BOMBAY SPINE CLINIC

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Sacroiliitis Overview - Bombay Spine Clinic

- Sacroiliitis

What Is It?

- Sacroiliitis refers to inflammation of one or both sacroiliac (SI) joints, which connect the lower spine (sacrum) to the pelvis. These joints play an important role in transferring body weight between the spine and lower limbs.
- Inflammation of the sacroiliac joints can cause pain in the lower back, buttocks and hips, often mimicking a slip disc or sciatica. Sacroiliitis may occur as an isolated condition or as part of inflammatory disorders such as Ankylosing Spondylitis.
- Accurate diagnosis is important because treatment differs significantly from that of mechanical back pain.
- Common Symptoms
- Patients may experience:
- Pain Symptoms
- Pain in the lower back
- Pain in one or both buttocks
- Hip region pain
- Pain radiating to the groin
- Pain radiating to the upper thigh
- Characteristic Features
- Pain while standing for prolonged periods
- Pain when climbing stairs
- Pain while getting up from a chair
- Morning stiffness
- Pain that worsens after prolonged sitting
- Difficulty turning in bed
- Inflammatory Symptoms
- In some patients:
- Pain improves with activity
- Pain worsens with rest
- Night pain
- Prolonged morning stiffness

Causes & Risk Factors

- Inflammatory Disorders
- The most common inflammatory causes include:
- Ankylosing Spondylitis
- Axial Spondyloarthritis
- Psoriatic Arthritis
- Reactive Arthritis
- Degenerative Changes
- Age-related wear and tear of the SI joints may cause pain and inflammation.
- Pregnancy
- Hormonal changes and increased stress on the pelvis may contribute to sacroiliac joint dysfunction.
- Trauma
- Falls, accidents or repetitive stress may affect the SI joints.
- Infection
- Rarely, infections may involve the sacroiliac joint.
- Risk factors include:
- Family history of inflammatory arthritis
- HLA-B27 positivity
- Previous pelvic trauma
- Pregnancy
- Autoimmune diseases
- When Should You Seek Medical Advice?
- Medical evaluation is recommended if:
- Persistent buttock pain develops
- Lower back pain does not improve with routine treatment
- Morning stiffness lasts longer than 30 minutes
- Pain wakes you from sleep

Symptoms improve with exercise but worsen with rest

- Pain affects daily activities
- Seek Prompt Medical Attention If:
- Fever accompanies back pain
- Severe pain develops suddenly
- Progressive weakness occurs
- Walking becomes difficult
- Significant neurological symptoms develop
- How Is It Diagnosed?
- Clinical Examination

- A detailed examination includes:
- Assessment of sacroiliac joint tenderness
- Provocative SI joint tests
- Evaluation of spinal mobility
- Assessment for inflammatory disease
- X-Ray
- May demonstrate:
- Sacroiliac joint narrowing
- Joint irregularity
- Erosions
- Fusion in advanced disease
- MRI
- MRI is often the most useful investigation.
- It can detect:
- Early inflammation
- Bone marrow edema
- Active sacroiliitis
- Associated spinal inflammation
- MRI is particularly valuable in early Ankylosing Spondylitis.
- CT Scan
- May provide detailed assessment of joint structure and chronic changes.
- Blood Tests
- May include:
- ESR
- CRP
- HLA-B27
- Infection markers
- These tests help identify inflammatory and infectious causes.

Treatment Options

- Non-Surgical Treatment

Treatment depends on the underlying cause.

- Management may include:
- Physiotherapy
- Stretching exercises
- Core strengthening

- Postural training
- Activity modification
- Anti-inflammatory medications
- Disease-modifying medications
- Biologic therapies (in selected inflammatory conditions)

Treatment of the underlying disease is often essential for long-term symptom control.

- Surgical Treatment
- Surgery is rarely required.
- It may be considered when:
- Severe chronic pain persists
- Significant joint dysfunction occurs
- Conservative treatment fails
- Selected patients may be candidates for:
- Sacroiliac Joint Fusion
- This is typically reserved for carefully selected cases.

Frequently Asked Questions

- 1. What is Sacroiliitis?
- Sacroiliitis is inflammation of the sacroiliac joints that connect the spine to the pelvis.
- 2. Can Sacroiliitis cause buttock pain?
- Yes. Buttock pain is one of the most common symptoms.
- 3. Is Sacroiliitis the same as Sciatica?
- No. Although symptoms may overlap, the underlying causes are different.
- 4. Can Sacroiliitis cause hip pain?
- Yes. Many patients experience pain around the buttock, hip and groin region.
- 5. Is Sacroiliitis related to Ankylosing Spondylitis?
- Yes. Sacroiliitis is often one of the earliest manifestations of Ankylosing Spondylitis.
- 6. Is MRI necessary?
- MRI is often extremely useful because it can detect inflammation before changes appear on X-rays.
- 7. Can physiotherapy help?
- Yes. Physiotherapy is an important component of treatment.
- 8. Does every patient need surgery?
- No. Most patients improve with non-surgical treatment.
- 9. Can pregnancy cause Sacroiliac Joint pain?
- Yes. Pregnancy-related hormonal and biomechanical changes may affect the SI joints.
- 10. When should I suspect Sacroiliitis?

- Persistent buttock pain, morning stiffness and pain that improves with exercise should raise suspicion.
- Related Conditions
- Ankylosing Spondylitis
- Mechanical Low Back Pain (Lumbago)
- Sciatica
- Spondylolisthesis
- Osteoporosis
- Spinal Infection
- When Should You Consult a Spine Specialist?
- If you experience persistent buttock pain, inflammatory back pain, prolonged morning stiffness or symptoms suggestive of sacroiliac joint disease, early evaluation is recommended.
- Timely diagnosis can help identify underlying inflammatory conditions and guide appropriate treatment before long-term joint damage occurs.
- Need Expert Advice?
- Book a consultation with Dr. Siddharth Katkade or upload your MRI, X-rays or reports for review through our Patient Resource Centre.

> **Need Clinical Evaluation or Second Opinion?**
> This educational document was prepared by **Dr. Siddharth Katkade**. For appointments or to share MRI scan reports for clinical review, call **+91 88507 73095** or consult at Byculla (E) / Khar (W) clinics.
