

Freedom of Information Act 2000 - Request Reference FoI/22/437
Use of MRI in the diagnosis of Axial Spondylarthritis

1. Which hospital Trust do you work within?

Part 1 – Access to MRI

2. How many MRI scanners suitable for scanning the spine and SIJ do you have access to?

- None
- 1
- 2
- 3
- 4 or more

3. What type of scanner do you have access to?

- 1.5T
- 3T
- Other (please state)

4. Roughly how long would an outpatient wait for an MRI in your Trust?

- Less than 2 weeks
- 2-4 weeks
- 1-2 months
- 2-3 months
- Greater than 3 months

5. Do you have regular meetings or discussions with your rheumatology colleagues?

- Weekly
- Fortnightly
- Monthly
- Quarterly
- As required
- Never

6. How is axial SpA MRI imaging reported in your Trust?

- Internally by a specialist MSK radiologists
- Internally by a non-specialist radiologist
- Outsourced to a specialist MSK radiologist service
- Outsourced to a non-specialist radiologist service

Other (please state)

Part 2 – Use of MRI in diagnosis of axial SpA

7. Are you familiar with the rheumatological term axial Spondyloarthritis (axial SpA)?

- Yes
 No

8. Are you familiar with the BRITSpA consensus guidance on MRI for the diagnosis of axial Spondyloarthritis? ([BRITSpA guidance](#))

- Yes
 No

9. In what circumstances would you use MRI in the assessment/diagnosis of spondyloarthritis?

- We do not, or only rarely, use MRI for assessment/diagnosis of spondyloarthritis
 We only use MRI if the x-rays of the SIJ and spine are normal/not diagnostic
 We use MRI as a diagnostic test, irrespective of whether there is an abnormality on plain x-rays
 Other reasons

Part 3 – MRI protocols

10. Please detail below what your standard MRI protocol for the assessment of spondyloarthritis is (specifying the below for each element of the protocol)

- (i) field strength, 1.5T
(ii) sequences, T1 and T2 whole spine, T1 and STIR SIJs
(iii) anatomical coverage, whole spine and SIJs
(iv) acquisition planes, Sag and Ax whole spine, Cor SIJs

11. What is the approximate scan time for this protocol? If multiple scanners are used, please give an average or range.

45 minutes.

12. When assessing patients for possible early spondyloarthritis with MRI would you routinely scan?

- Sacroiliac joints only
 Sacroiliac joints and lumbar spine
 Sacroiliac joints and thoracic spine
 Sacroiliac joints and thoracolumbar spine
 Sacroiliac joints and whole spine

- Sacroiliac joints and any other spinal segment, including whole spine, as requested by the rheumatologist
- Other

13. If you do not scan any of the spine in the assessment of spondyloarthritis, why not?

- Spinal features are not necessary in the diagnosis of axial-SpA
- There are no specific lesions for spondyloarthritis in the spine
- The scan time is too long
- It costs too much money to scan
- Other

14. If you do not MRI scan the whole spine in the assessment of spondyloarthritis, why not?

- Imaging the lumbar / thoracolumbar spine is sufficient to assess spinal features of axial-SpA
- Spinal features are not necessary in the diagnosis of axial-SpA
- It takes too long to scan the spine
- It costs too much money to scan the whole spine
- Other

15. If you are MRI scanning part of, or the whole spine in the assessment of spondyloarthritis would you perform?

- Sagittal, axial and coronal plane acquisitions
- Sagittal and axial plane acquisitions only
- Sagittal plane acquisitions only
- Other

16. If you are MRI scanning the sacroiliac joints, would you perform?

- Semi-coronal plane acquisitions only
- Semi-coronal and semi-axial acquisitions

17. When MRI scanning for the assessment of spondyloarthritis which sequences do you use in your protocol? Please tick all that apply.

- Fat-suppressed, water sensitive sequence (e.g. STIR, T2w imaging with fat suppression or T2w Dixon imaging)
- Fat-sensitive sequence (T1w imaging)
- Gadolinium-enhanced imaging
- Conventional T2w imaging (without fat suppression)
- Gradient echo imaging (including VIBE or Dixon)

Other

18. When MRI scanning for the assessment of spondyloarthritis do you perform gadolinium-enhanced imaging of the sacroiliac joints?

Yes

No

19. When MRI scanning for the assessment of spondyloarthritis do you perform gadolinium-enhanced imaging of the spine?

Yes

No

Part 4 – MRI lesions and definitions

20. Are you aware of formal recommendations regarding which imaging features should contribute to the identification of a positive MRI of the sacroiliac joints in spondyloarthritis?

Yes

No

21. What MRI SIJ spondyloarthritis features do you use to make a diagnosis of Spondyloarthritis?

Subchondral Bone marrow oedema / osteitis only

Erosions

Fat infiltration

Sclerosis

Joint space widening / effusion

Enthesitis

Capsulitis

Fat deposition in the joint space ("backfill")

Synovitis

New bone formation (areas of ankylosis)

All of the above

Combination of the pathologies ticked above

Other

22. Are you aware of formal recommendations regarding which imaging features should contribute to the identification of positive MRI of the spine in spondyloarthritis?

Yes

No

23. What MRI spinal spondyloarthritis features do you use to make a diagnosis of Spondyloarthritis?

- Vertebral corner bone marrow oedema
- Endplate oedema
- Diffuse vertebral body oedema
- Posterior element bone marrow oedema
- Spinous process bone marrow oedema
- Vertebral corner fat infiltration
- Syndesmophyte formation
- All of the above
- Combination of the pathologies ticked above
- Other