Physiotherapists’ awareness, knowledge and confidence in the recognition and referral of possible Axial Spondyloarthritis: Are we contributing to diagnostic delays?

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Methodology

Online Survey

• Vignettes
• Questions on inflammatory disease as a cause of persistent low back pain
• Demographics

Ethical approval was granted from the University of Hertfordshire, Health and Human Sciences Ethics Committee (HSK/PGT/UH/03202)
NICE SpA guideline entry criteria

- **Age < 45 years**
- **Chronicity > 3 months**

**Additional features** which should raise suspicion of inflammatory pain

- 24-hour pattern
- Investigations
- Worse with rest
- Peripheral features
- Extra-articular features
- Early morning stiffness
- Insidious onset

**Awareness of NICE spondyloarthritis guidelines**

- LBP started before age 35 years
- Waking $2^{nd}$ $\frac{1}{2}$ night because of symptoms
- Buttock pain
- Better with movement
- Improvement within 48 hours of NSAIDs
- 1$^{st}$ degree relative with SpA
- Current or past:
  - Arthritis
  - Enthesitis
  - Psoriasis

**Concepts identified**

- Full:
  - All concepts identified

- Good:
  - 3-4/5 or 3/4 concepts identified

- Poor:
  - 1-2/5 or 1-2/4 concepts identified

- None:
  - No concepts identified
Only 60% of respondents correctly diagnosed the axial spondyloarthritis vignette at primary diagnosis compared to 94% and 80% of respondents for non-specific low back pain and radiculopathy vignettes respectively.
‘Full awareness’ or ‘good awareness’ was demonstrated by 61% of respondents familiar with the NICE guidelines, compared to 33% of those not familiar when demonstrating clinical reasoning and 23% of respondents familiar with the NICE guidelines, compared to 15% of those not familiar when demonstrating direction of further subjective screening.
Key Messages

• There is a lack of consideration of axial SpA in the differential diagnosis of low back pain

• Lack of awareness and knowledge of signs, symptoms and risk factors for suspected axial SpA

• Awareness of criteria for referral to rheumatology was limited

• The consequences for diagnostic delay are significant and indicate the need for professional education and applying guidance to improve screening and earlier recognition

• The survey provides a valuable evaluation and education tool for measuring and raising awareness of axial SpA
Thank you

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With thanks to: