



Reply to the letter to the editor: Dynamic contrast-enhanced MRI could assess the local disease activity of enthesitis and dactylitis in patients with spondyloarthritis

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We thank Dr. Mori and colleague [1] for their thoughtful comments about our paper [2] on MRI in early-onset spondyloarthritis finger dactylitis and we appreciate the opportunity to further clarify our findings.

The main question raised by the authors of the letter to the editor is related to the position of the region of interest (ROI) in order to obtain the time-signal enhancement curve for enthesitis which is considered controversial. They reported that an important contrast enhancement (CE) is observed at the level of the insertion of the flexor tendon of the distal phalanx. However, we defined enthesitis as the time-signal enhancement curve obtained from the ROI placed in the spongy bone, where a low CE is observed. Obviously, this difference in placing ROIs gives distinct results. In our opinion, both ROI placements can be considered since they

demonstrated the inflammation at different sites. In our study, we found no signs of enthesitis in most but not in all dactylitis fingers evaluated. The enhancement was much more evident in the flexor synovial sheaths in comparison with that of the capsular insertion site and at the insertion of the flexor and extensor tendons. This was more evident in high resolution images as compared to dynamic CE sequence, to avoid partial volume effect, but not represented in the images shown.

In addition, the authors suggest that the dynamic-contrast enhanced MRI may have additional value in the assessment of dactylitis disease activity. In a clinical practice setting, however, we believe that clinical examination and ultrasound are sufficient in diagnosing and assessing the activity of dactylitis [3].

In conclusion, once again, we would like to thank the authors of the letter to the editor for their comments and we believe that our pilot study will stimulate future research and investigations in this important area.

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