

What Is Ankylosing Spondylitis? (AS)



AS is a form of inflammatory arthritis that affects the spine and sacroiliac joints of the lower back. Ankylosing Spondylitis is a form of spondyloarthritis or spondyloarthritis.

Symptoms can include

- Chronic back pain and stiffness: In severe cases, the affected joints in the spine may become fused and inflexible. There may also be deformity or curving of the spine.
- Inflammation, pain and stiffness in other parts of the body: shoulders, hips, ribs, heels, hands and feet.
- The eyes can be affected as well (known as iritis or uveitis).

The condition can occur at any age but usually develops between 13 and 35 years of age and is uncommon after the age of 40. It affects men almost three times more often than women.

Causes can include genetic factors. About half the risk is related to a gene called HLA-B27, although the gene is also present in healthy people who don't have the condition. There is a genetic link between AS and Crohn's disease or inflammation of the bowel. There is no cure but treatment can minimise symptoms and prevent complications.



Medication

- Pain relievers such as paracetamol.
- Steroid injections – short-term treatment for flare-ups.
- Non-steroidal anti-inflammatory drugs (NSAIDs) such as diclofenac, ibuprofen and naproxen relieve pain and stiffness by reducing inflammation but may have side-effects.
- Biologic medicines, known as 'disease-modifying drugs' can be used to treat severe AS to reduce pain, stiffness and tender or swollen joints, and improve function. They are given by injection and include adalimumab, etanercept, infliximab and secukinumab.

How Can I Manage My AS?

Early diagnosis and good management can slow the progression of the disease, control inflammation and reduce damage to the spine. A number of treatments can relieve pain and stiffness, but non-medication approaches are just as important to help you live an active and productive life. Talk to your rheumatologist and healthcare team to help you decide on the best form of treatment for you.



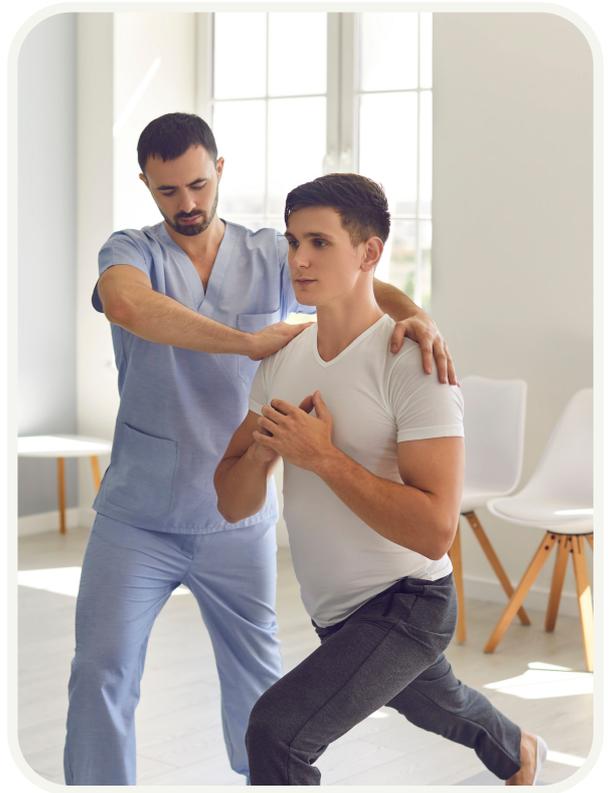
Lifestyle Changes:

Posture

People with AS tend to bend forwards and stoop. Keeping the spine straight is important to prevent complications. When standing, keep your bodyweight balanced on both feet with shoulders relaxed (back and down). Keep the back of your neck straight and long. Do not stand still for too long and try to maintain this tall, relaxed posture even when moving. A firm mattress may be more comfortable than a soft one.

Exercise

Exercise is vital to maintain movement of the spine and strengthen back and neck muscles. Swimming is often recommended as the water supports your weight. Stretching exercises will help reduce stiffness and increase flexibility. Ask a physiotherapist to suggest exercises that are right for you and try to do them everyday. Be careful not to overdo it - periods of rest and relaxation are also important.



Physical Therapies

Physiotherapy, occupational therapy and hydrotherapy can all help to keep your muscles strong and your spine flexible. An orthotist or podiatrist will be able to suggest aids to good posture.

Practice Relaxation

Learn how to relax muscles and get rid of tension. This can help decrease pain, and improve sleep and energy levels. Plan and pace your daily activities to avoid exhaustion.

Stop Smoking

AS can reduce the movement of your rib cage when you breathe, which makes smoking particularly damaging. People with any form of inflammatory arthritis are also at greater risk of heart disease, and smoking further increases this risk.

Healthy Eating

There is no scientific evidence that diet has any specific effect on AS, but healthy nutrition is important to maintain general health and energy levels and to prevent osteoporosis.

Watch Your Eyes

About 30% of people with AS will develop iritis (aka uveitis) or inflammation of the eyes. The eye may feel irritated and painful. You could also have headaches, blurred vision or sensitivity to light. See an optometrist or ophthalmologist as soon as possible if you think you have iritis.

For more information:



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