

## EMS PITFALLS:

# Ankylosing Spondylitis

## What is Ankylosing Spondylitis (AS)?

AS is a form of systemic inflammatory arthritis that primarily affects the spine. In severe cases, **the spine may fuse into a single, rigid, and brittle bone that is prone to fracture.**

Common signs and symptoms of AS include chronic back and neck pain, and stiffness. AS may affect other joints and organs throughout the body. AS commonly affects all ages and populations, impacting roughly 1.7 million U.S. adults.

## Why is AS Important to Recognize?

Standard EMS treatment protocols can **cause injury, disability, and death** in patients with AS. AS can be impossible to recognize in a field setting. Proper management of AS requires first responders to recognize their patient may have an increased risk for spinal fractures.

## How Do I Recognize AS?

You cannot diagnose AS solely through a physical exam, **making communication the most critical part of AS prehospital treatment** in order to avoid injury and provide proper treatment.

## How Do I Manage AS in an Emergency Setting?



### ASSESSMENT

- Approach all AS trauma patients with significant caution.
- Assume any patient with AS and acute back / neck pain to have a spinal fracture until proven otherwise.
- Assume any patient with AS suffering even a minor fall or trauma to have a spinal fracture until proven otherwise.

### AIRWAY & INTUBATION

- The manipulation of an AS patient's airway and head during intubation may be difficult and potentially dangerous.
- Do not attempt to straighten, flex, or otherwise manipulate the spine.
- Attempt to maintain adequate oxygenation using A) a BVM or B) a supraglottic device.
- If a definitive airway is required, consider using video laryngoscopy to reduce patient manipulation.
- If the patient immediately requires a definitive airway and intubation is unlikely or potentially dangerous, consider directly proceeding to a surgical airway.

### SPINAL IMMOBILIZATION

- Cervical collars (c-collars) and rigid backboards pose a significant risk to AS patients because they may cause spinal fractures and subsequent neurological damage.
- Instead of using c-collars and rigid backboards, consider splinting in place using padding.
- Avoid or reduce patient manipulation.

### PREEMPTIVELY...

- Check Medical Alert Bracelets
- Check Emergency Information on Smartphone
- Perform Community Outreach
- Create Public Awareness
- Educate Team Members

## BEFORE

### WHILE ON SCENE...

- Ask Questions of, and Listen to Your Patient
- Speak with Friends & Family
- Inform & Direct Other Healthcare Providers
- Call the Patient's Physician or Your Medical Director

## DURING

### AT HANDOFF...

- Notify the Receiving Facility That:
  - The Patient Has AS
  - You Have Provided Any Modified Treatment
- Inform Other Medical Professionals About the Hidden Dangers of Standard Protocols for Patients

## AFTER

Visit [learn.spondylitis.org](http://learn.spondylitis.org) for more information, and to earn free continuing education hours!