

# Improving Our Axial SpA Service Part I

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**Axial SpA works silently. We don't.**

## BACKGROUND

We were delighted to join NASS Aspiring to Excellence to kick start improvements in our axial SpA service in 2023.

Since 2021 referral options into Rheumatology have increased within Manchester due to service changes in Primary Care. The use of First Contact clinicians and physician associates alongside an expansion of the MSK interface service increased routes into the secondary care rheumatology service.

Before starting the A2E program there was no defined pathway for initial diagnostics or treatment of patients with suspected axial SpA.

The initial assessment of new patients involved a single clinician review within a general rheumatology clinic by either a rheumatologist or dedicated rheumatology ACP physiotherapist.

## OBJECTIVES

- To assess our WTWA Axial SPA service referral pathway and time to treatment
- Develop efficient referral pathways into secondary care rheumatology.
- Put in place sequential change interventions to reduce time to treatment and/or diagnosis.

## METHOD

Patients who attended Rheumatology outpatients for 2 weeks in May with a diagnosis of axial spondylarthritis were included. We collected data on referral method, time from referral to review in Rheumatology and time to treatment (physio and drug treatment).

## RESULTS

8 patients with axial spondyloarthritis attended our outpatient clinic during the data collection window.

### Referral pathway

0/8 patients were referred using a suspected inflammatory back pain pathway or with any reference to specific criteria

### Diagnosis

The delay from symptom onset to diagnosis ranged from 18 months to 12 years with an average of 5.2 years.

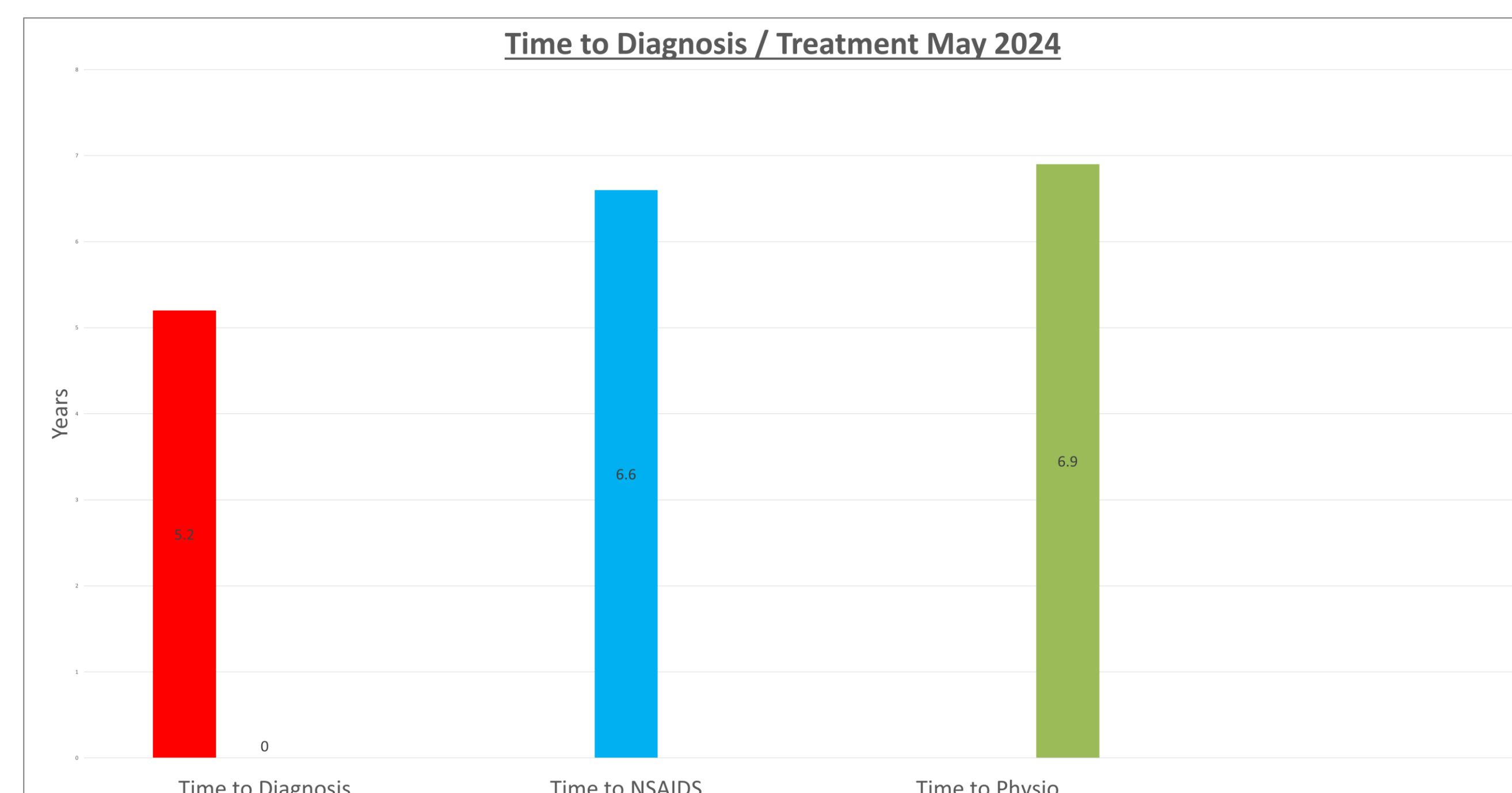
Of note the majority of this delay was due to delayed Rheumatology referral (average 4 years delay from GP review with back pain to Rheumatology review).

