ASAS Components

Assessment of disease activity (signs and symptoms) in ankylosing spondylitis (AS)

ASAS=Assessment of SpondyloArthritis International Society.
Identifying the Components of ASAS

ASAS response criteria consist of 4 domains that are of importance in assessing the improvement in signs and symptoms of patients with AS. These measures focus on AS disease activity, physical function, total spinal pain, and spinal stiffness/inflammation.

**ASAS20** indicates a ≥20% improvement in 3 of the 4 below domains and no worsening of 20% in the remaining domain.

**ASAS40** indicates a ≥40% improvement in 3 of the 4 below domains and no worsening of 20% in the remaining domain.

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**BASFI (Bath Ankylosing Spondylitis Functional Index)**

10-item questionnaire that uses a numeric response scale (0 to 10) or visual analog scale (0 to 10 cm) with descriptive anchors, where 0=easy and 10=impossible, to measure ability to perform a variety of everyday tasks.

The first 8 questions considered activities related to functional anatomy such as putting on socks, bending forward to pick up something, reaching for a high shelf without help, or getting up off the floor. The final 2 questions assessed the subject’s ability to cope with everyday life such as doing physically demanding activities (exercise) and doing a full day of activities from either home or work.

**Patient Global Assessment of Disease Activity**

0 to 10 visual analog scale or numerical rating scale measuring patient perception of disease activity from not active to very active.

**Total Spinal Pain**

Visual analog scale where 0=no symptoms and 10=severe symptoms.

**Inflammation (Morning Stiffness)**

The mean of 2 patient-reported self-assessments in BASDAI measuring:

- Severity of morning stiffness (0-10 numeric response)
- Duration of morning stiffness (0-2+ hours time scale)
Other Measures of AS Disease Activity

**BASDAI**
(Bath Ankylosing Spondylitis Disease Activity Index)

6 numeric response scales (0-10) with descriptive anchors, where 0=none and 10=very severe. The last question is anchored by a 0-2+ hours time scale. See questions below (all related to the past week):

- How would you describe the overall level of fatigue/tiredness you have experienced?
- How would you describe the overall level of AS neck, back, or hip pain you have had?
- How would you describe the overall level of pain/swelling in joints other than neck, back, hips you have had?
- How would you describe the overall level of discomfort you have had from any areas tender to touch or pressure?
- How would you describe the overall level of morning stiffness you have had from the time you wake up?
- How long does your morning stiffness last from the time you wake up?

**BASMI**
(Bath Ankylosing Spondylitis Metrology Index)

5 clinical assessments of spinal mobility comprise the BASMI linear score:

- Lateral spinal flexion
- Tragus-to-wall distance
- Lumbar side flexion (modified Schöber test)
- Intermalleolar distance
- Cervical rotation

**hs-CRP**
(High-Sensitivity C-Reactive Protein)

This laboratory blood test identifies the presence of inflammation and may be used to determine its severity and to monitor treatment response.
Other Measures of AS Disease Activity

ASQoL²,⁵
(Ankylosing Spondylitis Quality of Life)

18 “yes/no” questions measure the impact of AS on health-related quality of life from the patient’s perspective:

- My condition limits the places I can go
- I sometimes feel like crying
- I have difficulty dressing
- I struggle to do jobs around the house
- It’s impossible to sleep
- I am unable to join in activities with my friends/family
- I am tired all the time
- I have to keep stopping what I am doing to rest
- I have unbearable pain
- It takes a long time to get going in the morning
- I am unable to do jobs around the house
- I get tired easily
- I often get frustrated
- The pain is always there
- I feel I miss out on a lot
- I find it difficult to wash my hair
- My condition gets me down
- I worry about letting people down