



## Ankylosing Spondylitis Special Interest Group (ASSIG)

### USEFUL ARTICLES

As a group interested in Ankylosing Spondylitis, we are all reading papers relating to this disease and how we can best manage our patients. We thought it would be useful to list some of these articles of interest with comments that you may find helpful in deciding whether you would like to read the whole paper. We aim to update this every few months and hope that you find this useful in your practice. If you have any papers that you would like to see listed or you would like to contribute, please do not hesitate to email us at [assig@rhpa.com](mailto:assig@rhpa.com). These articles were chosen by Linda Bradbury (Nurse Practitioner, Brisbane) March 2015.

#### **Information for patients (and health professionals) regarding driving responsibilities:**

<http://www.austroads.com.au/drivers-vehicles/assessing-fitness-to-drive>

#### **The Assessment of SpondyloArthritis International Society (ASAS) handbook: a guide to assess spondyloarthritis**

*Sieper et al (2009) Annals of the Rheumatic Diseases Jun 68 Suppl 2 ii1-44*

This supplement is an excellent guide for anyone interested in finding out more about the spondyloarthritis. It goes through the classification criteria, gives examples of MRIs and Xrays as well as discussing clinical assessments/outcome measurements and management recommendations.

[http://scholar.google.com.au/scholar?hl=en&q=The+Assessment+of+SpondyloArthritis+International+Society+%28ASAS%29+handbook%3A+a+guide+to+assess+spondyloarthritis&btnG=&as\\_sdt=1%2C5&as\\_sdtp=](http://scholar.google.com.au/scholar?hl=en&q=The+Assessment+of+SpondyloArthritis+International+Society+%28ASAS%29+handbook%3A+a+guide+to+assess+spondyloarthritis&btnG=&as_sdt=1%2C5&as_sdtp=)

#### **Identifying Axial Spondyloarthritis in Dutch Primary Care Patients, Ages 20-45 Years, With Chronic Low Back Pain**

*Van Hooft et al (2014). Arthritis Care and Research 68 (3) pp 446-453*

The aim of this study was to identify the prevalence of axial SpA in Dutch primary care patients with chronic back pain. A total of 364 patients were recruited with 86 patients or 24% fulfilling the ASAS criteria i.e. 1 in 4 primary care patients with chronic low back pain will have axial SpA. The authors conclude that GPs might be helped by using a simple referral tool i.e. good response to NSAIDs, a positive family history of SpA, symptom duration and self-reported inflammatory back pain by the ASAS questionnaire, to aid their

decision to refer patients with chronic back pain to a rheumatologist. Further studies for validation are required.

[http://scholar.google.com.au/scholar?q=Identifying+Axial+Spondyloarthritis+in+Dutch+Primary+Care+Patients%2C+Ages+20-45+Years%2C+With+Chronic+Low+Back+Pain&btnG=&hl=en&as\\_sdt=0%2C5](http://scholar.google.com.au/scholar?q=Identifying+Axial+Spondyloarthritis+in+Dutch+Primary+Care+Patients%2C+Ages+20-45+Years%2C+With+Chronic+Low+Back+Pain&btnG=&hl=en&as_sdt=0%2C5)

### **Estimating the Occurrence of Renal Complications Among Persons with Ankylosing Spondylitis.**

*Levy et al (2014) Arthritis Care and Research 68 (3) pp 440-445*

The estimates of renal complications in patients with AS are few and variable. The aim of this study was to estimate the age and gender specific risks of renal complications in a population-based cohort of AS patients in Quebec, between 1996-2006, relative to the general population. Renal complications were diagnosed in 3.4% of men and 2.1% of women with AS compared to 2% and 1.6% without AS. Renal complications were therefore more prevalent amongst patients with AS but also found to be higher in younger individuals. The authors identify that there are limitations to using administrative data and further investigation is warranted due to the potential relevance for treating patients with AS.

