

Mnemonic for Assessment of the Spondyloarthritis International Society Criteria

To the Editor:

Spondyloarthropathies (SpA) are a group of interrelated and overlapping chronic inflammatory rheumatic diseases that include ankylosing spondylitis, reactive arthritis, arthritis associated with psoriasis, Crohn's disease and ulcerative colitis, and undifferentiated spondyloarthritis. These diseases share many clinical features and an association with HLA-B27¹. Assessment of SpondyloArthritis international Society (ASAS) has developed new criteria for inflammatory back pain (IBP), an important clinical feature of the predominantly axial form of SpA². ASAS has also developed classification criteria for predominantly axial SpA, which will provide a new standard for classifying the nonradiographic early stage of axial SpA³.

We provide 2 mnemonics (IPAIN and SPINEACHE), which will help ease the recall of these 2 criteria, and thus help their more widespread use for rapid screening and classification of patients with axial SpA in daily clinical practice (Table 1 and Table 2).

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Table 1. IPAIN: a mnemonic for inflammatory back pain.

IPAIN

Insidious onset
Pain at night (with improvement upon getting up)
Age at onset < 40 years
Improvement with exercise
No improvement with rest

Table 2. SPINEACHE: a mnemonic for the clinical parameters of the ASAS classification for axial spondyloarthritis.

Sacroiliitis on Imaging (by radiograph or MRI) + ≥ 1 clinical measure

HLA-B27 + ≥ 2 other clinical measures

Clinical measures

SPINEACHE

Sausage digit (dactylitis)
Psoriasis-positive family history of SpA
Inflammatory back pain
NSAID good response
Enthesitis (heel)
Arthritis
Crohn's/colitis disease — elevated CRP
HLA-B27
Eye (uveitis)

MRI: magnetic resonance imaging; NSAID: nonsteroidal antiinflammatory drugs; CRP: C-reactive protein