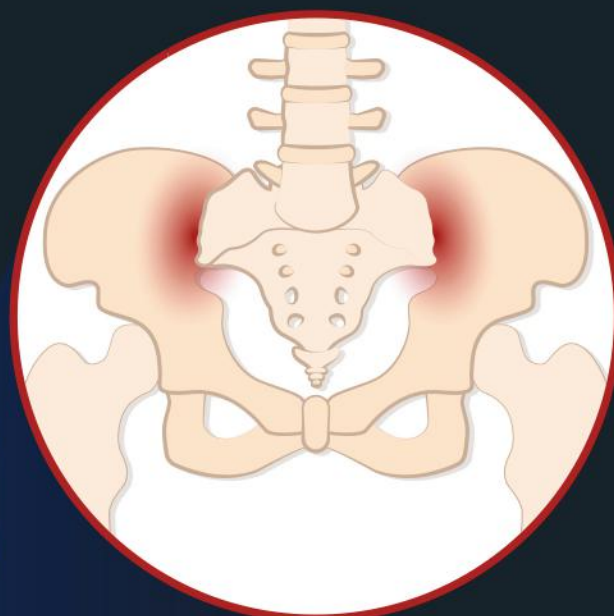


Subclinical Myocardial Dysfunction as a Potential Differentiator between Axial Spondyloarthritis Subtypes

Myocardial dysfunction has been associated with patients with Axial spondyloarthritis (axSpA)

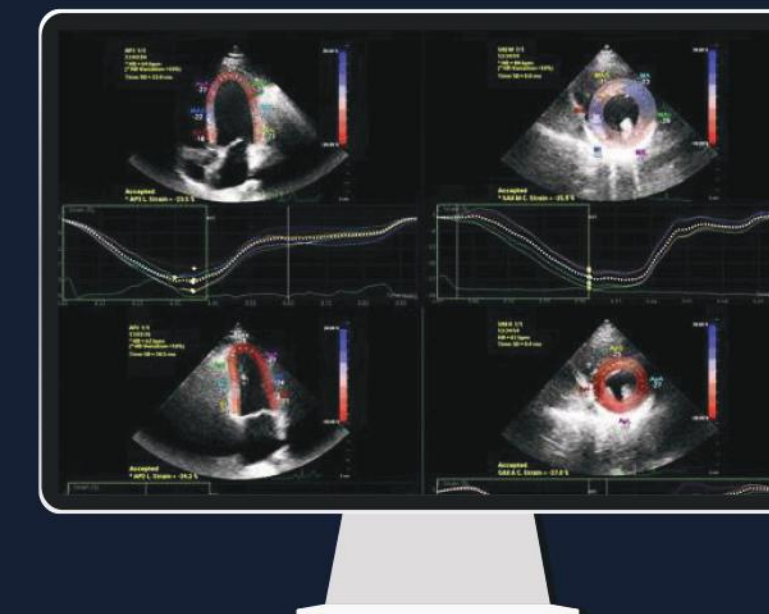


Cross-sectional case-control study



Patients with
Radiographic axSpA (r-axSpA) (n = 72)
Non-radiographic axSpA (nr-axSpA) (n = 38)

Healthy controls
(n = 56)



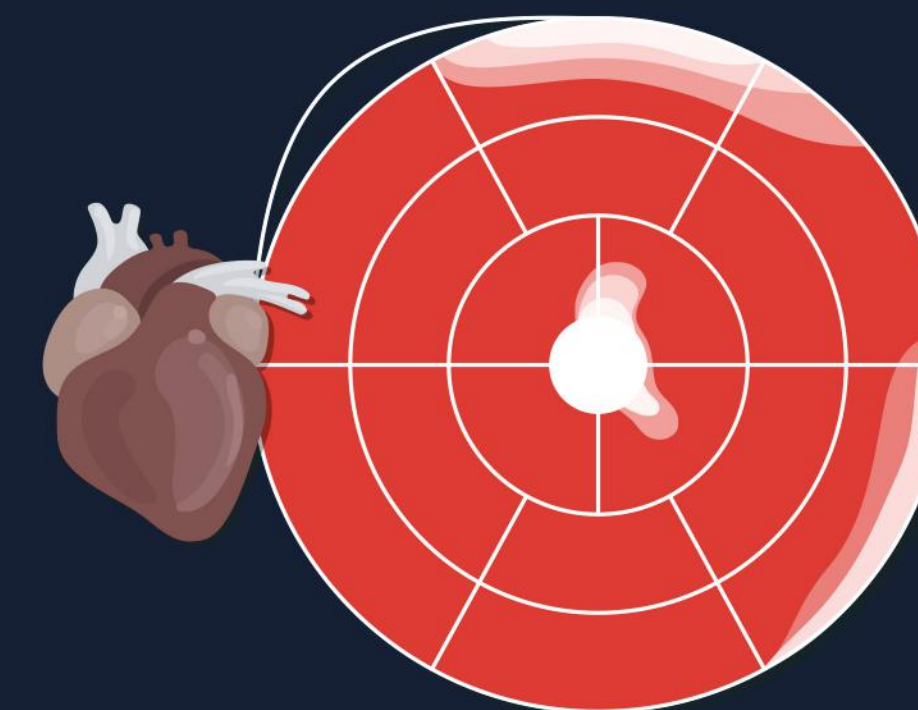
Detailed echocardiographic examination using M-mode, Doppler, and speckle tracking echocardiography

But, does its presence differ between the subtypes of axSpA?



