Axial spondyloarthritis or spondyloarthropathy (axSpA) is an inflammatory condition that can affect the back, pelvis, neck, and some other larger joints causing chronic back pain and stiffness. The stiffness associated with axSpA generally gets better with exercise. Initially, the inflammation is in the area of the lower back between the pelvis and spine (called the sacroiliac joints) and may spread to other joints along the spine.

An x-ray of the sacroiliac joints and spine is usually the initial imaging test. Follow-up imaging with MRI of the sacroiliac joints and spine with and without or without contrast is usually appropriate as the next test. CT sacroiliac joints and spine without contrast or with contrast is sometimes appropriate. If these initial tests do not show a problem with the sacroiliac joints, the next imaging tests will be focused in the area of concern in the spine. Usually appropriate tests are x-ray, MRI, and CT of the spine. After axSpA is diagnosed, treatment focuses on controlling the disease and improving quality of life. Follow-up imaging may be needed to see if your disease is getting worse. X-ray sacroiliac joint and spine is usually appropriate. MRI sacroiliac joints and spine may be appropriate.

Ankylosis can lead to bone loss (osteoporosis) and increase the risk of breaking a bone. If a broken bone is suspected, x-ray, MRI without contrast, or CT without contrast of the spine is usually appropriate.

See the full appropriateness criteria for this topic at https://acsearch.acr.org/docs/69402/Narrative/?_ga=2.239809987.1153510718.1619884740-887328184.161369544.