abbvie | Giant Cell Arteritis

About GCA

Giant cell arteritis (GCA), also known as temporal arteritis, is an autoimmune disease of medium and large arteries, characterized by granulomatous inflammation (clusters of inflammatory tissue) of the three-layered vessel wall, which affects temporal and other cranial arteries that supply blood to the head and brain as well as the aorta and other large arteries that supply blood to the rest of the body.[1,2] If left untreated, GCA can lead to debilitating symptoms and potentially severe outcomes.[1] It is the most common vasculitis – a group of diseases characterized by inflammation of the blood vessels – affecting adults older than 50 years of age.[3]

Risk Factors Associated with GCA[3,7]

Although the underlying cause of GCA is unknown, researchers believe this autoimmune disease may be due to genetic or environmental factors.

Signs and Symptoms of GCA[3,7]

- Prominent/tender temporal arteries
- Tenderness of the scalp or temples
- Double vision
- Temporary or permanent vision loss
- Dizziness or difficulty with coordination and balance
- Jaw pain
- Sore throat or difficulty swallowing
- Chest pain
- Flu-like symptoms
- Arm or leg pain, numbness or weakness
- Aching or stiff shoulders and/or hip joints
- Weight loss

Diagnosing GCA[3,7,10]

- Presence of GCA symptoms
- Physical exam, which includes checking the temporal artery to determine if it is tender to the touch, hard, or if there is a lower pulse
- Temporal artery biopsy to detect the presence of abnormal cells in the artery wall consistent with GCA
- Ultrasound, for a less invasive approach

Did you know?

125,000*,4,5,6

Approximate number of people in the U.S. living with GCA**

> 50 Years[1]

Age at which GCA generally affects people, though it is most common between the ages of 70 and 80 years

Women > Men

Women are more than twice as likely as men to develop GCA.[3]

1. Ameer MA, Peterfy RJ, Khazaeni B. Giant cell arteritis (temporal arteritis). Updated August 8, 2023. https://www.ncbi.nlm.nih.gov/books/NBK459376/ 2. Weyand CM, Goronzy JJ. Immunology of giant cell arteritis. Circ Res. 2023;132(2):238-250. doi:10.1161/CIRCRESAHA.122.322128 3. Vasculitis Foundation. Giant cell arteritis brochure. Updated September 2023. https://www.vasculitisfoundation.org/wp-content/uploads/2024/02/2023-BW-VF-GCA-Brochure.pdf. Accessed January 15, 2025 4. Li KJ, Semenov D, Turk M, et al. A meta-analysis of the epidemiology of giant cell arteritis across time and space. Arthritis Res Ther. 2021;23(1):82. 5. Chandran AK, Udayakumar PD, Crowson CS, et al. The incidence of giant cell arteritis in Olmsted County, Minnesota, over a 60-year period 1950-2009. Scand J Rheumatol. 2015;44(3):215-8 6. Social Security Administration. Actuarial Life Table, 2019. Washington, DC: SSA; 2019 [cited 2021 Sep 27]. Available from: https://www.ssa.gov/oact/STATS/table4c6.html. 7. Giant cell arteritis. Arthritis Foundation. Accessed January 15, 2025. https://www.arthritis.org/diseases/giant-cell-arteritis. 8. Lawrence RC, Felson DT, Helmick CG, et. al.; National Arthritis Data Workgroup. Estimates of the prevalence of arthritis and other rheumatic conditions in the United States. Part II. Arthritis Rheum. 2008 Jan;58(1):26-35. doi: 10.1002/art.23176. PMID: 18163497; PMCID: PMC3266664 9. United States Census Data (by age) for 2023. Annual Estimates of the Resident Population by Single Year of Age and Sex for the United States: April 1, 2020 to July 1, 2023. https://www.census.gov/data/tables/time-series/demo/popest/2020s-national-detail.html. Accessed January 15, 2025 (estimated 118 million people ages 50 or older) 10. https://pmc.ncbi.nlm.nih.gov/articles/PMC9574015/

* Calculated using inputs from references

** Based on a prevalence of 200 per 100,000 people ages 50 or older, and a population of 118 million people in that age group, based on U.S. census data for 2023.

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