

## Gold threads around the sacroiliac joints: traces of attempts to relieve pain in a case of advanced ankylosing spondylitis

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A 47-year-old male presented to our rheumatology clinic with complaints of exaggerated thoracic kyphosis and limited range of back motion. In his early 20s, he visited a rheumatology clinic because of hip pain and lower back stiffness and was diagnosed to have ankylosing spondylitis. Plain radiographs identified grade II sacroillitis and elevated C-reactive protein levels and human leukocyte antigen B27 positivity were also detected. At that time, he was prescribed anti-inflammatory drugs but he refused to take the medicine as he experienced gastrointestinal disturbance

and eventually lost to follow-up. Upon his initial presentation to our clinic, radiography revealed numerous gold threads around his sacroiliac (SI) joints (Fig. 1), and it was speculated that the patient had experienced serious SI joint pain. In our clinic, we performed the screening and prophylaxis prior to initiating anti-tumor necrosis factor (TNF)- $\alpha$  treatment and prescribed the anti-TNF inhibitor. The patient reported a substantial diminishment in pain and is currently on a regular follow-up schedule.

Acupuncture is a procedure of inserting

A



**Figure 1.** This plain radiograph of the sacroiliac joints (A, right; B, left) shows numerous linear radiopaque materials, which correspond to gold threads implanted by acupuncture therapy. Subchondral sclerosis, erosion, and joint space narrowing are present in both sacroiliac joints.

Received: May 11, 2022 Revised: May 24, 2022 Accepted: May 25, 2022

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needles into the specific acupoints in the body and manipulating them for the purpose of analgesia. Gold threads acupuncture has been performed using specially designed needles for implantation of multiple small pieces of gold threads in anticipation of their acting as stimulants to relieve pain. However, the therapeutic potential of acupuncture in inflammation is still controversial, and numerous adverse reactions has been reported including foreign body granuloma formation, mycobacterial infection, cutaneous tuberculosis and panniculitis.

Ankylosing spondylitis is a chronic immune-mediated in-

flammatory disorder that causes severe pain and disability of axial skeleton predominantly. The well-established treatments including non-steroidal anti-inflammatory drugs and biologic therapy provide pain relief and impede radiographic progression.

This study was approved by the Jeonbuk National University Hospital Ethics Committee (CUH202111014-HE001).

## Conflict of interest

No potential conflict of interest relevant to this article was reported.

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