

DOCTOR DISCUSSION GUIDE

Managing Non-Radiographic Axial Spondyloarthritis

Diagnosing and treating non-radiographic axial spondyloarthritis (nr-AxSpA) is key to relieving symptoms and improving quality of life. The first step to getting vital treatment is being able to understand the condition and to talk to your doctor about your concerns, the signs and symptoms of nr-AxSpA, and treatment considerations.

Vocabulary to Know

The following are terms that may come up as you talk to your doctor about managing nr-AxSpA. Here is what they mean.

Axial refers to the joints of the axial skeleton: the spine, chest, and hip bones.
Non-radiographic means while nr-AxSpA causes symptoms, there is no evidence of visible damage to joints on x-rays.
Spondyloarthritis is an umbrella term for inflammatory conditions that sometimes cause inflammation in the spine, in addition to a plethora of other symptoms.
Axial spondyloarthritis (axSpA) refers to spondyloarthritis primarily affecting the spine, chest, and hip bones. Nr-AxSpA can be early AxSpA or it can be an entirely separate disease. What distinguishes nr-AxSpA from AxSpA is nr-AxSpA is clinically defined as having an absence of x-ray evidence of any structural damage to the sacroiliac joint (SI) joints. The SI joints are located between the iliac bones and the sacrum, connecting the spine to the hips.
Back pain occurring because the immune system attacks its own joints in the spine, back, and hips. This kind of pain is not considered mechanical. This distinction is important because inflammatory back pain needs to be treated with medications that decrease inflammation in order to prevent pain and disability.
Mechanical pain is a general term referring to any type of back pain caused by stress and strain on the muscles of the vertebral column. Often, mechanical back pain results from bad habits, like poor posture, incorrect lifting or bending, and poorly designed seating.
A biologic drug (biologic) is created from living substances using biotechnology. These drugs contain proteins that control other proteins, genes, hormones, and cellular processes. These proteins cause the body to suppress or activate certain biological processes in the immune system.
NSAIDs are effective for reducing inflammation and relieving pain. They work by blocking production of chemicals that promote inflammatory processes. NSAIDs work like corticosteroids, but they do not cause as many side effects.
Interleukin (IL)-17 inhibitors are biologic medications that slow down the pro- inflammatory IL-17 protein present in high levels in people who have certain inflammatory diseases. IL-17 inhibitors are sometimes prescribed by doctors to treat nr-AxSpA.
Tumor necrosis factor (TNF) inhibitors are a group of biologic medications that block the pro-inflammatory TNF protein. TNF blockade can decrease systemic inflammation leading to subsequent improvement in pain, swelling, stiffness, and fatigue.





Questions to Ask

The following questions can help you to start the conversation with your doctor about the best ways to manage nr-AxSpA.

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Ab	About Symptoms		
	How is nr-AxSpA back pain different than other types of back pain?		
	Does nr-AxSpA only affect my axial joints?		
	Is eye inflammation typical? Why am I also experiencing GI symptoms?		
About Causes and Risk Factors			
	What risk factors may have caused me to develop nr-AxSpA? Are my genes involved?		
	What lifestyle factors may have contributed and how can I change these habits?		
	Will nr-AxSpA raise my risk for other diseases?		
About Diagnosis			
	What diagnostic tests have been ordered and what do the results mean?		
	Now that I have been diagnosed, what is the next step? Should I see other specialists? Do you need to do additional testing?		
About Treatment			
	What are my treatment options?		
	What happens if one treatment does not help, or if my symptoms get worse?		
	What results can I expect from treatment and how long will it take for treatments to work?		
	What side effects should I look out for?		
	What complementary therapies can I try to manage symptoms (i.e. physical therapy)?		
	of indication (i.e. priyologi inorapy):		