

Conclusion In 80% of patients with achillodynia, US examination reveals Achilles tendinopathy. In 1/3 patients with psoriasis and arthralgia but without heel pain, US detects asymptomatic Achilles tendon enthesopathy. Our results confirm the sensitivity of US in detecting Achilles tendon enthesopathy and its superiority to physical examination.

REFERENCES

1. Filippucci E, Iagnocco A, Meenagh G, *et al.* Ultrasound imaging for the rheumatologist. *Clin Exp Rheumatol* 2006; **24**: 1–5.
2. Ballint PV, Kane D, Wilson H, *et al.* Ultrasonography of enthesal insertions in the lower limb in spondyloarthropathy. *Ann Rheum Dis* 2002; **61**: 905–10.
3. D'Agostino MA, Said-Nahal R, Hacquard-Bouder U, *et al.* Assessment of peripheral enthesitis in the spondyloarthropathies by ultrasonography combined with power Doppler: a cross-sectional study. *Arthritis Rheum* 2003; **48**: 523–33.

A127 EARLY DIAGNOSTIC ACHILLES TENDINOPATHY IN PATIENTS WITH PSORIASIS AND ARTHRALGIA

R Sokolik, B Nowak, M Ponikowska, P Wiland *Department of Rheumatology and Internal Disease, Wrocław University Hospital, Wrocław, Poland*

10.1136/ard.2010.129643d

Background Psoriatic arthritis belongs to a group of spondyloarthropathies that are characterised by, among other things, enthesopathy. The most typical enthesitis is heel pain related to inflammation of the Achilles tendon or the plantar fascia insertion. Musculoskeletal ultrasonography is a useful tool for evaluating joint and soft tissue pathology and it can be used to visualise enthesopathy.^{1,2,3}

Objectives The aim of the study was to assess the frequency of occurrence of Achilles tendinopathy in patients with psoriasis and arthralgia.

Methods 33 patients (16 women) aged 27–72 years (mean age 49.2±11.3 years) with psoriasis (mean disease duration 20.8±12.9 years) and arthralgia were enrolled in the study. In 27 (82%) patients the diagnosis of psoriatic arthritis (mean disease duration 7.6±7.1 years) had already been established. Ultrasound (US) examination of the Achilles tendon and painful joints was performed. All examinations were carried out using a high frequency linear transducer (7–12 MHz, Logiq 5, General Electric). Power Doppler sonography set for high sensitivity was used to detect synovium or tendon hyperaemia.

Results Only five (15%) patients in our group complained of achillodynia. In one of them (20%) no pathological changes in the Achilles tendon were detected. In the remaining four patients we detected enthesopathy. In 28 patients without achillodynia, US examination of the Achilles tendon region showed Achilles tendon oedema in 8 (29%) patients, insertion hyperaemia in 10 (36%), erosions in 6 (21%), enthesophytes in 9 (32%) and bursitis in 8 (29%). During US examination of painful joints in 20 (61%) out of 33 patients, we detected effusion of at least one joint.