### Treatment

0/8 patients were provided with written information on axial SpA on diagnosis

The delay from symptom onset to physiotherapy treatment ranged from 11 months to 14 years with an average of 6.9 years.

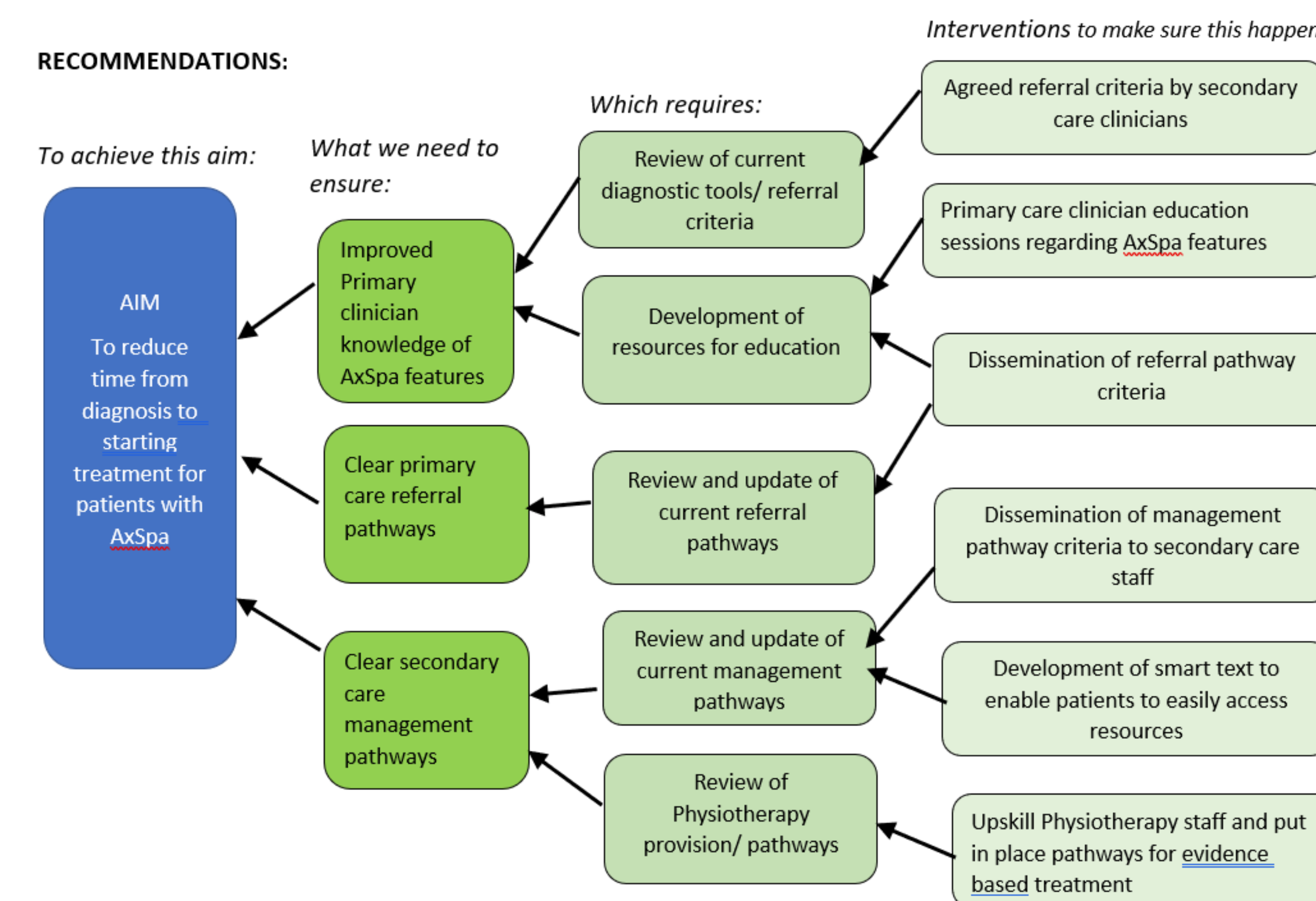
The delay from symptom onset to drug (NSAID ) treatment ranged from 2.5 to 13 years with an average of 6.6 years.



## CHANGES IMPLEMENTED

- Referral pathway agreed internally and shared with primary care colleagues
- Internal pathway for diagnosis and management of axial SpA updated and disseminated to colleagues via on-line training.
- Smart text designed to provide easy access to both Versus arthritis information leaflets and NASS resources

### RECOMMENDATIONS:



## CONCLUSION

We have baseline data which confirms that we are not meeting the desired target of 12 months between symptom onset and treatment.

We will now implement the suggested changes above and measure the effect on the patient journey.... Time to see how they work!

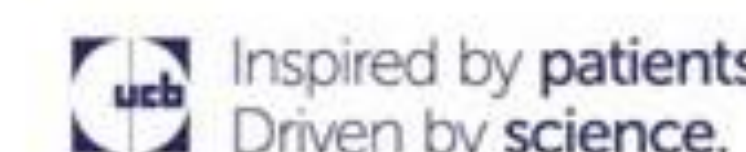


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Driving improvements in axial SpA care