[http://scholar.google.com.au/scholar?q=Estimating+the+Occurrence+of+Renal+Complications+Among+Persons+with+Ankylosing+Spondylitis.&btnG=&hl=en&as\\_sdt=0%2C5](http://scholar.google.com.au/scholar?q=Estimating+the+Occurrence+of+Renal+Complications+Among+Persons+with+Ankylosing+Spondylitis.&btnG=&hl=en&as_sdt=0%2C5)

### **Consensus statement on the investigation and management of non-radiographic axial spondyloarthritis (nr-axSpA)**

*Robinson et al (2014) International Journal of Rheumatic Diseases. Jun 17 (5) pp548-56*

The aim of this paper was to construct a set of consensus statements based on a literature review to guide appropriate investigation and promote best management of nr-axSpA. Fourteen statements were formulated by rheumatologists and a radiologist with expertise in SpA. The opinion of a patient and a specialist nurse was also sought and included in the recommendations. The authors suggest that improvements in the care of patients with nr-axSpA will come from increased recognition of the condition by the public, primary care physicians and medical specialists as well as the use of effective therapies. Limitations include the fact that the aetiology and disease mechanism are incompletely understood and the physician's opinion is often used to validate diagnosis and tests. As available evidence is limited, these statements provide a good basis for investigation and management.

[http://scholar.google.com.au/scholar?q=Consensus+statement+on+the+investigation+and+management+of+non-radiographic+axial+spondyloarthritis+%28nr-axSpA%29&btnG=&hl=en&as\\_sdt=0%2C5](http://scholar.google.com.au/scholar?q=Consensus+statement+on+the+investigation+and+management+of+non-radiographic+axial+spondyloarthritis+%28nr-axSpA%29&btnG=&hl=en&as_sdt=0%2C5)

### **Association study of genes related to bone formation and resorption and the extent of radiographic change in ankylosing spondylitis**

*Cortes et al (2014) Annals of the Rheumatic Diseases doi:10.1136/annrheumdis-2013-204835*

This study aims to identify the genetic associations with severity of radiographic damage in AS. Xrays and blood samples were performed on 1537 AS patients. Xrays were objectively scored according to a validated system and variants in their genes noted. Findings from the analysis supported roles for bone resorption and prostaglandin pathways in the osteoproliferative changes in AS. The authors conclude that this type of study is effective at demonstrating genetic effects involved in disease severity in AS but more studies are required to identify the full complement of genes.

[http://scholar.google.com.au/scholar?q=Association+study+of+genes+related+to+bone+for+mation+and+resorption+and+the+extent+of+radiographic+change+in+ankylosing+spondylitis&btnG=&hl=en&as\\_sdt=0%2C5](http://scholar.google.com.au/scholar?q=Association+study+of+genes+related+to+bone+for+mation+and+resorption+and+the+extent+of+radiographic+change+in+ankylosing+spondylitis&btnG=&hl=en&as_sdt=0%2C5)

### **Genetics of Ankylosing Spondylitis**

*Robinson & Brown (2014). Molecular Immunology 57 pp2-11*

This paper outlines the progress made in the genetics of AS over the last few years. These findings have led to potential new treatments and a better understanding of the aetiopathogenesis of the disease.

<http://www.sciencedirect.com/science/article/pii/S016158901300432X>

### **The risk of smoking in patients with spondyloarthritis**

*Braun et al (2012) Postgraduate Medical Journal. November 88 (1045) pp617-618*

This paper discusses the prevalence of smoking in Europe and the US and the unfavourable influence on outcome of rheumatic diseases. Previous study findings with regard to SpA in particular are described demonstrating poor outcomes with smoking and cardiovascular risk with examples given. The authors suggest that close links between the patient's rheumatologist and their GP is essential in achieving best patient care.

[http://scholar.google.com.au/scholar?q=The+risk+of+smoking+in+patients+with+spondyloarthritis&btnG=&hl=en&as\\_sdt=0%2C5](http://scholar.google.com.au/scholar?q=The+risk+of+smoking+in+patients+with+spondyloarthritis&btnG=&hl=en&as_sdt=0%2C5)