

## **Ankylosing Spondylitis from well known to some less observed findings**

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**Purpose:** Traditionally, ankylosing spondylitis (AS) is known as a chronic progressive disease mainly affecting the axial skeleton. Here in this study we aim to display the MRI findings of active inflammatory AS from well-known axial skeleton findings to some other occasional ones.

**Outline of Content;** Sacroiliac joints, discovertebral junctions, entheses of interspinal ligaments, costovertebral and zygapophyseal joints are the most common anatomical locations to be affected in AS patients. In one report with histopathologic correlation, it was postulated that the disease was not merely an enthesitis but the synovium and the subchondral bone was affected as well. In this term, the spinal disease may be accompanied by arthritis of the peripheral joints, enthesal organs and fracture like complications mostly in the long-standing patients.

**Summary** At the end of this educational exhibit, the viewer will review the *i*) classical imaging findings of AS observed on axial skeleton at its active inflammatory phase, *ii*) will know where to look at on MRIs of AS patients and *iii*) tailor the MRI accordingly.



The rupture of the plantar fascia (curved arrow) in a patient with long standing AS.

Fracture lines (arrow) with hypointensity on T1-W sequence at the iliac side of the ankylosed left sacroiliac joint.

## **References**

- (1) JR Winston, et al. Arthritis & Rheumatism. 2009; 61:1187–1193
- (2) Francois RJ, et al. Arthritis & Rheumatism. 2000;43: 2011–2024