

## Long-term management of Axial Spondyloarthritis



By Zoë Clark

**This year, the iO has partnered with the National Ankylosing Spondylitis Society to help raise awareness of axial spondyloarthritis, and reduce the delay in diagnosis, which currently stands at 8.5 years from first reported symptoms. Zoë Clark, an osteopath operating in Norfolk, shares her osteopathic management of patients with the condition.**

Axial Spondyloarthritis (AxSpA) requires a multi-disciplinary, patient focused approach to management, and osteopaths are uniquely placed to play a key role. Given that osteopaths tend to have longer appointment times with patients, we can spend this time really getting to know our patient's lifestyle and goals, in order to formulate a plan to achieve those goals. Not only can osteopaths help manage and treat some of the symptoms associated with AxSpA, we can safely and effectively treat unrelated musculoskeletal injuries.

Osteopaths have the luxury of time to spend with patients. It's important to get to know exactly what the patient's aims are (work, home life, hobbies, activities) and the current limitations (e.g. pain levels, fatigue, mobility). Then you can form a plan and make it clear what your role is, what your aim of treatment is, and then monitor progress.

In terms of managing AxSpA symptoms, osteopathic care should be focused on reducing and managing pain, maintaining mobility and improving and maintaining function.

### Pain

Depending on the duration a person has had AxSpA, when they were diagnosed and started treatment, as well as the current disease activity, pain can be caused by a variety of tissues. In order to treat safely and effectively, we must be confident in identifying the tissues causing the pain, including:

- Spinal inflammation
- Enthesitis
- Peripheral asymmetric (oligo) arthritis
- New bone formation/syndesmophytes
- Spinal stenosis
- IVD and joint degenerative changes

### Changing symptoms and red flags

Patients will be familiar with the severity and type of symptoms they experience, so it's important to ask whether the pain is a different type or more severe than usual. This will help you understand if there is a red flag to treatment. Conditions and presentation that are potential red flags in patients with AxSpA include:

- Osteoporosis
- Vertebral fracture
- Hyperkyphosis
- Atlantoaxial dislocation/instability
- Subarachnoidal cysts
- Indicators of cauda equina syndrome

### Symptom diary

I encourage patients to use a symptom diary to track their symptoms over time. This can be helpful for osteopathic treatment, but also to review before rheumatology appointments. Often check-ups are only short appointments and can be months apart, so having any issues written down ensures patients can remember them and report them back to the rheumatologist accurately to make the most of their appointment. [TalkingAS.com](http://TalkingAS.com) has a helpful online questionnaire for patients to use.

### Management of unrelated MSK conditions

The osteopathic techniques used during treatment will depend on which structures are causing the pain, and imaging can be useful when deciding which types of structural techniques to use.

It's important to note that people with AxSpA can be treated for a problem unrelated to their condition, but treatment will often need to be modified. In my experience, AxSpA patients respond well to joint mobilisations, soft tissue work, functional techniques and dry needling. I use a more gentle approach and avoid spinal HVTs.

### Mobility

It's essential to maintain mobility in the spine, but also in the ribs and peripheral joints to aid activities of daily living. Joint mobilisations, muscle stretches, METs, NMTs and functional techniques are the main techniques for these areas. It's also important to perform balance and proprioceptive exercises to reduce the risk of falls, especially in patients with syndesmophyte formation or osteoporosis.

Exercises following treatment are essential for patients with AxSpA to integrate the physical changes from osteopathic treatment and maintain improvements in mobility. Every patient is different and needs to be assessed individually, but usually a mixture of muscle stretching and strengthening is necessary for improving mobility.

### Lifestyle advice

Improving a person's function not only relates to the physical treatment, but also the diet, exercise and lifestyle advice osteopaths can offer. It's important to maintain cardiovascular fitness, respiratory health, and a healthy weight in patients with AxSpA to keep them functioning well and maintain their quality of life. Patients with AxSpA have an increased risk of atherosclerosis, so emphasis on correct diet, regular cardio exercise and reduction of alcohol is important. Smoking cessation is helpful for this and can also limit disease progression, because smoking is linked to a higher likelihood of spinal bone changes in AxSpA.



## Respiratory health

Respiratory health can be affected by osteopathic treatment by working on the spine, ribs, diaphragm and accessory muscles. Tailored breathing and spinal mobility exercises can be performed each day. I ask patients what time of day they are most likely to perform exercises, such as first thing in the morning, during the day, when at their desk, or in the evenings. By creating a routine that fits into their schedule, I increase the likelihood that they will carry it out regularly.

