



## Axial Spondyloarthritis (Ankylosing Spondylitis)

Axial Spondyloarthritis (AxSpA), previously known as Ankylosing Spondylitis (AS), is an inflammatory arthritis of the back and spine which can occur with or without inflammation in other joints. In AxSpA, symptoms typically first occur in the early twenties, although average diagnosis lags 10 years behind the onset of symptoms. Men and women are affected equally. Back pain is common in the general population but back pain of more than 3 months duration is inflammatory if it fulfils 4 out of the following 5 criteria:

- Age at onset less than 40 years
- Onset starts gradually
- Improvement with exercise
- No improvement with rest
- Pain at night (with improvement on getting up)

Patients also often experience pain in the mid-buttock(s), at the front of the rib cage and between the shoulder blades.

AxSpA is related to some other types of arthritis such as psoriatic arthritis, and other conditions such as skin psoriasis, crohns disease and ulcerative colitis. It is strongly associated with a type of eye inflammation called iritis or uveitis.

AS responds well to physiotherapy, hydrotherapy, daily stretching exercises and medicines including non-steroidal anti-inflammatory drugs and newer biologic therapies. This will form part of the treatment following diagnosis in the rheumatology clinic.

## Flare management in AxSpA

Most people will experience a flare-up of AxSpA at some time, when the joints can become more painful and stiff and fatigue may be a problem. Flares may be due to a change in activity or due to illness but may have no obvious cause.





## Over time, you may find strategies or treatments that prevent or limit the

flare-ups you experience. You'll also become better at coping with them if and when they occur. Understanding the features of a flare can help you to manage them better. In addition, talking with other people who have AxSpA can be a good way of picking up tips for coping with flare-ups.

During a flare it can feel that stretches and movement may be harmful as they can be painful. In fact, exercise is one of the most important strategies for helping settle a flare. You can ask to be referred to a Physiotherapist for advice on the most appropriate exercises to do to help during a flare.

The National Ankylosing Spondylitis Society (NASS) have a lot of information about how to manage flares. You can follow this link to their flare management booklet: https://nass.co.uk/resource/nass-guide-to-managing-your-flares/