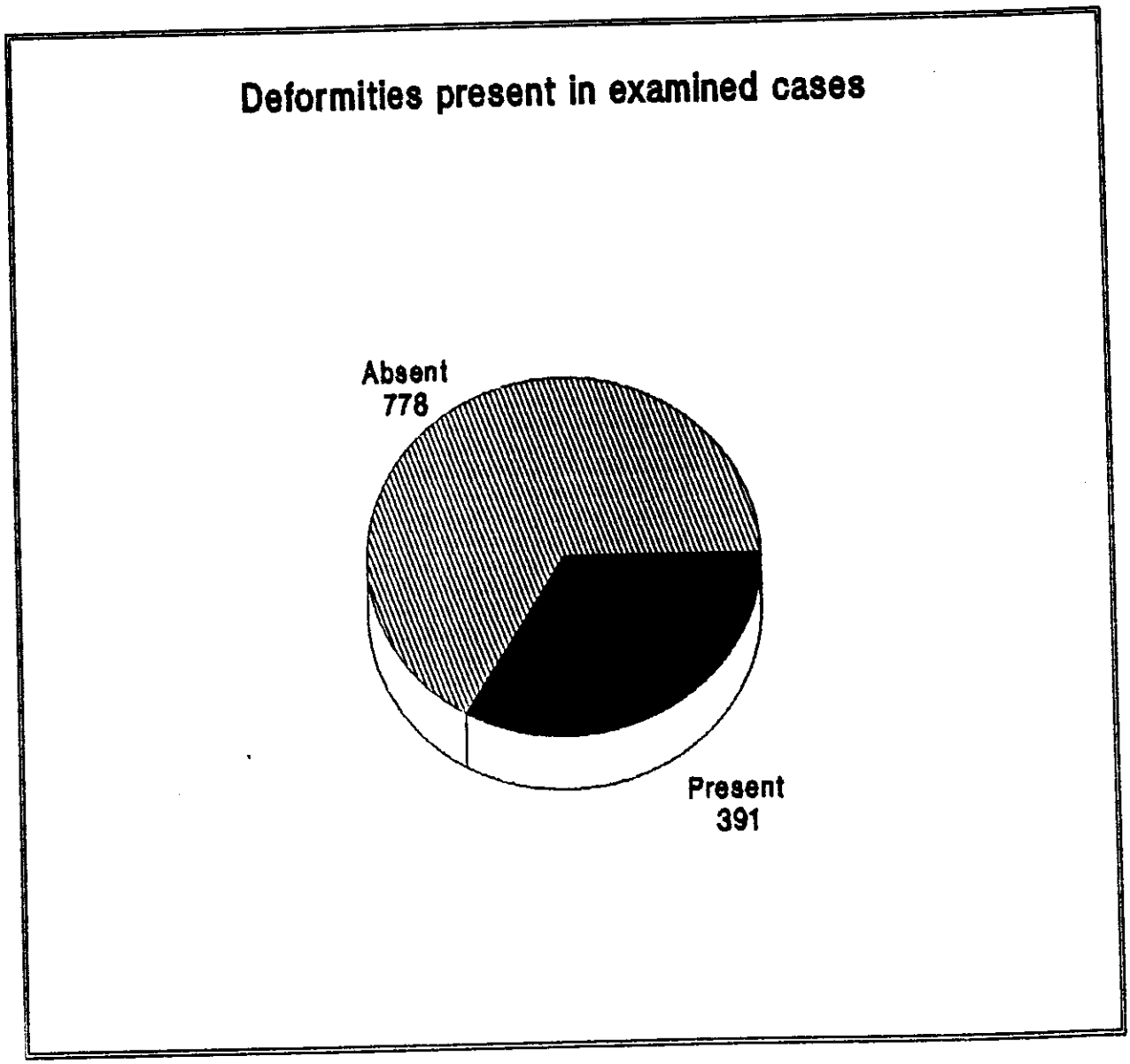
Deformities present in examined cases
Absent
778
Present
391

Figure (10)

Table (14): Upper limb deformities present in the examined cases.

Deformity	Male		Female		Total	
	No.	%	No.	%	No.	%
F.D elbow	74	29.72	203	22.06	277	23.70
Ulnar deviation	18	7.23	79	8.59	97	8.30
Swan neck	10	4.02	39	4.24	49	4.20
Boutonniere	8	3.21	9	0.98	17	1.45
Prominant ulnar styloid	2	0.80	15	1.63	17	1.45
Z-thumb	2	0.80	5	0.54	7	0.60
Rupture extensor tendon	1	0.40	2	0.22	3	0.26
Total No. of patients	249	-	920	-	1169	-

N.B.: * Percent was calculated out of the total number of patients in each group.

This table shows that the F.D of the elbow was the most common upper limb deformity in both male and female examined cases.

