

## Considerations about the *2011 Consensus of the Brazilian Society of Rheumatology for diagnosis and early assessment of rheumatoid arthritis*

In 1897, Frederick Shattuck, Professor of Medicine at *Harvard Medical School*, issued the following statement: “*Specialism is a natural and necessary result of the growth of accurate knowledge, inseparably connected with the multiplication and perfection of instruments of precision. It has drawbacks, absurdities even... A few years ago a recent graduate and ex-hospital intern asked me, apparently seriously, to give him the name of a specialist in rheumatism. We can afford to laugh at these things...*”

About a century later, Shattuck’s statement has not been confirmed. Rheumatology is a very well-established branch of medical science. We, rheumatologists, are at the same time spectators and protagonists of notable advances in the fields of physiopathogeny, diagnosis, and treatment of several affections, mainly regarding the most emblematic disease in our specialty, rheumatoid arthritis.

Therapeutic advances, however, are limited by the diagnostic capacity. It is only through the early and accurate diagnosis of rheumatoid arthritis that its adequate treatment, which can change the natural history of the disease, can be established. In an era of rapidly evolving serologic markers and imaging tests, the diagnosis of rheumatoid arthritis continues to depend essentially on clinical history: careful anamnesis and physical examination should be at the basis of diagnostic suspicion and complementary test request.<sup>1</sup>

The Brazilian Society of Rheumatology, through its Rheumatoid Arthritis Committee, has summarized the guidelines for management of rheumatoid arthritis in Brazil,

emphasizing the disease’s diagnosis and initial assessment. The establishment of such recommendations has aimed at defining concepts and supporting Brazilian rheumatologists, by using evidence obtained from controlled studies to standardize the diagnostic approach of rheumatoid arthritis in the Brazilian socioeconomic scenario. The recommendations presented have been elaborated aiming at not interfering with the medical decision individuality, common sense, and autonomy — the major instrument that characterizes the Science of Medicine.<sup>2</sup>

The 2011 *Consensus of the Brazilian Society of Rheumatology for the diagnosis and early assessment of rheumatoid arthritis* was aimed at serving as a guide for rheumatologists, clinicians, general practitioners, orthopedists, physiatrists, and other related specialists in the systematization and standardization of data collection for the often so complex diagnosis of rheumatoid arthritis.

*The art of medicine in the season lies*  
Ovid (43 B.C. – A.D. 18)

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