

Aspiring to Excellence: Quality Improvement in Axial Spondyloarthritis at University Hospital Southampton

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BACKGROUND

Axial spondyloarthritis (axSpA) can be associated with a delay to diagnosis. Anecdotal evidence at UHS suggested that patients were referred via different pathways and that some were not having the correct MRI protocol for diagnosis.

OBJECTIVES

Aim 1: Reduce time from presentation of AS in primary care to rheumatology referral

Aim 2: Reduce variation in use of imaging to diagnose axSpA

METHODS

Aim 1

- Map referral pathways
- Audit referral time
- Survey GPs
- Explore patient perspectives:

"Felt embarrassed explaining why I thought I might have AS"

"No-one ever believed me"

"You don't look like someone who has AS"

"I'm young, I'll get over it"

"...because I was young and a woman"

ACTIONS

- New e-referral service developed, linked to axSpA clinic. Includes GP educational materials: live May 2021

Aim 2

- Identify how patients are currently imaged

ACTIONS

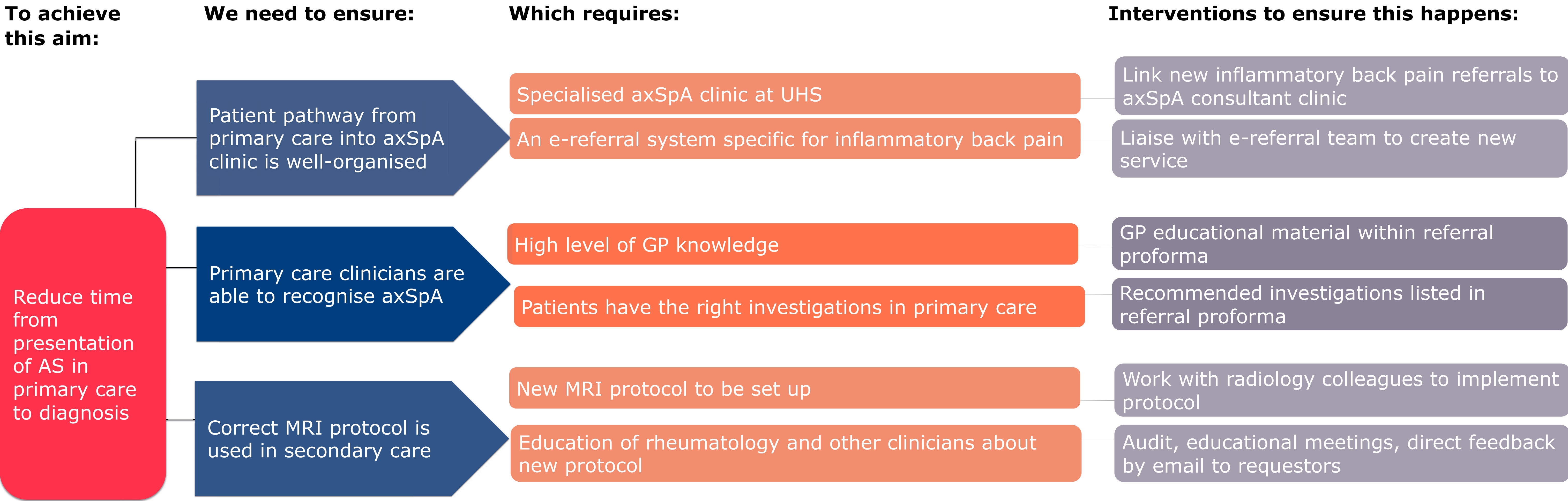
- Introduced new MRI protocol: live June 2021
- Education provided re new protocol
- Ongoing monthly audit with feedback to requestors
- Amended junior doctor induction document



