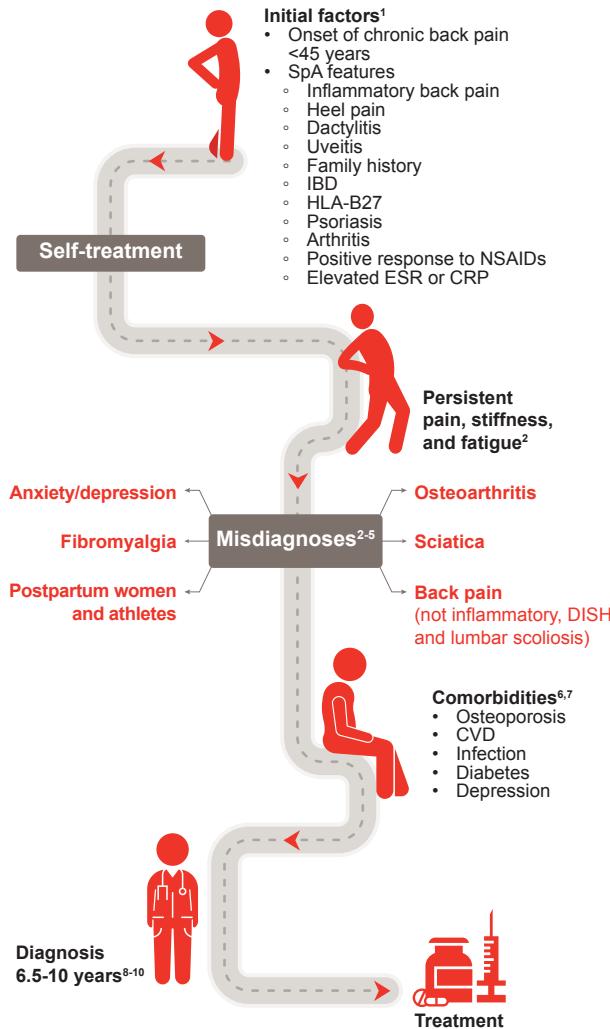


Journey to an axSpA Diagnosis – Recognizing the Complex Clinical Picture

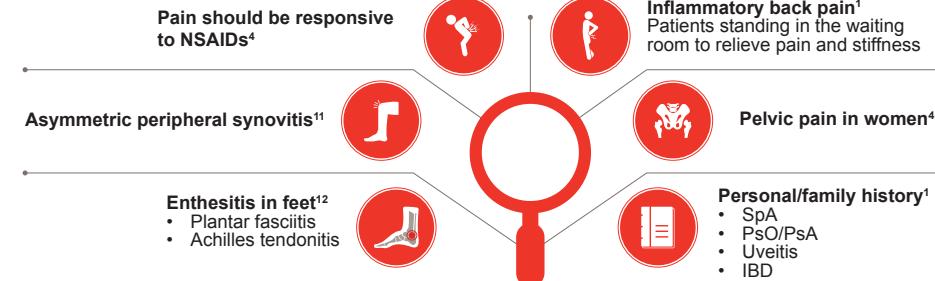
Average time to diagnosis is 6 - 10 years



axSpA lacks validated diagnostic criteria.³ In clinical practice, diagnosis can be based on a range of different assessments and information:¹⁻³



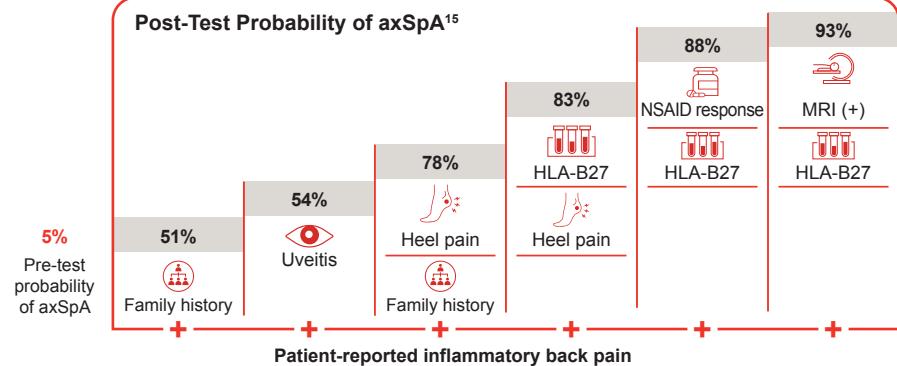
Common clues in axSpA Diagnosis



Clinical features can help clinicians diagnose axSpA in patients with Inflammatory back pain

- Ask questions to help differentiate IBP from mechanical back pain¹³
- Recognize that features of axSpA may not be objective¹⁴
- Use SpA features as clinical clues¹⁴

Post-Test Probability of axSpA¹⁵



axSpA=Axial Spondyloarthritis; CRP=C-Reactive Protein; CVD=Cardiovascular Disease; DISH=Diffuse Idiopathic Skeletal Hyperostosis; ESR=Erythrocyte Sedimentation Rate; HLA=Human Leukocyte Antigen; IBD=Inflammatory Bowel Disease; MRI=Magnetic Resonance Imaging; NSAID=Nonsteroidal Anti-inflammatory Drug; PsA=Psoriatic Arthritis; PsO=Psoriasis; SpA=Spondyloarthritis.

1. Rudwaleit M, et al. Ann Rheum Dis. 2009;68:777-783. 2. Oggie A, et al. Rheumatol Ther. 2019;6:255-267. 3. Danve A, et al. Clin Rheumatol. 2019;38:625-634. 4. Walsh JA, Magrey M. J Clin Rheumatol. 2021;27(8):e547-e560. 5. Voirin-Hertz M, et al. Semin Arthritis Rheum. 2020;50(1):48-53. 6. Molto A, et al. Best Pract Res Clin Rheumatol. 2018;32(3):390-400. 7. Strand VC, et al. J Clin Rheumatol. 2017;23(7):383-391. 8. Lapane KL, et al. BMC Fam Pract. 2021;22(1):251. 9. Zhao SS, et al. Rheumatology (Oxford). 2021;60(4):1620-1628. 10. Carvalho PD and Machado PM. Best Pract Res Clin Rheumatol. 2019;33(4):101427. 11. Winkler AE, Miller M. Mo Med. 2022;119(1):79-83. 12. McGonagle D, et al. Semin Arthritis Rheum. 2021;51(6):1147-1161. 13. NASS. Differentiating Inflammatory and Mechanical Back Pain. April 2018. Available from: <https://nass.co.uk/wp-content/uploads/2020/03/Physiotherapy-modules-1.pdf>. (Accessed May 2024). 14. Deodhar AA. Am J Managed Care. 2019;25 (Suppl. 17):S319-S330. 15. Rudwaleit M, et al. Ann Rheum Dis. 2004;63(5):535-543.



Lilly