Radiological diagnosis of SAPHO syndrome- A case report

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SAPHO syndrome, which includes synovitis, acne, pustulosis, hyperostosis, and osteitis, is an uncommon chronic inflammatory disorder affecting bones, joints, and skin. We report a case of a 31-year-old woman with a prolonged history of left clavicular pain without any associated skin changes. 31 years old female presented with chronic pain in the left clavicle for 3-4 years, with no relief from physical therapy. A CT scan revealed sclerosis in the medial head of the left clavicle, while an MRI showed inflammation and sclerosis of the sternoclavicular joint. A bone scan indicated symmetrically increased activity in both sternoclavicular joints and negative HLA-B27 test. The patient had a history of well-controlled acne, which later recurred on her back. Initially, NSAIDs provided pain relief but were discontinued due to NSAID-induced colitis. Treatment with methotrexate was also halted due to side effects. Subsequently, the patient was started on weekly Etanercept, which led to clinical improvement. While NSAIDs and intra-articular injections are initial options for symptom relief, Etanercept has proven highly effective in cases of treatment-resistant SAPHO syndrome. Early diagnosis and treatment of SAPHO syndrome can significantly enhance the patient's quality of life. Radiological imaging is valuable in diagnosing SAPHO in the absence of dermatological symptoms and can help avoid unnecessary tests.

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