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HLA-B27 and Arthritis

Understanding Your Test Result



What is HLA-B27?

- HLA-B27 is a gene that helps your immune system tell “self” from “non-self.”
- It is common, up to 8% of people in the U.S. carry it (higher in some ethnic groups).
- Most people with HLA-B27 never develop arthritis or autoimmune disease.

When is HLA-B27 Important?

HLA-B27 is seen in a family of autoimmune disease that can cause joint and back inflammation including:

- Ankylosing spondylitis
- Psoriatic arthritis
- Reactive arthritis
- Inflammatory bowel disease-related arthritis

Positive HLA-B27 Does Not = Diagnosis

- A blood test alone cannot confirm arthritis.
- Many people with HLA-B27 are healthy.
- Symptoms and exam findings matter most.

If You Test Positive

No symptoms?

- No treatment or routine follow-up needed. Just watch for new symptoms.

Symptoms present?

- See a rheumatologist for full evaluation.

Already diagnosed?

- HLA-B27 can help guide diagnosis, prognosis, and treatment.





Signs of Inflammatory Back Pain

(When to get checked by a rheumatologist)

- Starts before age 45
- Worse in the morning, improves with movement
- Morning stiffness > 30 minutes
- Pain that wakes you up in the second half of the night
- Improves quickly with NSAIDs (i.e., ibuprofen)
- Family history of autoimmune disease



Possible Non-Joint Symptoms to Watch For

- Eye inflammation (uveitis): red, painful, light-sensitive eye
- Inflammatory bowel symptoms: diarrhea, abdominal pain, blood in stool
- Heel pain from enthesitis (inflammation where tendons attach to bone)

When to Call Your Doctor

- New or persistent back pain lasting >3 months in someone under 45
- Sudden red, painful eye with vision changes
- Ongoing diarrhea or abdominal pain
- Joint swelling or stiffness that doesn't improve with rest

The Bottom Line



HLA-B27 is a risk factor, not a guarantee.

HLA-B27 is just one piece of the puzzle. A positive test does not mean you are sick; and if you do develop symptoms, early diagnosis and treatment can make a big difference.

