

Clinical and Medical Case Reports

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Approach to seronegative arthritis prognosis and management

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Seronegative arthritis is a common chronic inflammatory disease with several types of phenotypic presentation. Axial peripheral and enthesiastic manifestations are well known. Possible extra rheumatic manifestations like uveitis, psoriasis and inflammatory bowel disease are associated. Assessment of Spondyloarthritis International Society in 2009 laid down criteria for classification. It highlighted non-radiographic forms of axial spondyloarthropathy. It also incorporated advances in knowledge of immunological mechanisms involved. This enabled development of new therapeutic options. New management concepts were also proposed for treating to target / tight control. Therapeutic window of opportunity was defined. In 2016 EULAR updated the management recommendations for axial spondyloarthritis and it aimed at aggregating preexisting management of recommendations and use of anti-TNF agents in axial spondyloarthritis. It finally summarised into 5 overarching principles and 13 recommendations. The overarching principles emphasize on (a) Multidisciplinary management coordinated by the rheumatologist (b) Primary goal to maximize the long-term quality of life (health related) (c) Need to combine non-pharmacological and pharmacological modalities (d) Aim at the shared decision between patient and rheumatologist (e) Consider cost in management.

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