ISSN: 2469-9756

Open Access

The Treatment of Rheumatoid Arthritis with Gene Therapy

Amelie Nothomb*

Department of Medicinal Chemistry, University of Illinois, Chicago, USA

Introduction

Rheumatoid arthritis (RA) is a chronic autoimmune disease that primarily affects the joints. It causes inflammation, pain and swelling in the joints, leading to joint deformity and loss of function if left untreated. RA can also affect other organs in the body, such as the skin, eyes, lungs and heart. RA usually affects multiple joints, such as the fingers, wrists, elbows, shoulders, knees and ankles. The joints may feel warm, tender and swollen. People with RA often experience stiffness in the affected joints, particularly in RNA can cause persistent fatigue, which may be unrelated to physical activity or exertion.

Description

Over time, RA can cause joint deformity, as the inflammation and swelling lead to erosion of the cartilage and bone in the joints. RA can limit the range of motion of affected joints, making it difficult to perform normal daily activities. RA can also cause systemic symptoms such as fever, loss of appetite and weight loss. The exact cause of rheumatoid arthritis is unknown, but it is believed to involve a combination of genetic and environmental factors. There is no cure for RA, but early diagnosis and treatment can help manage the symptoms and slow the progression of the disease. Treatment options for RA may include medications (such as non-steroidal anti-inflammatory drugs, disease-modifying anti rheumatic drugs and biologic agents), physical therapy, occupational therapy and lifestyle modifications (such as regular exercise, rest and stress management). In some cases, surgery may be recommended to repair or replace damaged joints. It's important to work with a healthcare professional to develop an individualized treatment plan for rheumatoid arthritis based on the severity of the disease and the specific needs of the patient. Gene therapy has emerged as a promising approach for the treatment of various diseases, including rheumatoid arthritis (RA). Rheumatoid arthritis is a chronic autoimmune disease that causes inflammation and damage to joints, leading to pain, swelling, stiffness and reduced joint function. Gene therapy aims to address the underlying genetic factors that contribute to RA and provide long-term relief from symptoms. Here are some potential ways gene therapy could be used for the treatment of rheumatoid arthritis [1].

One approach is to use gene therapy to deliver anti-inflammatory genes to the affected joints. For example, researchers have experimented with using viral vectors to deliver genes that produce anti-inflammatory proteins, such as interleukin-10 (IL-10) or transforming growth factor-beta (TGF- β), to the joint tissues. These proteins can help suppress the inflammation associated with RA and reduce joint damage. Another approach is to modulate the immune system using gene therapy to restore immune balance. For instance, genes encoding regulatory T cells (Tregs), which are responsible for regulating the immune response, can be introduced into the body to increase the number of Tregs and dampen the immune response that causes inflammation in RA. This can help to control the autoimmune response and reduce joint inflammation [2].

Gene therapy can also be used to repair damaged cartilage in the joints

*Address for Correspondence: Amelie Nothomb, Department of Medicinal Chemistry, University of Illinois, Chicago, USA, E-mail: amelienoth@gmail.com

Copyright: © 2023 Nothomb A. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Received: 01 December, 2022, Manuscript No: Icoa-23-96012; Editor Assigned: 03 December, 2022, Pre-QC No. P-96012; Reviewed: 17 December, 2022, QC No. Q-96012; Revised: 23 December, 2022, Manuscript No: R-96012; Published: 30 December, 2022, DOI: 10.37421/2469-9756.2022.8. 161

affected by RA. Researchers have explored using gene therapy to deliver genes that stimulate the production of cartilage cells, such as chondrocytes, to replace damaged cartilage. This approach aims to promote cartilage regeneration and improve joint function. Gene editing technologies, such as CRISPR-Cas9, can be used to directly modify the genes associated with RA. By editing specific genes involved in the immune response or inflammation pathways, it may be possible to correct the underlying genetic mutations or dysregulations that contribute to RA. Gene therapy can be tailored to an individual's genetic profile to provide personalized treatment for RA. Genetic testing can help identify specific genetic markers associated with RA and gene therapy can be designed to target those specific genes or pathways, offering a more precise and effective treatment approach [3-5].

Conclusion

It's important to note that while gene therapy holds great promise, it is still a developing field and further research is needed to fully understand its safety, efficacy and long-term effects for the treatment of rheumatoid arthritis. Clinical trials and regulatory approvals are necessary steps in the development and approval of gene therapies for RA and it may take some time before gene therapy becomes a widely available treatment option for rheumatoid arthritis patients. It's always best to consult with qualified healthcare professionals for the most upto-date information and guidance on the treatment of rheumatoid arthritis or any other medical condition.

References

- Du, Xiaoxing, Xiaoting Hua, Tingting Qu and Yan Jiang, et al. "Molecular characterization of rifr mutations in *Enterococcus faecalis* and *Enterococcus faecium*." J Chemother 26 (2014): 217-221.
- Dakal, Tikam Chand, Deepak Kala, Gourav Dhiman and Vinod Yadav, et al. "Predicting the functional consequences of non-synonymous single nucleotide polymorphisms in IL8 gene." Sci Rep 7 (2017): 1-18.
- Ghosh, Abhirupa and Sudipto Saha. "Survey of drug resistance associated gene mutations in Mycobacterium tuberculosis, ESKAPE and other bacterial species." Scientific reports 10 (2020): 1-11.
- Zhao, Yan, Ziling Liu, Myat Thu Soe and Lin Wang, et al. "Genetic variations associated with drug resistance markers in asymptomatic *Plasmodium falciparum* infections in Myanmar." *Genes* 10 (2019): 692.
- Vaupel, Peter and Louis Harrison. "Tumor hypoxia: Causative factors, compensatory mechanisms and cellular response." Oncol 9 (2004): 4-9.

How to cite this article: Nothomb, Amelie. "The Treatment of Rheumatoid Arthritis with Gene Therapy." *Immunochem Immunopathol* 8 (2022): 161.