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

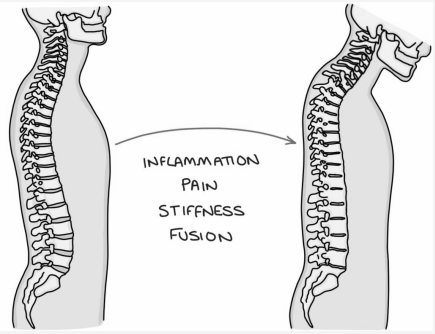
Investigations

Raised CRP + ESR

HLA-B27

Schober test	Assesses mobility of spine between 10cm above L5 and 5cm below <20cm indicates a restriction
XR changes	Bamboo spine Squaring of vertebral bodies subchondral sclerosis + eriosions Syndesmophytes ossification fusion of facet, SI and costovert-ebral joints
MRI	Bone marrow oedema

Image



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	

By **ellieacook**
cheatography.com/ellieacook/

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