

Reactive Arthritis

Reactive arthritis is a seronegative synovitis that results due to infection in another part of the body, i.e. due to cross-reactivity. Possible infections that can end in reactive arthritis include:

1. post-enteric infections (Salmonella, Shigella, Yersinia);
2. post-venereal infections (Chlamydia trachomatis, Ureaplasma urealyticum, Neisseria gonorrhea);
3. post-respiratory infections;
4. Reiter's syndrome;
5. post-streptococcal arthritis and brucellosis can cause both reactive arthritis and septic arthritis.

Being HLA-B27 positive results in increased susceptibility to reactive arthritis, especially in males. Females are less commonly affected. Patients are not more susceptible to infection, but appear to respond differently with resulting bacterial persistence when HLA-B27 is present. The majority of patients have a single attack which subsides, but some may develop a disabling relapsing and remitting arthritis.

Clinical Features

1. acute, symmetrical, lower-limb arthritis;
2. enthesitis, causing plantar fasciitis or Achilles tendon enthesitis;
3. conjunctivitis;
4. superficial erosions on the tongue, buccal mucosa, palate and pharynx (usually asymptomatic);
5. sacroiliitis and spondylitis;
6. acute anterior uveitis;
7. skin lesions that may resemble psoriasis.

The possible skin lesions involved in reactive arthritis include balanitis, keratoderma blenorrhagica, and nail dystrophy.

Treatment

1. antibiotics where there is a persisting infection, especially in the case of Chlamydia trachomatis infection (in this case use doxycycline or azithromycin);
2. NSAIDs and local corticosteroids for pain relief;
3. sulfasalazine or methotrexate for relapsing reactive arthritis;
4. TNF-alpha blocking agents for severe and persistent disease.

Links

Related Articles

- Psoriatic Arthritis
- Keratoderma Blenorrhagica

Bibliography

- KUMAR, Parveen, et al. *Kumar & Clark's Clinical Medicine*. 7th edition. 2009. ISBN 9780702029929.

References

- JASOVA, FOREJTOVA, KRYSTUFKOVA, . *Seronegative Spondyloarthritides* [lecture for subject Seronegative Spondyloarthritides, specialization Rheumatology, 1st Faculty of Medicine Charles University]. Prague. 4/5/2012.