Evaluating Compliance with an AAU Investigative Protocol in ARC

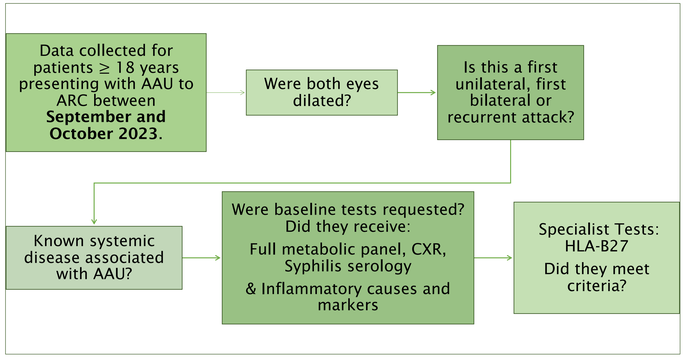
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Background

Anterior uveitis presents with an annual incidence of 12/100,000 population (1). It is the most frequent extra-articular manifestation in spondyloarthropathies (SpA), with up to 40% of patients being shown to have an underlying undiagnosed spondylarthritis (2). Delayed diagnosis of patients with underlying SpA has been proven to reduce quality of life, and recurrent attacks of AAU can decrease this even further (3). There is no universally agreed investigative protocol for patients presenting with AAU. An investigative protocol was created and implemented by the Uveitis lead in the emergency eye clinic at Royal Bolton NHS Trust. Local guidelines were developed following review of guidelines from BMEC, Bristol Eye Hospital, and AAO Focal Points about Uveitis Investigations (4). An audit of compliance has been conducted following display of the investigative protocol in all clinic rooms and results will be compared to the previous year.

Methodology



References

1. Islam N, Pavesio C. Uveitis (acute anterior). BMJ Clin Evid. 2010 Apr 8;2010:0705.
2. Rademacher J, Poddubnyy D, Pleyer U. Uveitis in spondyloarthritis. Ther Adv Musculoskelet Dis. 2020 Sep 12;12:1759720X20951733.
3. O'Rourke M, Haroon M, Alfarasy S, Ramasamy P, FitzGerald O, Murphy CC. The Effect of Anterior Uveitis and Previously Undiagnosed Spondyloarthritis: Results from the DUET Cohort. J Rheumatol. 2017 Sep;44(9):1347-1354.
4. Van Gelder RN. Diagnostic testing in uveitis. *Focal Points: Clinical Modules for Ophthalmologists*. San Francisco: American Academy of Ophthalmology; 2013, module 4.
5. Haroon M, et al, Ann Rheum Dis 2015;74:1990-1995

Results

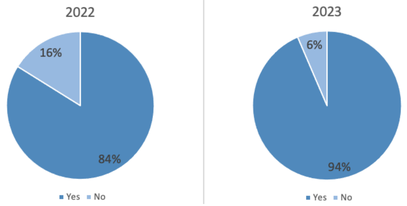
31 patients

Mean age 55.1 years

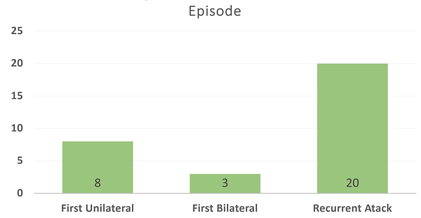
64% Caucasian
10% Afro-Caribbean
16% Asian
10% Unknown

F 58%: M 42%

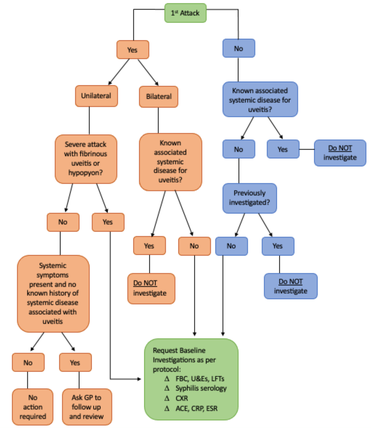
1. Were **both** eyes dilated?



2. First unilateral, first bilateral or recurrent attack?



3. Patients assessed to see if they followed the investigative protocol below displayed in clinic rooms from previous audit



4. Outcomes from audit compared to previous year

Outcomes	2022	2023
Patients who should have been investigated but did not have baseline tests requested	38.5%	9.09%
Patients who did not require further investigation but had baselines tests requested	11.1%	0%
Patients correctly managed according to protocol	77.4%	96.8%

5. Specialist Investigations: HLA-B27

Indication	Number of patients who had HLA-B27 requested
Back pain: Onset < 45 years and duration > 3 months	1
Joint pain requiring GP visit	0
Unknown	3

[Haroon M, et al][5]

Key Outcomes and Recommendations

- ✓ **94%** of patients had both eyes dilated on examination
  → Improvement from 84% the previous year
- ✓ **96.8%** of patients investigated according to the uveitis protocol
  → **90.9%** of patients who should have had baseline tests requested according to the protocol were investigated
  → No patients were inappropriately investigated further
- ✓ **75%** of patients who had HLAB27 requested did not have a clear indication documented
  → This was 60% in 2022

Recommendations

- ✓ Uveitis protocol displayed in clinic rooms updated to include indications for HLA-B27
- ✓ Emphasis that all patients need to have both eyes dilated also implemented into protocol
- ✓ Updated flowchart below has been displayed in all clinic rooms

