REITER'S DISEASE (SYNDROME) **MEDICAL APPENDIX**

DEFINITION

1. **Reiter's disease** has been traditionally considered to be a disorder comprising a classical triad of urethritis, arthritis and conjunctivitis. However, conjunctivitis occurs in only some 40% of cases and the condition has been defined as "an episode of arthropathy within one month of urethritis or cervicitis".

CLINICAL MANIFESTATIONS

2. The condition usually presents as a combination of -

    2.1. urethritis

    2.2. arthropathy

    2.3. conjunctivitis

    2.4. skin lesions - ulceration and/or hyperkeratosis

3. It is seldom that all four components are identified in the individual case, a mild urethritis or eye inflammation being ignored or forgotten by the patient.

4. Some 20% of patients develop a sacro-iliitis and ascending spinal disease.

5. Cardiac complications such as aortitis or aortic incompetence may be a late occurrence.

6. Once considered to be a self-limiting condition, Reiter's syndrome is now known to be a more or less persistent disease in many patients.

AETIOLOGY

7. No specific cause has been identified but there is a strong relationship, in young children especially, with a dysenteric infection.

8. In many cases, it is debatable whether the urethritis is a precipitating factor or an integral manifestation of the syndrome.

9. It is generally accepted that the condition arises as a result of a specific genetic background (HLA-B27) being reacted upon by an environmental event which is usually an infection of the bowel or of the urethra.

CONCLUSION

10. **Reiter's disease** (or syndrome) is a condition in which the main component is an arthropathy. The cause is unknown but the condition is though to be the result of interaction between a genetic susceptibility and an environmental trigger.

REFERENCES

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