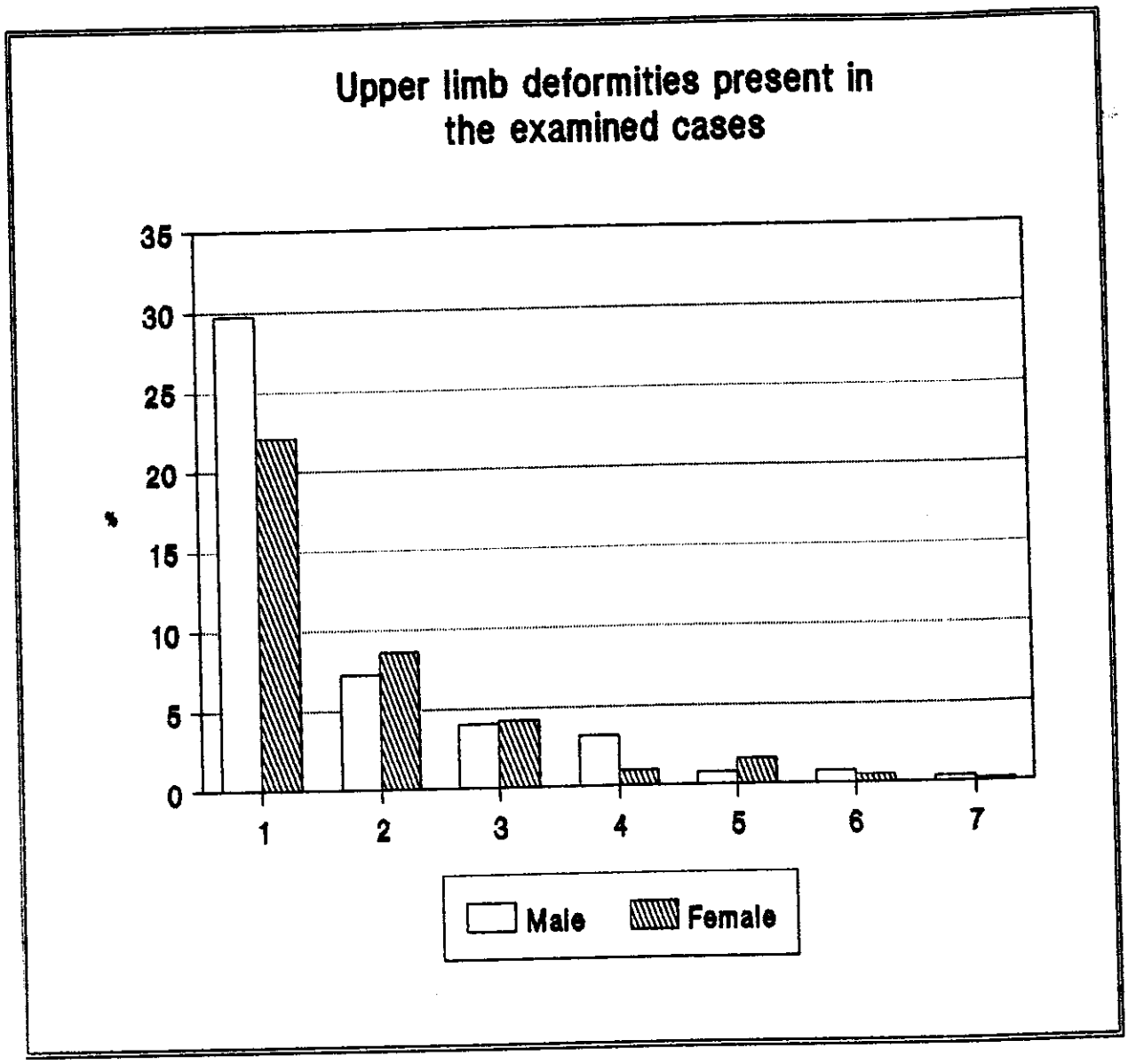

Figure (11)

1 = F.D elbow
2 = Ulnar deviation
3 = Swan neck
4 = Boutonniere
5 = prominant ulnar styloid
6 = Z-thumb
7 = Rupture extensor tendon

Table (15): Lower limb deformities present in the examined cases.

Deformity	Male		Female		Total	
	No.	%	No.	%	No.	%
F.D knee	9	3.61	65	7.07	74	6.33
Hallux valgus	5	2.01	21	2.28	26	2.22
Hammer toes	3	1.20	15	1.63	18	1.54
F.D hip	1	0.40	2	0.22	3	0.26
Total No. of patients	249	-	920	-	1169	-

N.B.: * Percent was calculated out of the total number of patients in each group.

This table shows that F.D of the knee was the most common lower imb deformity in both male and female examined cases.

