



EARLY DIAGNOSIS OF AXIAL SPONDYLARTHROSIS IN INFECTIOUS BOWEL DISEASES

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Introduction

Despite numerous clinical studies on the frequency, pathogenetic mechanisms and clinical characteristics of axial spondyloarthritis (SpAx) in infectious bowel diseases (IBD) and intestinal damage in ankylosing spondylitis (SA), there are currently a number of unresolved problems, especially the problem of early diagnosis of arthropathies..

Keywords

Yersinia enterocolitica, Salmonella enteritidis, Shigella flexneri, spondyloarthritis.

Purpose

Determination of peculiarities of early manifestations of axial arthropathies in IBD to improve early diagnosis and identify clinical variants with the development of algorithm for the early detection of SpAax in IBD.

Material and methods

During the years 2015-2021, 141 patients were examined, of which 50 patients with SA and 91 patients with IBD from the Republican Clinical Hospital "Timofei Moșneaga.

According to the mediation of the inflammatory response patients with IBD were divided into 2 groups: the first - *Yersinia enterocolitica* or *Campylobacter jejuni* (Y±C) , the second - *Salmonella enteritidis* or *Shigella flexneri* (S±Sh).

Results

In patients with IBD, the following clinical variants of arthropathies have been identified: SpAax - 28,6%, SA - 15,4%; arthralgia - 38.5%, arthritis - 13.2%. Conventional radiography and MRI of SI joints increased the incidence of SpA from 6.6% to 28.6%. In patients with IBD and axial arthropathies, arthralgia, arthritis and uveitis were the frequent manifestations and the possibility of detecting axSpA was higher in the presence of arthritis.

Conclusions

Our study allowed us to establish the parameters and the diagnosis of (S±Sh), in the presence of which special attention should be paid to patients with IBD in case of suspicion of SpA.