

LOPSA or Late-Onset Peripheral Spondyl-Arthropathy

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ABSTRACT

Introduction: LOPSA or Late-Onset Peripheral Spondyl-Arthropathy, better known as "Late-Onset Peripheral Joint Disease in Ankylosing Spondylitis" is a particular and exceptional form of ankylosing spondylitis of the elderly subject characterized by the notable frequency of inaugural peripheral involvement: acute oligoarthritis and edema of the extremities in more than 50% of cases.

Case report: 62-year-old patient, with no significant pathological history who had for some months had inflammatory arthralgia of the hands and fingers with back pain and an important morning rustling leading him to consult in town where treatment with NSAIDs (Artribrex®) has been prescribed but without improvement. The examination found a cervical ankylosis with a limitation of lateral inclinations. The mobilization of the sacroiliac joints was painful. Peripheral joints were free. There were no signs of vasculitis or cutaneous psoriasis lesions. The biological assessment showed an ESR at 59mm/H1 without any other abnormalities. The radiological assessment revealed staged and bilateral lumbar syndesmophytes giving the appearance of a "bamboo column", a Romanus spondylitis beginning in the L4 and L5 vertebrae and a bilateral sacro-ileitis stage II confirmed by CT-scan. Immunoassay (rheumatoid factor, antinuclear antibodies, anti-soluble antigen antibodies and

anti-CCP antibodies) was negative. The diagnosis of spondyloarthropathy type ankylosing spondylitis was retained according to New York criteria. Under NSAIDs, colchicine® and Salazopyrine® the evolution was favorable.

Conclusion: as rare as it is, ankylosing spondylitis must be evoked in principle in front of any recent inflammatory joint complaint in the elderly subject, even if peripheral. The late forms of ankylosing spondylitis are characterized by atypical inaugural manifestations (RS3PE, pseudoalgodystrophy, seronegative oligoarthritis), a poor response to NSAIDs and a more severe evolution requiring diagnosis and treatment without delay.