

### **My Treatment Approach for Autoimmune Disease:**

I believe strongly in helping the patient improve their lifestyle to reduce the activity of their disease and at the same time provide the best professionally recognized treatment. Pills alone will not provide the best outcome. I follow and endorse the importance of patient lifestyle as described by **Dr. Leonard Calabrese an eminent rheumatologist/immunologist of the Cleveland clinic**. If I only diagnosis and prescribe medication, I am providing incomplete treatment for my patients.

I find it tremendously gratifying to help a patient regain his/her ability to function and return to life with family friends and work. Research has provided Rheumatology with medications that are changing peoples' lives and stopping disease progression--altering the natural history of disease. This is very exciting!

The understanding and treatment of rheumatological disease is a fascinating study. Rheumatology is in a time of exponential change. Therefore I am always in the midst of studying one of the excellent programs presented by Harvard University, John Hopkins, Cleveland Clinic/Case Western Reserve and other medical schools. My patients usually improve—they get better. However, I agree with Dr. Carl Jung who once stated (I paraphrase), “...some patients simply respond better to one clinician over another.”

### **Rheumatology Urgent/Emergency Care:**

In some cases I consider the best I can offer the patient is to provide symptom relief, narrow the diagnostic possibilities and facilitate a rapid access to a clinician who has more experience and knowledge of this particular disease process than I. In other cases where the patient failed treatment with other providers—I see a way to a new approach and prescribe a new treatment path that succeeds. Always the question is what is best for the patient?

Rheumatology includes a wide variety of complex diseases from those that are fairly well understood such as rheumatoid arthritis with many excellent treatment protocols to a list of vascular diseases some of which are exceedingly difficult to treat because there significant gaps in understanding. Autoimmune diseases can impact any organ system in the body. Some of the more common diseases treated in rheumatology are rheumatoid arthritis, lupus, polymyalgia rheumatica and psoriatic arthritis.

My treatment approach to persons with an autoimmune disease that arrive at our clinic is to first determine a diagnosis based on the patient's history, clinical examination and diagnostic testing I utilize the most up-to-date laboratory testing available to rheumatology which I have adopted through working with to the best rheumatologist in the Phoenix Valley.

### **The Process of Patient Care:**

1. Begin with a complete medical history in the patient's own words.
2. Perform a complete clinical examination.
3. Order diagnostic tests including laboratory studies and x-ray.

4. Review all the data collected and determine the diagnosis based on criteria established by the American College of rheumatology that includes diagnostic and clinical evidence, medical history and patient's symptoms.

5. Together with the patient I formulate a treatment plan. In treating autoimmune diseases I follow and endorse the concepts that **Dr. Leonard Calabrese an eminent rheumatologist/immunologist** working at the Cleveland Clinic recommends in his patient booklet titled: **"Maintaining a Healthy Immune System: What you can do to help (available at our website [www.wrhorn.com](http://www.wrhorn.com)).**"

I have found in the last 8 years that the best outcome for a patient occurs when the patient is doing his/her part to develop an anti-inflammatory lifestyle. This same concept is presented by Dr. Calabrese in his booklet. Following an Anti-inflammatory Lifestyle--diet, exercise, and eliminating habits that aggravate inflammation in the body--these make a big difference in patient health. I do believe strongly in the efficacy of treatment medications that are available today (medications that are FDA approved and recommended by American College of rheumatology treatment models) and prescribed them readily. However I believe that what differentiates my treatment approach from some providers in rheumatology clinics is that I emphasize the importance of patient lifestyle changes.

6. I understand the frustrations of patients who experience a lack of symptom relief and no clear diagnosis. Some diseases are evolving to a point where a clear diagnosis emerges. A number of autoimmune diseases are quite difficult to diagnose correctly. There are many autoimmune diseases that have very minimal diagnostic testing to help us with a diagnosis. Many autoimmune diseases are evolving and many mild symptoms that are interrupting a patient's life may be common to many different diseases. Most autoimmune diseases have the potential to require help from other specialties especially pulmonology, cardiology, dermatology, gastroenterology, nephrology, neurology, endocrinology and others. These other specialties are sometimes very helpful in correctly arriving at a diagnosis. I refer patients often to these other specialties for help in both diagnosis and management of their disease.

7. I consult with other rheumatologists in the Valley and in Tucson. Sometimes a referring a patient to another rheumatology clinic is in the best interest of the patient. Just as I have had success with some patients who had a history of treatment failures at other clinics, another clinician with a different viewpoint may succeed with a treatment path that I did not consider. Therefore I do believe that it is sometimes in the best interest of the patient to move on to a new provider.