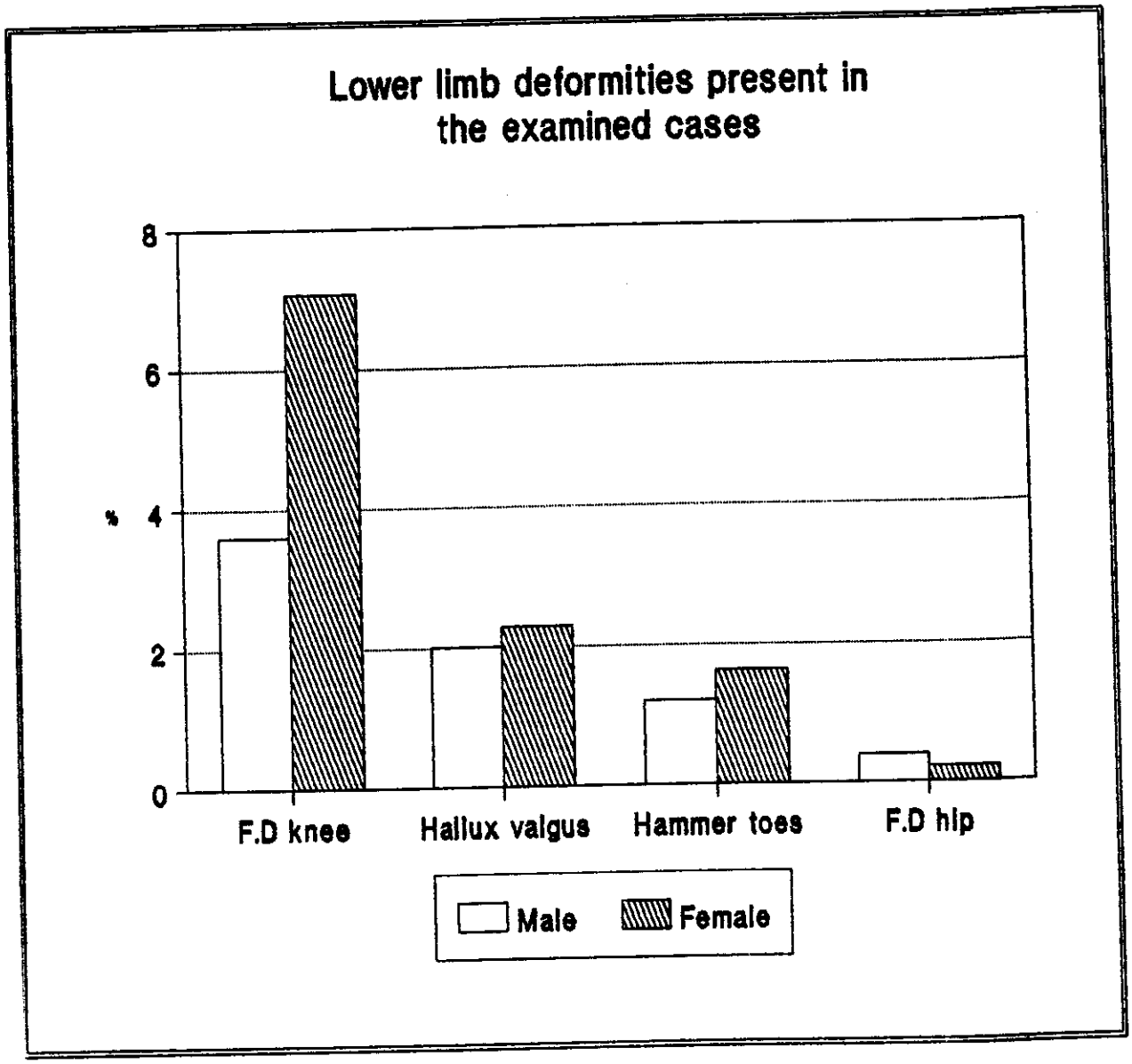
Lower limb deformities present in the examined cases
8
6
%
4
2
0
F.D knee
Hallux valgus
Hammer toes
F.D hip
Male
Female

Figure (12)

Table (16): Extra-articular manifestations present in examined cases.

	Male		Female		Total	
	No.	%	No.	%	No.	%
Absent	113	45.40	460	50.00	593	50.73
Dry mouth	48	19.28	206	22.39	254	21.73
Dry eyes	43	17.27	83	9.02	106	9.07
F.T.N.	15	6.02	76	8.26	91	7.78
S.C nodules	23	9.24	66	7.17	89	7.61
Carpal tunnel	4	1.61	16	1.74	20	1.71
L.N & Thyroid enlargement	0	0	9	0.98	9	0.77
Vasculitis	3	1.20	4	0.43	7	0.60
Total No. of patients	249	-	920	-	1169	-

$\chi^2 = 1.67$ P>0.05

N.B.: * Percent was calculated out of the total number of patients in each group.