RESULTS

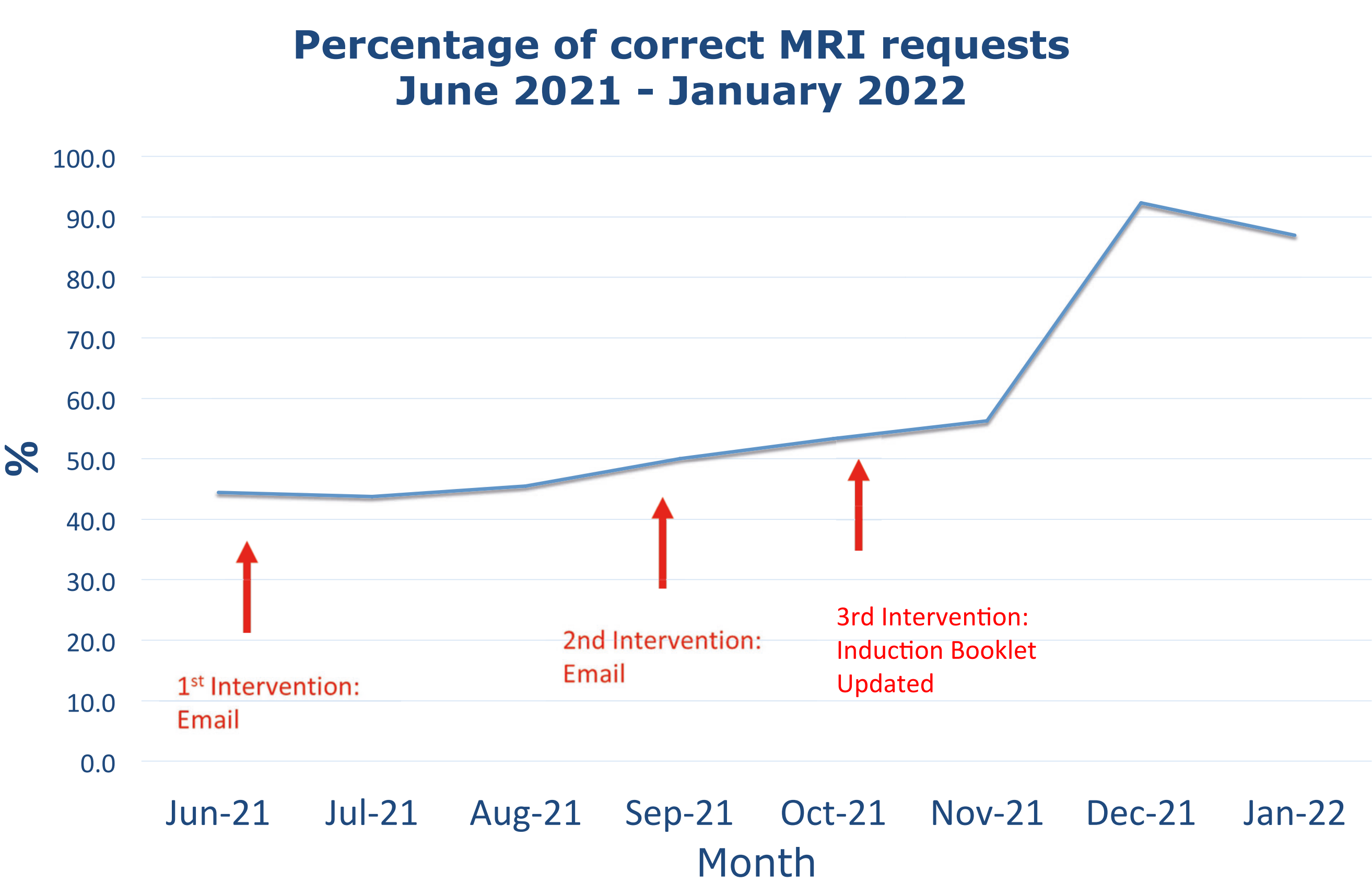
- Baseline audit: median referral time 1-2y; range 0-14y
- From Jun to Dec 2021, 13 patients were referred via the new axSpA service
- 12/13 referrals were for suspected axSpA
- Of these, 7/13 were new referrals; 6/13 were known to have AS requiring a new appointment at UHS
- 6/7 new patients had CRP and 3/7 had pelvis x-ray in primary care

DRIVER DIAGRAM



CONCLUSION

- New e-referral system is being used successfully with patients now booked to specialist clinic
- New MRI protocol has reduced resource use in radiology with a high proportion of patients now having correct scan
- Further investigation is required (1) to find out if delay to diagnosis is improving (2) to obtain qualitative feedback from GPs about referral system and GP educational needs



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