

MODIFIED STEINBROCKER SCORING METHOD FOR PSA

At the PsA Clinic at the University of Toronto, the focus has been on longitudinal observation of patients with PsA in an attempt to describe the clinical course and prognosis of the disease. Radiological progression in the peripheral joints of these patients is assessed by a modification of the Steinbrocker technique. The original Steinbrocker classification scored a patient according to their worst joint, but the modified technique scores each joint on a 0–4 scale where:

- 0 is normal
- 1 reflects juxta-articular osteopenia or soft tissue swelling
- 2 is the presence of erosion
- 3 is presence of erosion and joint space narrowing
- 4 is total joint destruction, either lysis or ankylosis.

In this method, the Toronto group led by Gladman score all the joints of the hands (with the wrist considered one joint), all metatarsophalangeal joints (MTPs), and the interphalangeal joint (IP) of the big toe. This includes a total of 28 joints in the hands and 12 joints in the feet, thus 40 joints altogether. The maximum score possible is 160, if all joints had a score of 4.