This table shows that:

* Dry mouth is the most common extra-articular manifestation in both male and female examined cases.
* Dry eyes, S.C nodules and vasculitis were more common in male than in female examined cases.
* Dry mouth, carpal tunnel, FTN & L.N and thyroid enlargement were more common in female than in male examined cases.
* Presence of extra-articular manifestations in male and female examined cases showed no significant difference statistically (P>0.05).

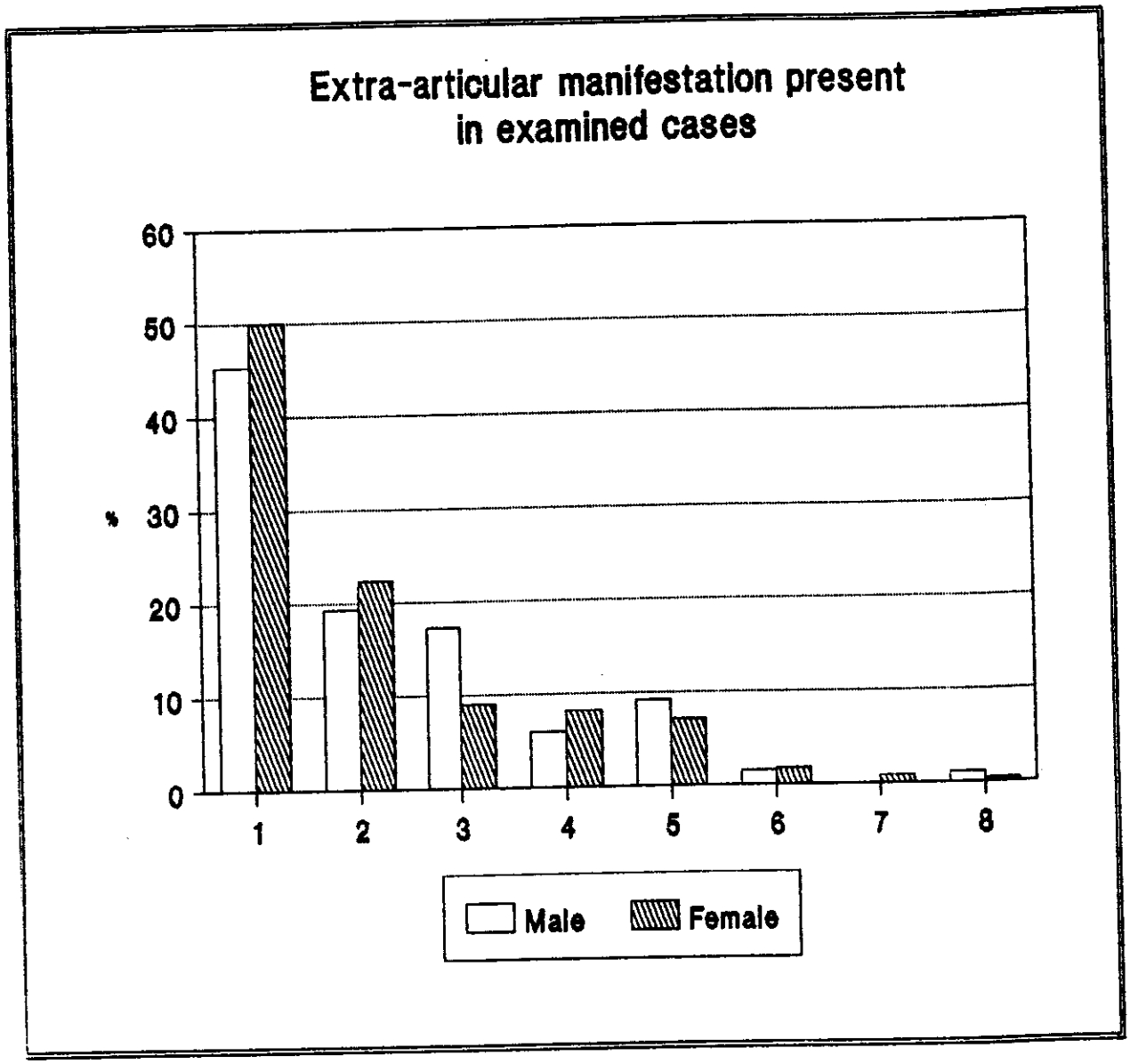

Figure (13)

1 = Absent
2 = Dry mouth
3 = Dry eyes
4 = F.T.N
5 = S.C nodules
6 = Carpal tunnel
7 = L.N & Thyroid Enlargement
8 = Vasculitis

Table (17): Functional capacity of examined cases.

Grade	Male		Female		Total	
	No.	%	No.	%	No.	%
1	17	8.13	38	4.75	55	5.46
2	139	66.51	476	59.57	615	61.01
3	41	19.62	243	30.41	284	28.17
4	12	5.74	42	5.25	54	5.36
Total	209	100.0	799	100.0	1008	100.0

$X^2 = 11.70$ $P<0.01$

N.B.: Functional capacity was not reported in 161 cases.

