

ABSTRACT

BACKGROUND

Undifferentiated spondyloarthropathy is a syndrome with features consistent with spondyloarthropathies but affected patients do not fulfill criteria for any specific spondyloarthropathy and it may represent an early phase or incomplete form of ankylosing spondylitis (AS) or another spondyloarthropathy.

AIM

To study the clinical profile of undifferentiated spondyloarthropathy and to assess their outcome after one year of follow up.

MATERIALS AND METHODS

Prospective study analyzing 40 patients who fulfilled European Spondyloarthropathy Study Group criteria was carried out. Detailed history and physical examination were done. BASDAI, BASFI, BASMI, HAQ were analyzed at study entry and after one year. Hemogram, RFT, LFT, RF, CRP, ASO and HLA- B27 were done. X-ray pelvis was taken at the study entry and after one year.

RESULTS

36 men and 4 women were affected with a mean age at onset of 28.4 years. The mean duration of the disease was 22.7 months (range:3-72 months). Clinical features include inflammatory back ache (67.5%), buttock pain (52.5%), enthesitis (80%), arthritis of knee (77.5%), ankle (72.5%), foot joints (45%), hand joints (20%), hip (17.5%), shoulder (12.5%), wrist (10%)

and elbow joint (7.5%), dactylitis (12.5%), uveitis (5%). Family history was positive in one patient. ESR and CRP were elevated in 29 and 27 patients respectively. HLA-B27 was positive in 57.5%. 82.5% patients had normal X-rays, 7.5% grade I changes and 10% grade II changes at study entry. After one year 20% had grade I changes, 17.5% grade II changes and 5% grade III changes. After one year of follow up, 33 patients remained as undifferentiated spondyloarthropathy, 5 progressed to AS, 2 progressed to psoriatic arthritis.

CONCLUSION

Lower limb joints are predominantly affected. Most of the patients remained as undifferentiated spondyloarthropathy after one year follow up. The chance of progression to AS / psoriatic arthritis is directly proportional to the duration of the disease. Hip involvement at the time of presentation may predict their progression to AS. HLA-B27 positive patients are more prone for progression to AS / psoriatic arthritis. All patients of undifferentiated spondyloarthropathy should be followed up for their progression to AS or psoriatic arthritis or inflammatory bowel disease.