SCREEND'EM BEFORE YOU TREAT'EM
A clinical tool to help identify spondyloarthritis (SpA)

SKIN
6-42% of patients with psoriasis develop psoriatic arthritis.

COLITIS OR CROHN'S
Arthritis is one of the most common extra-intestinal manifestations of inflammatory bowel disease. The prevalence of SpA in patients with Crohn's is estimated to be 26% at 6 year follow up.

RELATIVES
There is a strong relationship between SpA and HLA-B27 positive patients.
Family members of patients with SpA who are HLA-B27 positive have a 16-fold increase chance of developing ankylosing spondylitis if they are also HLA-B27 positive.

EYES
Acute anterior uveitis (AAU) can cause a painful, red eye with photophobia and blurred vision. 40% of patients presenting with idiopathic AAU have undiagnosed SpA. 50% of patients with AAU are HLA-B27 positive and >50% of these have SpA.

EARLY MORNING STIFFNESS
Inactivity related stiffness that lasts for more than 30 minutes is suggestive of inflammatory disease.

NAILS
Nail lesions occur in 87% of SpA patients and include:
- small depressions in the nail (pitting)
- thickening of the nails
- painless detachment from the nail bed (onycholysis).

DACTYLI TIS
Sausage-like swelling of the digits is a hallmark sign of psoriatic arthritis, occurring in 50% of cases.

ENTHESITIS
98% of SpA patients have at least one abnormal enthesis. The most common sites are the Achilles tendon, plantar fascia and patellar tendon.

MOVEMENT & MEDICATION EFFECT
SpA patients report improvement with activity but not with rest, and a favourable response to NSAIDs.

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THE KNEE RESOURCE