This table shows that most of the examined cases (61.01%) were class 2 as regards functional capacity, and the difference between the male and the female cases was statistically highly significant (P<0.01).

Table (18): Number and percentage of seropositive and seronegative cases.

	Male		Female		Total	
	No.	%	No.	%	No.	%
Seropositive	105	71.92	368	67.90	473	68.75
Seronegative	41	28.08	174	32.10	215	31.25
Total	146	100.0	542	100.0	688	100.0

$\chi^2 = 0.87$ P>0.05

N.B.: Rheumatoid factor test was not reported in 481 cases.

This table shows that most of the examined cases (68.75%) were seropositive and statistically there was no significant difference between the male and the female cases (P>0.05).

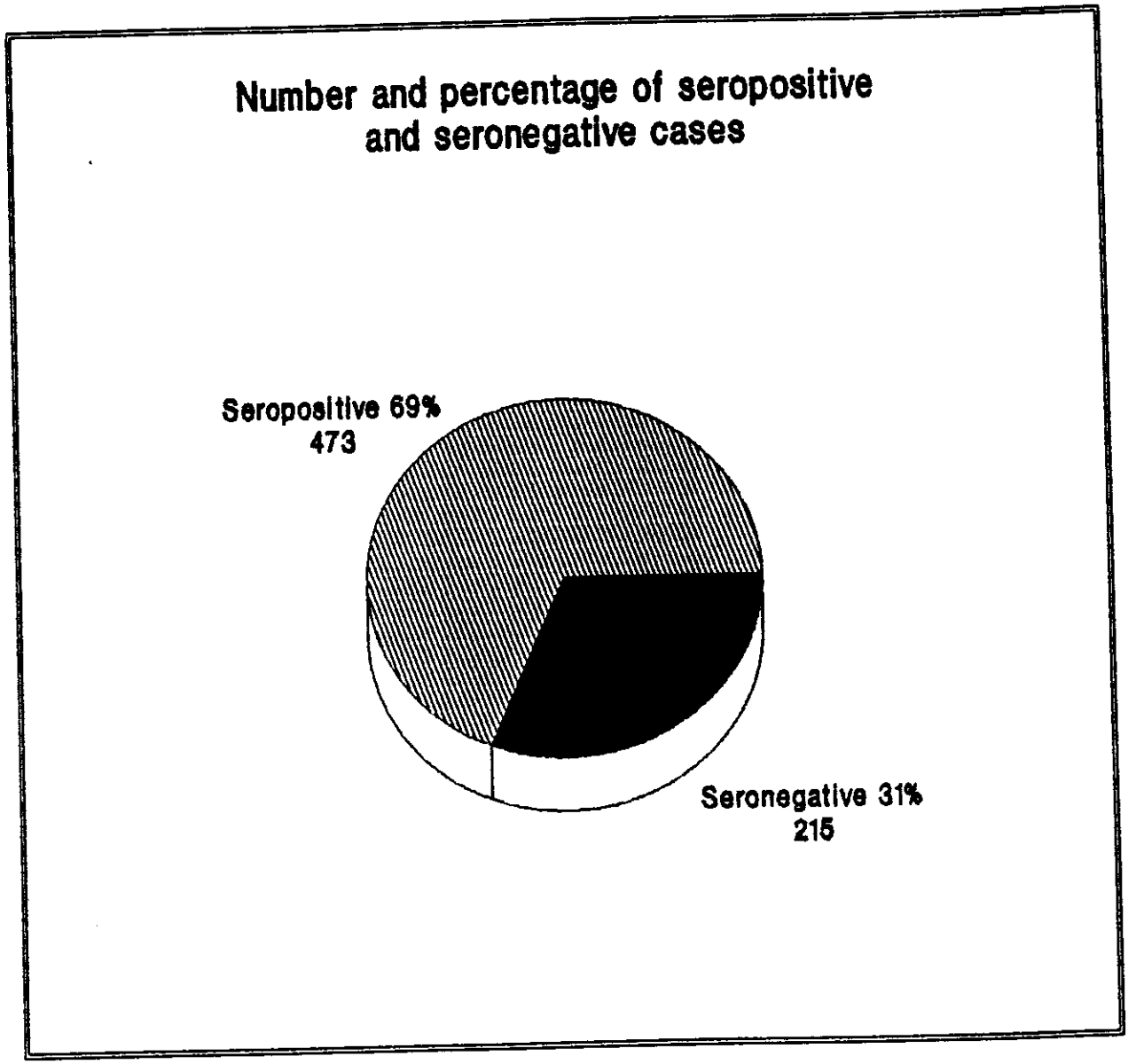
Number and percentage of seropositive and seronegative cases
Seropositive 69%
473
Seronegative 31%
215

Figure (14)

Table (19): Upper limb joints involved in seropositive and seronegative examined cases.

