

Ankylosing Spondylitis: Promoting wiser healthcare

Healthcare is often described as ‘high value’ or ‘low value’¹. Both are important to know about so you can get the right care, not care that is risky or has little benefit.

High value care is	Low value care is
<ul style="list-style-type: none"> ✓ <i>Effective</i> – evidence suggests that it works to produce a positive effect ✓ <i>Safe</i> – there is low risk of harm ✓ <i>Cost effective</i> – despite cost, the care provides benefit relative to alternative options 	<ul style="list-style-type: none"> ✗ <i>Unlikely to be effective</i> – evidence suggests that the care will provide no or very little benefit ✗ <i>Potentially harmful</i> – the risk of harm is greater than any likely benefit ✗ <i>Not cost effective</i> – since the care is unlikely to provide benefit, the cost associated with care delivery could be used on other care options

High value care for ankylosing spondylitis includes:

- ✓ Early diagnosis, achieved through discussing your symptoms with your health professional and identifying which specific tests could help confirm a diagnosis.
- ✓ A personalised management plan that focuses on education about your condition, available treatments, and how you can actively manage your condition with healthy lifestyle habits.
- ✓ Use of medicines: this includes anti-inflammatory medications, with those known as coxibs having fewer risks and side-effects. If you have asthma or gut problems, you need to discuss use of these medicines with your doctor.
- ✓ Participating in regular exercise and physical activity to help to improve your spinal and chest mobility (better breathing function), build strength and improve your capacity to do the things you want to do the things in life. Exercise “dose” (type/amount) can be guided by your physiotherapist.
- ✓ Support to cease smoking (if relevant)
- ✓ Physical therapies (manual therapy), may be helpful in the short term for some people.
- ✓ Sometimes, even though you are doing all the high value things, you may need more help. Treatment with disease-modifying agents (‘biologic DMARDs’) may need to be considered. You can ask your GP or rheumatologist about this care option.

¹ Scott IA, Duckett SJ In search of professional consensus in defining and reducing low-value care Med J Aust 2015; 203 (4): 179-181. || doi: 10.5694/mja14.01664



Low value care for ankylosing spondylitis:

- × Use of opioid medications (these have a significant risk of harm) or other medicines when they are not indicated, or when the risk of harm outweighs potential benefits.
- × Use of disease-modifying agents (DMARDs) such as Methotrexate and Sulphasalazine for spinal (neck and back) symptoms. These are more useful for joints like hips and ankles
- × Repeated spine x-rays or MRIs should only be done in specific cases (e.g.; a change in care).
- × Spinal manipulation is not recommended for AS due to risk of harm. Gentle spinal mobilisation is a preferred manual therapy.
- × Spinal surgery

Important questions to ask your health professional

Here are [5 important questions](#) (available in 12 different languages) from the [Choosing Wisely](#) initiative. These are the recommended questions that you should ask your health professional about your ankylosing spondylitis pain to help you decide what the right care is for you.

5 important question to ask your health professional(s)

1. Do I really need this test, treatment or procedure?
2. What are the risks?
3. Are there simpler, safer options?
4. What happens if I don't do anything?
5. What are the costs?