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A case of severe knee enthesitis on MRI as an initial presentation of enteropathic arthritis



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Subclinical entheseal related changes, as detected on MR imaging, have been reported in patients with inflammatory bowel disease (IBD) without synovitis¹ despite immunosuppressive treatment.² Importantly, enthesitis is thought to represent the earliest pathological process in the development of inflammatory joint disease in patients with IBD.

A 49-year-old man with Crohns disease, treated with topical pentasa, presented with a flare of his IBD and was prescribed high dose oral steroid therapy. As his steroid treatment was weaned, he developed painful, stiff knee joints (more marked on the right), without swelling. He was tender to palpation over the tendon insertion sites of his right knee,

with good ROM. His inflammatory markers were markedly elevated (CRP 206). Radiograph of his (right) knee was unremarkable. MR imaging demonstrated florid enthesitis (Fig. 1a-c).

He was diagnosed with enteropathic arthritis. Subsequently, a reducing regime of high dose steroids regime was commenced, and methotrexate was introduced. Six weeks after treatment, there was a marked improvement in his symptoms as well as the radiographic appearance (Fig. 1d-f).

Current data support the view that enthesitis in spondy-loarthropathy is a primary phenomenon, and other joint manifestations (e.g. synovitis) are secondary.² If that is the

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Fig. 1 – MRI of his knee (a-c) demonstrates florid bone oedema at the joint margins relating to knee joint capsular attachments without significant joint effusion. Severe enthesopathy is present at the semi-membranous attachment to posterior tibia. Repeat MRI scan (d-f) demonstrated significant improvement since the previous scan. The bone oedema has essentially resolved with a marked improvement in the soft tissue oedema at capsular/tendon attachment sites.

case, then MR imaging has a valuable role in the early detection of enthesitis. Future research is warranted to establish whether early intervention strategies in patients with enthesitis can overt the development of future enteropathic arthritis.

Conflicts of interest

The authors have none to declare.

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