Joint	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
Wrist	194	90.23	425	89.85	619	89.97
MCP	165	76.74	389	82.24	554	80.52
PIP	165	76.74	385	81.40	550	79.94
Shoulder	145	67.44	347	73.36	492	71.51
Elbow	150	69.77	315	66.60	465	67.59
PIP	10	4.65	21	4.44	31	4.51
Total No. of patients	215	-	473	-	688	-

$\chi^2 = 1.36$ P>0.05

N.B.: Percent was calculated out of the total number of the patients in each group.

This table shows that the wrist joint was the most commonly involved upper limb joint in both seropositive and seronegative examined cases and the difference in upper limb joints involvement in seropositive and seronegative groups was not significant statistically (P>0.05).

Table (20): Upper limb joints involved in seropositive and seronegative male examined cases.

Joint	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
Wrist	34	82.92	90	85.71	124	84.93
PIP	30	73.17	82	78.09	112	76.71
MCP	27	65.85	78	74.28	105	71.91
Elbow	22	53.65	70	66.66	92	63.01
Shoulder	26	63.41	65	61.90	91	62.32
TIP	2	4.87	4	3.80	6	4.10
Total No. of patients	41	-	105	-	146	-

$X^2 = 0.75$ $P>0.05$

N.B.: Percent was calculated out of the total number of the patients in each group.

This table shows that the wrist joint was the most commonly involved joint in both seropositive and seronegative male examined cases, and there was no significant difference statistically in the upper limb involved joints in seropositive and seronegative male examined cases ($P>0.05$).

Table (21): Upper limb joints involved in seropositive and seronegative female examined cases.

Joint	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
Wrist	160	91.95	335	91.03	495	91.32
MCP	138	79.31	311	84.51	449	82.84
PIP	135	77.58	303	82.33	438	80.81
Shoulder	119	68.39	282	76.63	401	73.98
Elbow	128	73.56	245	66.57	373	68.81
PIP	8	4.59	17	4.61	25	4.61
Total No. of patients	174	-	368	-	542	-

$X^2 = 2.36$ P>0.05

N.B.: Percent was calculated out of the total number of the patients in each group.

This table shows that the wrist joint was the most commonly involved upper limb joint in both seropositive and seronegative female examined cases and the difference in the upper limb involved joints in seropositive and seronegative female examined cases was not significant statistically (P>0.05).

Table (22): Lower limb joints involved in seropositive and seronegative examined cases.

Joint	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
Knee	175	81.40	379	80.13	554	80.52
Ankle	160	74.42	367	77.59	527	76.60
Subtalar	147	68.37	330	69.77	477	69.33
Mid-tarsal	138	64.19	316	66.81	454	65.99
MTP	116	53.95	284	60.04	400	58.14
I.P	59	27.44	129	27.27	188	27.33
Hip	14	6.51	27	5.71	41	5.96
Total No. of patients	215	-	473	-	688	-

$\chi^2 = 1.07$ P>0.05

N.B.: Percent was calculated out of the total number of the patients in each group.

This table shows that the knee joint was the most commonly involved lower limb joint in both seropositive and seronegative examined cases and the difference in the lower limb joints involvement in seropositive and seronegative groups was not significant statistically (P>0.05).

Table (23): Lower limb joints involved in seropositive and seronegative male examined cases.

Joint	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
ankle	26	63.41	78	74.28	104	71.23
Knee	29	70.73	73	69.52	102	69.86
Subtalar	22	53.65	67	63.80	89	60.95
Mid-tarsal	21	51.21	64	60.95	85	58.21
MTP	16	39.02	58	55.23	74	50.68
I.P	8	19.51	28	26.66	36	24.65
Hip	6	14.63	3	2.85	9	6.16
Total No. of patients	41	-	105	-	146	-

$\chi^2 = 9.05$ P>0.05

N.B.: Percent was calculated out of the total number of the patients in each group.

This table shows that the knee joint was the most commonly involved lower limb joint in the seronegative male cases while the ankle joint was the most common lower limb joint involved in the seropositive male cases and the difference in lower limb joints involvement in seropositive and seronegative male groups was not significant statistically (P>0.05).

Table (24): Lower limb joints involved in seropositive and seronegative female examined cases.

Joint	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
Knee	146	83.90	306	83.15	452	83.39
Ankle	134	77.01	289	78.53	423	78.04
Subtalar	125	71.83	263	71.46	388	71.58
Mid-tarsal	117	67.24	252	68.47	369	68.08
MTP	100	57.47	226	61.41	326	60.14
I.P.	51	29.31	101	27.44	152	28.04
Hip	8	4.59	24	6.52	32	5.90
Total No. of patients	174	-	368	-	542	-

$\chi^2 = 1.18$ $P>0.05$

N.B.: Percent was calculated out of the total number of the patients in each group.

