

CHALLENGES IN THE REHABILITATION OF SPINAL SERONEGATIVE RHEUMATOID ARTHRITIS IN NON SPINAL SPECIALIST UNIT: A MULTIDISCIPLINARY APPROACH

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Background

Seronegative arthritis describes a group of conditions that present with inflammatory arthritis but without a positive rheumatoid factor. Seronegative Rheumatoid arthritis (RA) represents a significant disease burden, for which prompt therapeutic intervention continues to be hampered by diagnostic challenges.

Case report

We report a 68 year old lady with a diagnosis of seronegative Rheumatoid Arthritis (RA). She had multilevel disc prolapse with severe spinal stenosis at L4/5 due to disc prolapse in combination with facet joint hypertrophy. Had lumbar spinal decompression. She developed severe cauda equina secondary to spondylolisthesis at L4/5 and has had two decompressions. She then had CT guided aspiration of left facet joint. Scans confirmed a right psoas abscess L4/L5 that has increased in size. She was managed conservatively. She received extended doses of intravenous antibiotics and followed by 3 months of oral antibiotics. During the course of illness she developed weakness in her left foot (3/5) and severe pain in her legs more so in the left limb. She developed a grade 2 pressure sore on her sacrum. She was managed on complete bed rest with frequent turns. She started to develop contractures in both lower limbs. Once the skin had healed she started a protocol of gradual sitting up. Her severe pain improved and was weaned off opiates. Soft tissue contractures were prevented and reversed by passive stretching daily. Her bladder function has been maintained by using a flip/flow regime. Her bowel sensation started to recover but not fully. Her care was provided in one unit (non-spinal) with a wide range of expertise to cover aspects of her rehabilitation. ASIA score has improved from C to D.

Conclusion

There is insufficient evidence to support a bespoke treatment strategy for seronegative RA subset. Complications can be devastating. A multidisciplinary Team approach is essential due to the complexity in such cases. Sound knowledge and proactive approach in preventing complications is crucial. Patient education of spinal injuries is vital to their rehabilitation.

Keywords: Seronegative arthritis, Spinal injury, complications