Fast Track Giant Cell Arteritis Referral Pathway



Age >50

Most >65
Rare in
non-Caucasions

Symptoms of GCA*

Subacute/ acute onset Raised CRP and/or ESR

**All 1-4 present? Refer to GCA Fast Track Pathway

New **visual symptoms**, especially partial/complete vision loss, amaurosis fugax, diplopia

60mg Prednisolone + PPI Urgent referral phone **Ophthalmology 01355 585387**

*Key symptoms of GCA:

- New type of headache (head pain)
- Scalp tenderness
- Jaw or tongue claudication
- Visual (amaurosis fugax, double vision)
- Limb claudication
- Abnormal temporal artery

Often in conjunction with:

- PMR
- Systemic upset

**If 1-4 not present, patients will be triaged outside the fast track pathway. Use probability score as a guide (on reverse); If you need advice contact on-call Rheumatologist via switch board.

Everyone else

40mg Prednisolone + PPI (60mg if jaw claudication or possible visual symptoms)

email:

GCAfastrak@lanarkshire.scot.nhs.uk or call Rheumatology 01698 366088

In completing SCI referral state clearly for 'GCA Fast Track Pathway' Include patient's current phone no.

Aims of the GCA Fast Track Service

- Provide rapid access to specialist clinical assessment, temporal artery ultrasound, biopsy and other imaging for those with possible GCA
- Provide a secure diagnosis in as many patients as possible
- Reduce rate of sight loss and stroke in GCA
- Minimise the impact of Prednisolone in those who don't have GCA

GCA probability score

Weightage	-3	0	1	2	3	
Age		≤49	50-60	61-65	>65	
Sex			М	F		
Onset		>24 weeks	12-24 weeks	6-11 weeks	<6 weeks	
CRP		0-5	6-10	11-24	≥25	

Symptoms	-3	0	1	2	3	
Cranial: Head and scalp pain		Ν	Υ			
Constitutional (weight loss, night sweats, pyrexia)		N	Single		Combination	
Polymyalgia		N		Υ		
Ischaemic (uniocular blurring, diplopia, amaurosis, jaw/tongue pain)		N			Y	

Signs	-3	0	1	2	3	
Visual (AION, CRAO, Field loss, RAPD)		N			Υ	
Temporal artery abnormality		N	tenderness	thickening	loss of pulse	
Extra-cranial artery abnormality		N	thickening	bruit	loss of pulse	
Cranial N palsy (3.4.6)		N			Y	

Alternative diagnosis	-3	0	1	2	3	Score
Active infection	Y	N				
Active cancer	Υ	N				
Systemic rheumatic diseases	Υ	N				
Head and neck pathology	Y	N				
Other	Y	N				

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Total score ≥10 patients at risk of GCA

Total score <10 likely not GCA, do not start prednisolone