This table shows that the knee joint was the most commonly involved lower limb joint in both seropositive and seronegative female examined cases and the difference in lower limb joint involvement in seropositive and seronegative female groups was not significant statstically ($P>0.05$).

Table (25): Other joints involved in seropositive and seronegative examined cases.

Joint	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
C-spine	77	35.81	179	37.84	256	37.21
TMJ	54	25.12	128	27.06	182	26.45
S.C.J.	26	12.09	66	13.95	92	13.37
Total No. of patients	215	-	473	-	688	-

$X^2 = 0.11$ $P>0.05$

N.B.: Percent was calculated out of the total number of the patients in each group.

This table shows that C-spine, TMJ and S-C joints were more commonly involved in seropositive than in seronegative cases and the difference in C-spine, TMJ and S-C joints involvement in seropositive and seronegative groups was not significant statistically (P>0.05).

Table (26): Other joints involved in seropositive and seronegative male examined cases.

Joint	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
C-spine	9	21.95	33	31.42	42	28.76
TMJ	8	19.51	19	18.09	27	18.49
S.C.J.	3	7.31	6	5.71	9	6.16
Total No. of patients	41	-	105	-	146	-

$\chi^2 = 0.9$ $P>0.05$

N.B.: Percent was calculated out of the total number of the patients in each group.

This table shows that the C-spine joints were the most commonly involved joint (other than upper and lower limb joints) in both seropositive and seronegative male examined cases. The difference in other joints involvement in seropositive and seronegative male cases was not significant statistically (P>0.05).

Table (27): Other joints involved in seropositive and seronegative female examined cases.

Joint	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
C-spine	68	39.08	146	39.67	214	39.48
TMJ	46	26.43	109	29.61	155	28.59
S.C.J.	23	13.12	60	16.30	83	15.31
Total No. of patients	174	-	368	-	542	-

$\chi^2 = 0.51$ $P>0.05$

N.B.: Percent was calculated out of the total number of the patients in each group.

This table shows that the C-spine joints were the most commonly involved joint (other than upper and lower limb joints) in both seropositive and seronegative female examined cases. The difference in other joints involvement in seropositive and seronegative female cases was not significant statistically (P>0.05).

Table (28): Functional capacity of seropositive and seronegative examined cases.

Grade	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
1	17	8.76	21	5.14	38	6.31
2	118	60.82	278	68.14	396	65.78
3	55	28.35	98	24.02	153	25.42
4	4	2.06	11	2.70	15	2.49
Total	194	100.0	408	100.0	602	100.0

$\chi^2 = 4.97$ P>0.05

This table shows that most of the examined seropositive and seronegative cases were class 2 as regards functional capacity and the difference in functional capacity in serpositive and seronegative groups was not significant statistically (P>0.05).

Table (29): Functional capacity of seropositive and seronegative male examined cases.

Grade	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
1	6	16.67	6	6.74	12	9.60
2	22	61.11	65	73.03	87	69.60
3	7	19.44	16	17.98	23	18.40
4	1	2.78	2	2.25	3	2.40
Total	36	100.0	89	100.0	125	100.0

$\chi^2 = 3.21$ P>0.05

This table shows that most of the seropositive and seronegative male examined cases were grade 2 as regards functional capacity. The difference between seropositive and seronegative male cases was not significant statistically (P>0.05).

Table (30): Functional capacity of seropositive and seronegative female examined cases.

Grade	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
1	11	6.96	15	4.70	26	5.45
2	96	60.76	213	66.77	309	64.78
3	48	30.38	82	25.70	130	27.25
4	3	1.90	9	2.82	12	2.52
Total	158	100.0	319	100.0	477	100.0

$\chi^2 = 2.78$ P>0.05

This table shows that most of the seropositive and seronegative examined cases were class 2 as regards functional capacity. The difference between seropositive and seronegative female cases was not significant statistically (P>0.05).

Table (31): Extra-articular manifestations in seropositive and seronegative examined cases.

	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
Absent	127	59.35	254	54.27	381	55.87
Present	87	40.65	214	45.73	301	44.13
Total	214	100.0	468	100.0	682	100.0

$\chi^2 = 1.53$ P>0.05

This table shows that the extra-articular manifestations were more common in seropositive than in seronegative examined cases and the difference in presence of extra-articular manifestations in seropositive and seronegative groups was not significant statistically (P>0.05).

Table (32): Extra-articular manifestations in seropositive and seronegative male examined cases.

	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
Absent	27	65.85	66	63.46	93	64.14
Present	14	34.15	38	36.54	52	35.86
Total	41	100.0	104	100.0	145	100.0

$\chi^2 = 0.07$ P>0.05

This table shows that extra-articular manifestations were more common in seropositive than in seronegative male examined cases and the difference in presence of extra-articular manifestations in seropositive and seronegatie male cases was not significant statistically (P>0.05).

