MANAGING YOUR ANKYLOSING SPONDYLITIS

What Is Ankylosing Spondylitis?

Ankylosing spondylitis is a painful, arthritic condition most often found in men younger than 40, although women and children can have it. Ankylosing means joining together, and spondylitis refers to inflammation (swelling) in joints of the spine. Joints of the lower back can fuse, resulting in stooped posture.

Swelling in ligaments attaching to bones causes bone to wear away and then try to heal. New bone replaces elastic tissue called ligaments (ligaments connect bones), and stiffness occurs.

Most often affected are the lower back, chest, and neck. Other affected joints can include hips, shoulders, knees, and ankles. The illness can also affect other organs, such as eyes, heart, and lungs.

What Causes Ankylosing Spondylitis?

The cause is unknown, but it is an autoimmune disease. This means that the immune system attacks parts of the body, the result being inflammation and damage. People with a gene called HLA-B27 are more likely to get this illness than people without the gene.

What Are the Symptoms of Ankylosing Spondylitis?

The most common symptom is back pain that may start gradually. Early morning stiffness and pain go away during the day with exercise. People lose weight. People feel weak, tired, and feverish and have severe twinges or nagging aches down one leg or through the buttock. People also have night sweats, limited range of motion, stooped posture, and trouble breathing.

How Is Ankylosing Spondylitis Diagnosed?

The health care provider takes a medical history, does a physical examination, and gets x-rays of the lower (lumbar) spine. X-rays show inflammation and fusion of the joint (sacroiliac joint) connecting lumbar spine and hip. The health care provider may also order MRI when the patient's history is suggestive of ankylosing spondylitis but x-rays are equivocal.

The health care provider may recommend going to a specialist called a rheumatologist.

How Is Ankylosing Spondylitis Treated?

Treatment is mainly for pain and stiffness. Special stretching and strengthening exercises may prevent fusion of joints in bad positions.

A physical therapist can help design an exercise program.

Antiinflammatory drugs, including ibuprofen and naproxen, can help control pain and inflammation. They can have side effects, such as nausea, vomiting, and stomach disorders. A medication called sulfasalazine may also be used in some cases. Other drugs such as methotrexate and infliximab may slow disease progress.

If the disease caused major deformity and damage to the lumbar spine or hip, an orthopedic surgeon (a specialist in bone diseases) can perform surgery. Other specialists (e.g., ophthalmologist, cardiologist, or pulmonologist (for diseases of the eyes, heart, and lungs) may be needed.

DOs and DON'Ts in Managing Ankylosing Spondylitis

- **✓ DO** take medicines that your physician prescribes.
- ✓ DO begin a daily stretching, strengthening, and movement routine, including breathing exercises.

- ✓ **DO** use good posture, firm bed, and supportive chair at work help to maintain a straight spine.
- ✓ DO call your health care provider if you fall and notice a sudden change in alignment of your neck or back.
- **✓ DO** call your health care provider if you have drug side effects.
- **✓ DO** call your health care provider if you need a referral to a specialist.
- **✓ DO** call your health care provider if you have eye pain, loss of vision, or red eye.
- **✓ DO** call your health care provider if you have blood in bowel movements.
- ⊗ **DON'T** smoke.
- ⊗ **DON'T** drink alcohol if your health care provider tells you to stop. Your medicine may react with alcohol.

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FOR MORE INFORMATION

Contact the following sources:

- North American Spine Society: Tel: (630) 230-3600; Website: http://www.spine.org/
- Spondylitis Association of America: Tel: (800) 777-8189; Website: http://www.spondylitis.org/
- Arthritis Foundation: Tel: (800) 568-4045; Website: http://www.arthritis.org/
- American College of Rheumatology: Tel: (404) 633-3777; Website: http://www.rheumatology.org/

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