

BASMI

Bath Ankylosing Spondylitis Metrology Index, a combined index to assess the spinal mobility in patients with ankylosing spondylitis *)



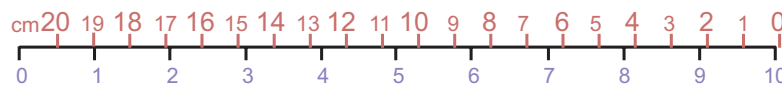
Ankylosing Spondylitis International Federation

Name: _____

Date: _____

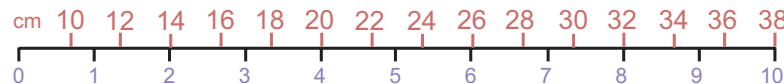
Mark measurements result in red scales.
Mark mean of left and right where requested.
Read score from blue scales.

- 1 Lateral spinal flexion:** Patient standing with heels and buttocks touching the wall, knees straight, shoulders back, outer edges of feet 30 cm apart, feet parallel. Measure minimal fingertip-to-floor distance in full lateral flexion without flexion, extension or rotation of the trunk or bending the knees.



Mean of right/left

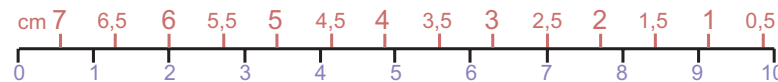
- 2 Tragus-to-wall distance:** Maintain same starting position as above. Ensure head in as neutral position (anatomical alignment) as possible, chin drawn in as far as possible. Measure distance between tragus of the ear and wall on both sides, using a rigid ruler. Ensure no cervical extension, rotation, flexion or side flexion occurs.



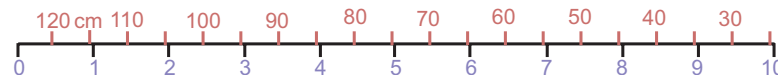
Mean of right/left

- 3 Lumbar flexion (modified Schober):** With the patient standing upright, place a mark at the lumbosacral junction (at the level of the dimples of Venus on both sides). Further marks are placed 5 cm below and 10 cm above ¹. Measure the distraction of these two marks when the patient bends forward as far as possible, keeping the knees straight.

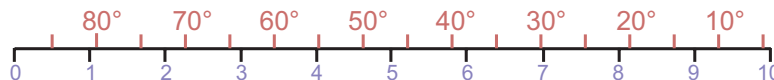
¹) Among the "modified Schober"s published in the literature, the modification recommended by Macrae and Wright is used.



- 4 Maximal intermalleolar distance:** Patient supine on the floor or a wide plinth, with the knees straight and the feet pointing straight up. Patient is asked to separate legs along the resting surface as far as possible. Distance between medial malleoli is measured.



- 5 Cervical rotation:** Patient supine on plinth, head in neutral position, forehead horizontal (if necessary head on pillow or foam block to allow this, must be documented for future reassessments). Gravity goniometer placed centrally on the forehead. Patient rotates head as far as possible, keeping shoulders still, ensure no neck flexion or side flexion occurs.



Mean of right/left

BASMI:
(Average of 5 scores)

***) Remark:**

In the literature (Jenkinson et al: J Rheumatol 1994;21:1694–1698 and Jones et al: J Rheumatol 1995;22:1609) two different BASMI definitionen have been published with which the same measurement results lead to different BASMI values. The above is based on the definition of 1995 with scores 0 to 10 for each component.

Whereas in the publications quoted the analogous measurement results are converted into scores with the help of tables which allow only whole-numbered BASMI values or even-numbered decimals, respectively, the scales shown here allow a conversion into analogous BASMI values (van der Heijde D, Landewé R, Feldtkeller E: J Rheumatol 2005;76Suppl:S635).