Table (33): Extra-articular manifestations in seropositive and seronegative female examined cases.

	Seronegative		Seropositive		Total	
	No.	%	No.	%	No.	%
Absent	100	57.80	188	51.65	288	53.63
Present	73	42.20	176	48.35	249	46.37
Total	173	100.0	364	100.0	537	100.0

$\chi^2 = 1.79$ P>0.05

This table shows that extra-articular manifestations were more common in seropositive than in seronegative female examined cases and the difference in presence of extra-articular manifestations in seropositive and seronegative female cases was not significant statistically (P>0.05).

Table (34): Upper limb joints involved in the examined cases according to age of onset of the disease.

Age group	<30		30-		50+		Total	
Joint	No.	%	No.	%	No.	%	No.	%
TIP	20	6.76	27	4.42	13	5.10	60	5.16
PIP	238	80.41	486	79.54	202	79.22	926	79.69
MCP	237	80.07	487	79.71	208	81.57	932	80.21
Wrist	270	91.22	545	89.20	234	91.76	1049	90.28
Elbow	195	65.88	425	69.56	174	68.24	794	68.33
Shoulder	217	73.31	434	71.03	202	79.22	853	73.41
Total No. of patients	296	-	611	-	255	-	1162	-

$\chi^2 = 3.8$ $P>0.05$

N.B.: * The 25th percentile of age of onset was 30 and the 75th percentile was 49. So, the age groups of 30 to 49 is considered to be the peak age of onset of the disease.

* Percent was calculated out of the total number of the patients in each group.

This table shows that the wrist joint was the most commonly involved upper limb joint in different age groups, and statistically, the difference in upper limb joints involvement in different groups was not significant (P>0.05).

Table (35): Lower limb joints involved in the examined cases according to age of onset of the disease.

Age group	<30		30-		50+		Total	
Joint	No.	%	No.	%	No.	%	No.	%
I.P	94	31.76	183	29.95	72	28.24	349	30.03
MTP	177	59.80	361	59.08	145	56.86	683	58.78
Mid-tarsal	189	63.85	403	65.96	166	65.10	758	65.23
Subtalar	197	66.55	437	71.52	178	69.80	812	69.88
Ankle	214	72.30	477	78.07	189	74.12	880	75.73
Knee	223	75.34	499	81.67	206	80.78	928	79.86
Hip	29	9.80	44	7.20	15	5.88	88	7.57
Total No. of patients	296	-	611	-	255	-	1162	-

$\chi^2 = 5.4$ $P>0.05$

N.B.: Percent was calculated out of the total number of patients in each group.

This table shows that the knee joint was the most commonly involved lower limb joint in different age groups, and statistically, the difference in lower limb joints involvement in different groups, was not significant (P>0.05).

Table (36): Other joints involved in the examined cases according to age of onset of the disease.

Age group	<30		30-		50+		Total	
Joint	No.	%	No.	%	No.	%	No.	%
C-Spine	94	31.76	240	39.28	105	41.18	439	37.78
TMJ	77	26.01	152	24.88	67	26.27	296	25.47
S-C J.	45	15.20	81	13.26	36	14.12	162	13.94
Total No. of patients	296	-	611	-	255	-	1162	-

$\chi^2 = 3.5$ $P>0.05$

N.B.: Percent was calculated out of the total number of patients in each group.

This table shows that the C-spine joints were the most common joint involved (other than upper and lower limb joints) in different age groups and statistically the difference in C-apine, TMJ, and S-C joints involvement in different groups, was not significant (P>0.05).

Table (37): Functional capacity of the examined cases according to age of onset of the disease.

Grade	<30		30-		50+		Total	
	No.	%	No.	%	No.	%	No.	%
1	16	6.23	30	5.69	9	4.02	55	5.46
2	162	63.04	330	62.62	123	54.91	615	61.01
3	69	26.85	140	26.57	75	33.48	284	28.17
4	10	3.89	27	5.12	17	7.59	54	5.36
Total	257	100.0	527	100.0	224	100.0	1008	100.0

$\chi^2 = 9$ P>0.05

This table shows that most of the patients in each group were grade 2 as regards functional capacity, and the difference between different age groups was not significant statistically (P>0.05).

Table (38): Presence of deformities in examined cases according to age of onset of the disease.

	<30		30-		50+		Total	
	No.	%	No.	%	No.	%	No.	%
Absent	178	59.33	369	60.20	194	75.78	741	63.39
Present	122	40.67	244	39.80	62	24.22	428	36.61
Total	300	100.0	613	100.0	256	100.0	1169	100.0

$\chi^2 = 21.8$ P<0.001

This table shows that the deformities were present more commonly in the group of patients who had age of onset of the disease <30 years, and the difference in presence of deformities in different groups was highly significant statistically (P<0.001).