

Sero-negative spondyloarthropathy

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Sero-negative spondyloarthropathy comprised a group of diseases characterized by chronic inflammatory spinal pain. These diseases included: ankylosing spondylitis, reactive arthritis, psoriatic arthritis, spondyloarthropathy associated with inflammatory bowel disease and undifferentiated spondyloarthropathy. Those patients suffered from these diseases usually complained chronic, relapsing lower back pain which can not be relieved by rest but improved by exercise. Besides, patients might have inflammation at multiple entheses which are the site where tendon and ligament inserted to bone. Clinically, heel pain and pain along the achillis tendon were the most frequent manifestations. Other sites of enthesopathies included: pain at intercostal muscle, infrapatella and suprapatellar ligament. Except moderate elevation of inflammatory marker such as ESR and CRP, no other specific serologic test is valuable for diagnosis. Most of patients did not have rheumatoid factor in their serum.

Bilateral or unilateral sacroilitis is the pathognomic X ray finding. Syndesmophyte formation along the spine can be seen in some patients with advanced diseases. In patients with Reiter's syndrome or psoriatic arthritis, erosive bone change accompanied with irregular bone proliferation made the affected joint deformed and loss of function. Extra-musculoskeletal symptoms can be found in some of these patients: uveitis, hypertrophic skin lesion, circinate balanitis for example. Most patients respond to NSAID treatment, in those refractory cases, sulfasalazine, methotrexate and biological agents can be used to relief the symptoms