

Ankylosing Spondlyitis Cheat Sheet by ellieacook via cheatography.com/158377/cs/33449/

Background Information

Inflammatory condition mainly affecting the spine, causing fusion

Causes stiffness and pain

Main joints involved = SI joints and vertebral column

90% have HLA-B27 gene

Investigations

Raised CRP + ESR

HLA-B27

Schober Assesses mobility of spine test between 10cm above L5 and

5cm below

<20cm indicates a restriction

XR Bamboo spine

changes Squaring of vertebral bodies

subchondral sclerosis +

eriosions

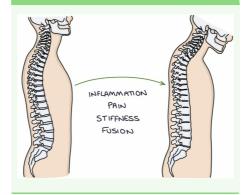
Syndesmophytes ossification

fusion of facet, SI and costovert-

ebral joints

MRI Bone marrow oedema





Management

Medication NSAIDs

Steroids in flares

Anti-TNF or monoclonals (etanercept, infliximab) Secukinumab (against IL-17)

Other Physio

Exercise
Avoid smoking
Bisphosphonates
Treat complications

Surgery if deformities

Presentation

20 year old, gradual spinal stiffness over >3 months

Lower back pain + stiffness

Worse with rest/at night/in morning

Takes 30 minutes for pain to improve in morning

Experience flare ups

Vertebral fractures

Bamboo spine

Associations

Systemic Weight loss, fatigue

Chest pain

Enthesitis Plantar fasciitis, achilles

tendonitis

Dactylitis

Anaemia

Anterior uveitis

Aortitis

Heart block

Restrictive lung disease

Pulmonary fibrosis of upper lobes

IBD



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