

Recommendations on Imaging of the Joints in Rheumatoid Arthritis

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The European League Against Rheumatism (EULAR) has published [evidence-based recommendations](#) on the use of imaging of the joints in the clinical management of rheumatoid arthritis (RA).

The task force of experts included rheumatologists, radiologists, methodologists and experienced rheumatology practitioners from 13 countries. Thirteen key questions on the role of imaging in RA were generated. Imaging modalities included were conventional radiography, ultrasound, MRI, CT, dual-emission x-ray absorptiometry, digital x-ray radiogrammetry, scintigraphy and positron emission tomography.

Ten recommendations have been produced covering the role of imaging in making a diagnosis of RA, detecting inflammation and damage, predicting outcome and response to treatment, monitoring disease activity, progression and remission. The strength of recommendation for each proposition varied according to both the research evidence and expert opinion.

The group acknowledges that research is needed to optimise the use of imaging tools in routine clinical practice, in particular which joints should be used for disease assessment and monitoring and consideration of the feasibility, costs and appropriate training required to use ultrasound and MRI in clinical practice. In view of a lack of literature at the time of the review, the recommendations have not focused on detecting joint space narrowing, which is important to consider in view of the impact on functional status.

Reference

"EULAR recommendations for the use of imaging of the joints in the clinical management of rheumatoid arthritis". Alexandra N Colebatch, Christopher John Edwards, Mikkel Østergaard, Désirée van der Heijde, Peter V Balint, Maria-Antonietta D'Agostino, Kristina Forslind, Walter Grassi, Espen A Haavardsholm, Glenn Haugeberg, Anne-Grethe Jurik, Robert BM Landewé, Esperanza Naredo, Philip J O'Connor, Ben Ostendorf, Kristina Potočki, Wolfgang A Schmidt, Josef S Smolen, Sekib Sokolovic, Iain Watt, Philip G Conaghan
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