## Exercise and activity

Exercise plays a key role in maintaining the health and function of patients with AxSpA. According to the European League Against Rheumatism (EULAR), "The cornerstone of non-pharmacological treatment of patients with axial SpA is patient education and regular exercise".

Studies have shown that group exercise classes are more beneficial, so it's important to encourage patients to join an exercise group. Osteopaths can help patients choose a suitable group such as yoga, Pilates, walking, Nordic walking, swimming, aqua aerobics and tai chi. It's important to find a group with a qualified instructor who is aware of AxSpA and the considerations to be made during exercise to reduce the risk of injury. I believe osteopaths are well placed to be able to communicate with a patient's fitness instructor to ensure the exercises are suitable if necessary.

The benefits of exercise are temporary and need to be regular in order to maintain improvements and benefits. This is one reason why it's important to work with patients to find an exercise class or routine that a patient enjoys, finds achievable and can fit into their schedule.

## Dealing with fatigue

Some aspects that osteopaths may not be able to treat directly can still be influenced. Fatigue is a major symptom of AxSpA, particularly when back pain is disturbing sleep. Educating patients about sleep hygiene, relaxation/breathing/mindfulness techniques and encouraging them to discuss this with their doctor can be very beneficial.

It's important to encourage patients to pace their activities. Sometimes a useful tool to understand the fatigue patients experience is 'The Spoon Theory', by Christine Miserandino, where a spoon represents a small amount of energy. People not living with a condition such as AxSpA have an unlimited amount of spoons per day, but living with AxSpA you only have a certain number. Each time you do an activity, you use a spoon, so you have to be aware of your energy levels and choose activities accordingly. Patients often find this analogy helpful as a way to explain their fatigue to loved ones, colleagues and other health professionals.

## Patient values

With the extent of time osteopaths have available with patients, it's important to get to know patients well and learn about their current lifestyle and if they have any goals they would like to reach or changes they would like to make.

With long-term conditions, there is a focus on quality of life. Generally, this is focused on the patient's ability to work but it's also important to take into consideration home life, hobbies, their independence and the roles they have in their life. Understanding the patient's values in this area and supporting their ability to manage in these aspects supports both their physical and mental wellbeing.

Goals need to be formulated with patients, but they need to be realistic, time-based and have a clear plan of action. It's all about empowerment and encouragement. By educating patients about their condition and their overall health, we can help empower patients to make healthy choices for themselves while working towards their goals.

## Working with other health professionals

It's important for patients to have a good support system of health professionals and to know what role each person plays, so that they can seek help swiftly. This can include, for example, a discussion around the patient's ergonomics for work life, driving and home life as well. In addition, referral to Occupational Therapy can be helpful to provide tools to aid activities and ergonomics if necessary. We should be confident and proactive in communicating with other healthcare professionals to create a good network around the patient and work together as a team.

## Personal and patient support networks

It's also important to ensure patients have a good support network around them to support their mental health. It is helpful for them to speak to other people with similar conditions and to engage with NASS, a UK charity dedicated to supporting those living with AxSpA, who run a network of local groups and offer a range of online resources for those living with the condition. You can find out more at [www.nass.co.uk](http://www.nass.co.uk)

## Free CPD when you share your knowledge of Axial Spondyloarthritis (AxSpA)

As part of the iO's partnership with the National Ankylosing Spondylitis Society (NASS) to reduce the delay in the diagnosis of those with Axial Spondyloarthritis, we are undertaking a survey asking osteopaths to share their experience and knowledge about the condition, including barriers to referral.

The survey is open until the 15th July and on completion you will find access to free online CPD that will refresh and update your knowledge on the condition. You can take part at [www.surveymonkey.co.uk/r/understandingaxspa](http://www.surveymonkey.co.uk/r/understandingaxspa)

## Zoë Clark



Zoë Clark is an osteopath practicing in Norfolk. Zoë has worked with NASS providing guest blog posts for their website for young people with AS, [ASOne](#), and spoke at the inaugural meeting of NASS, the iO and the Royal College of Chiropractors at the Norfolk and Norwich University Hospital in February 2018.

Zoë has been involved in developing a survey for osteopaths and chiropractors to assess current knowledge of AxSpA and identify future beneficial projects to help reduce the delay to diagnosis and improve patient care.

You can find Zoë on social media- Facebook (Zoë Clark Osteopathy), Twitter (@zoelarkosteo) and Instagram (@zoetheosteo).