All groups had similar ejection fraction values

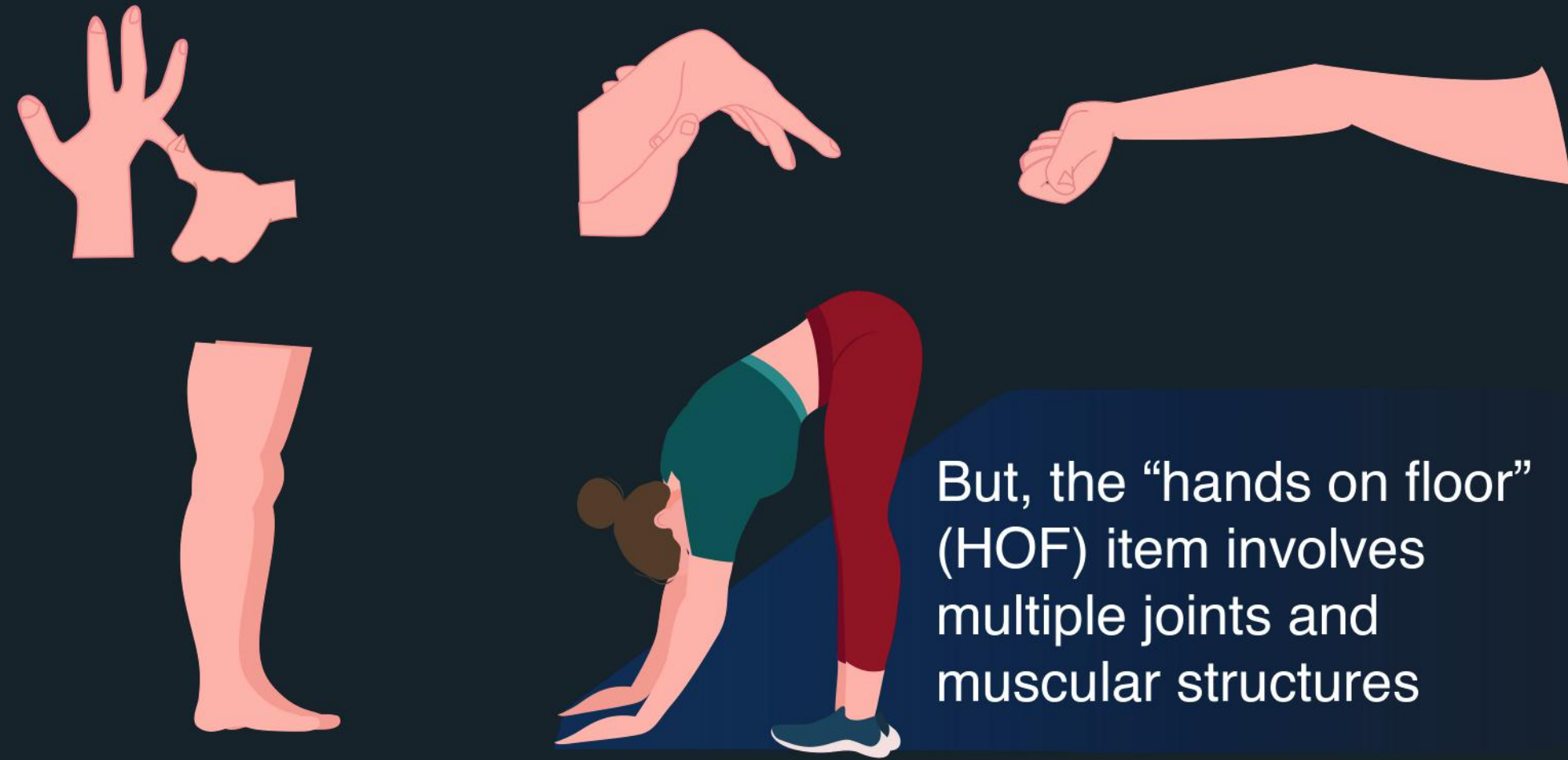
But the r-axSpA group showed significantly lower global longitudinal peak systolic strain, indicating myocardial dysfunction



Subclinical myocardial dysfunction can be used as a differentiating factor between r-axSpA and nr-axSpA

Is the “Hands on Floor” Test a Good Way to Diagnose Joint Hypermobility?

Scoring the Beighton is the normal screening procedure to diagnose joint hypermobility



Is HOF a useful and valid measure for diagnosing joint hypermobility ?



Primary school children in South Africa (N = 460)

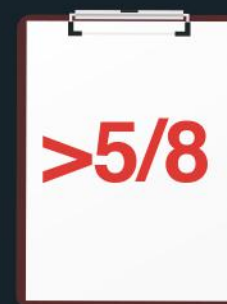


Joint hypermobility diagnosis

=

Beighton score (excluding HOF item)

>5/8



Of all children...



34.6% were hypermobile



8.9% scored positive on HOF item

HOF item had...



High specificity



Low sensitivity

The HOF item on the Beighton score does not add value to joint hypermobility diagnosis

Does the item ‘hands on floor’ add value to the Beighton score in identifying joint hypermobility?

Corten et al. (2020) | *European Journal of Rheumatology* | 10.5152/eurjrheum.2020.19185

