

## MRI workshop

- 1) Best view for the Sacroiliac joints is the semicoronal, semiaxial sections with a slice thickness of 3-4 mm.
- 2) The two most important sequences for Spondyloarthritis are
  - a) STIR: for activity; bone marrow edema, capsulitis, synovitis and
  - b) T1 weighted imaging for chronicity ; fat metaplasia, erosions, new bone formation.
- 3) Newer cartilage sensitive sequences on MRI like VIBE/ THRIVE/ volume interpolated gradient echo etc are very sensitive for early erosive changes which might not be seen on CT.
- 4) ASAS has released latest 2024 guidelines on requesting and reporting MRI in patients with suspected Axial Spondyloarthritis.
- 5) Not all bone marrow edema is Sacroilitis! If the site or intensity seems unusual, keep high suspicion of other etiologies like malignancy and infection.
- 6) The history of recent childbirth and that of strenuous work, sports must be taken and considered while interpreting MRI

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