Fig. 1 Atlantoaxial subluxation with a separation of 9 mm.

The patient was initially treated by skull traction, with some reduction of the subluxation. Two weeks later he underwent atlantoaxial fusion with interlaminar wiring. Clinical improvement was gradual, but by three months there was sound fusion and a full neurological recovery except for minor ankle clonus.

The exact pathology of atlantoaxial subluxation in psoriatic arthropathy is uncertain, but it is likely that an inflammatory arthritis with soft tissue involvement and synovial proliferation in the synovial joints around the odontoid peg results in degeneration of the adjacent transverse ligament. It is not certain whether pannus plays any part in the compression, as occurs in rheumatoid arthritis.

In conclusion, this report confirms an association, albeit uncommon, of atlantoaxial subluxation with psoriatic arthropathy, and emphasises the potentially dangerous nature of this complication.

Westminster Hospital,
Dean Ryle Street,
London SW1P 2AP

C T PEASE
J L POZO

Royal National Orthopaedic Hospital, E J P CRAWFORD
Brockley Hill,
Stanmore,
Middlesex HA7 4LP

HLA-B27 in Turkish patients with rheumatoid arthritis

SIR, Isomäki *et al* initially reported an increased prevalence of HLA-B27 in rheumatoid arthritis (RA) in Finland.¹ Later, two studies from Turkey pointed out that this was also true for Turkish patients, but with a lower prevalence of B27 both among the patients and the healthy population.^{2,3}

In the study from our laboratory, of 50 consecutive, seropositive (by latex agglutination) patients with RA, the prevalence of HLA-B27 was 7/50 (14%), whereas the prevalence of the same allele was 8/268 (3%) among healthy controls ($\chi^2=9.06$, $p<0.01$).³ The prevalence of the only other allele investigated in this study, HLA-B5, was 30% among the patients and 33% among controls.

Recently we had the opportunity to reassess our findings. Thirty two Turkish patients with definite or classical RA⁴ were HLA typed in Leiden, Holland as part of a study with Dr J D Perry of London, to compare the severity of disease in English and Turkish patients.

The prevalence of HLA-B27 was 6/32 (19%) among patients and 3/50 (6%) among controls, confirming our earlier observation. This approached the conventional significance level if it is accepted that the corrected p value is not used if a significant association has previously been shown⁵ ($RR=3.22$, $\chi^2=3.06$, $p=0.076$). The prevalence of DR4 was 14/32 (44%) among patients, whereas it was 11/50 (22%) among controls ($RR=2.69$, $\chi^2=4.11$, $p=0.035$).

The Ural-Altaic hypothesis⁶ claims that there are linguistic ties between the Turks and the Finns.⁵ The association of RA with HLA-B27 may be another link supporting this hypothesis.

Division of Rheumatology,
Department of Medicine,
Cerrahpaşa Medical Faculty,
University of Istanbul
and

HASAN YAZICI
IEKE SCHREUDER
SEBAHATTIN YURDAKUL
FATMA ÖZBAKIR

Department of Immunohematology,
University Hospital,
Leiden,
The Netherlands

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