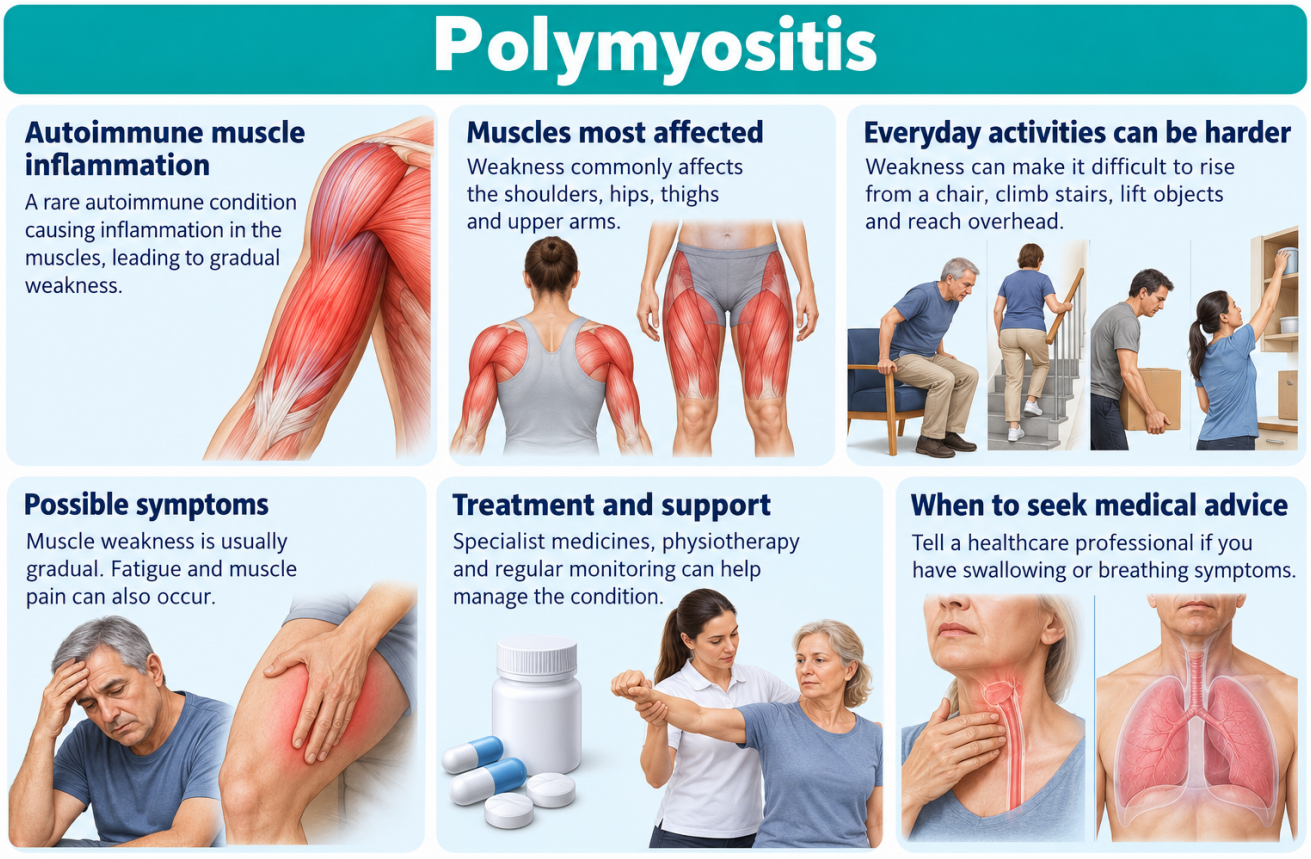
Polymyositis

Understanding symptoms, treatment and living well

Polymyositis

A guide to treatment, activity and self-management



Understanding polymyositis

Polymyositis is a rare autoimmune condition causing muscle inflammation and weakness, mainly around the shoulders, hips, thighs and upper arms. The immune system attacks healthy muscle tissue. It usually develops gradually and is more common in adults than children.

Supporting your wellbeing

Early treatment and ongoing care can bring significant improvement. Physiotherapy, pacing and regular monitoring help maintain strength, mobility and quality of life.

Understanding your condition

Symptoms, causes, assessment and practical information

Possible causes and who is affected

The exact cause is not fully understood. Autoimmune disease, other autoimmune conditions, viral triggers and genetic susceptibility may contribute. It is more common in women and people aged 30-60.

Common symptoms

- Weakness around the shoulders, thighs, hips and upper arms
- Difficulty climbing stairs, rising from a chair, lifting or reaching overhead
- Muscle pain or tenderness; fatigue
- Difficulty swallowing (dysphagia)
- Unintentional weight loss
- Occasionally breathlessness if breathing muscles are affected

Symptoms usually develop over weeks to months.

Diagnosis

- Muscle enzyme blood tests, such as CK
- Autoimmune blood markers
- Muscle MRI
- Electromyography (EMG)
- Muscle biopsy to confirm inflammation

When to seek medical help

Contact your doctor for worsening weakness, new swallowing difficulties, shortness of breath, medication side effects, or fever or signs of infection.

Key message

Early treatment and ongoing care can bring significant improvement. Physiotherapy, pacing and regular monitoring help maintain strength, mobility and quality of life.

Activity and rehabilitation

Suitable movement and pacing under professional guidance

Activity examples

Physiotherapy can help maintain strength and mobility, pace activity to avoid fatigue and support safe daily movement. Exercise should be tailored to your condition.



Activity guidance

Gentle movement: maintain mobility within your capabilities.
Strength: follow a tailored physiotherapy programme.
Pacing: increase activity gradually and avoid sudden bursts or overexertion.
Daily tasks: use energy-conservation strategies and equipment if needed.

Exercise safely

Maintain a regular gentle routine and report new symptoms early. Worsening weakness, new swallowing difficulty or breathlessness needs medical advice.

Management and next steps

Treatment, self-care and when to seek help

Medicines and specialist care

Treatment may include corticosteroids such as prednisolone, immunosuppressants such as methotrexate or azathioprine, or biologic therapies in resistant cases. Your specialist monitors response and adjusts treatment.

Therapies and monitoring

Physiotherapy supports strength, mobility and paced activity. Occupational therapy helps with daily tasks, energy conservation and equipment. Speech and swallow therapy may help dysphagia. Monitoring is important for possible lung disease or heart involvement.

Self-management

- Pace activity and maintain gentle exercise
- Eat a balanced, high-protein diet to support muscle repair
- Avoid smoking to help protect muscles and lungs
- Attend follow-ups and report new symptoms early

Outlook

Many people improve with early treatment. Some have flare-ups or need long-term care. Physiotherapy and monitoring support quality of life.

Support and further advice

NHS - inflammatory muscle diseases
Myositis UK - support and patient information
Versus Arthritis - autoimmune muscle conditions

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