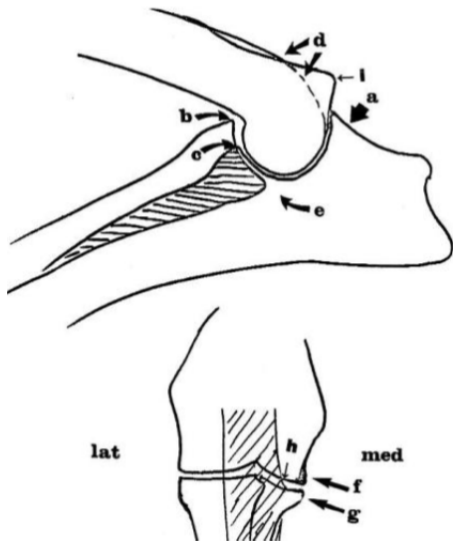


**PROCEEDINGS 29th annual meeting of the  
INTERNATIONAL ELBOW WORKING GROUP**  
May 17<sup>th</sup> 2015 - Centara Grand Hotel & Convention Center - Bangkok



Chairperson of IEWG: Prof. Dr. H.A.W. Hazewinkel

**Fig. 1 Locations for grading of elbow OA** (<http://www.vet-iewg.org/joomla>).

- a. the proximal surface of the anconeal process
- b. the cranial aspect of the radial head
- c. the cranial edge of the medial coronoid process
- d. the caudal surface of the lateral condylar ridge
- e. sclerosis of the ulnar notch, at the base of the coronoid
- f. on the medial surface of the medial epicondyle
- g. at the medial edge of the medial coronoid process
- h. indentation of the subchondral bone: OCD (-like) lesion
- (i. spur formation is an enthesophyte, not part of OA)

**Grading of Elbow Osteoarthritis (OA)**

Grading definitions:

Grade 0 OA: no signs of osteophytosis or osteosclerosis

Grade I OA: When at any of the locations listed a –h. osteophytes are present of < 2 mm, or presence of minor osteosclerosis

Grade II OA: When at any of the locations listed a-h osteophytes are present of 2-5 mm.

Grade III OA: When at any of the locations listed a-h osteophytes are present of ≥5 mm.

“Borderline OA” can be defined as increased radiographic density (sclerosis) in the ulna caudal to the trochlear notch. In addition, minimal changes at the dorsal border of the anconeal process which is considered as a normal edge and grouped under border line. This can be scored separately as ‘Borderline’ or as ‘Grade 1’.

In several countries the presence of a primary lesion such as UAP, FCP, OCD, or INC of > 2 mm, automatically results in a ED score 3; the suspicion of primary lesions results in a ED score 2.

Radiographic findings

**Elbow dysplasia scoring**

0 Normal elbow joint

1 Mild OA

2 Moderate OA or suspect for primary lesion

3 Severe OA or evident primary lesion

Normal elbow joint, i.e. no evidence of INC, sclerosis or OA or any primary cause  
osteophytes are present of < 2 mm,  
or presence of minor osteosclerosis  
osteophytes are present of 2-5 mm.  
or presence of obvious osteosclerosis  
Step of 3-5 mm between radius and ulna (suspect INC) or Indirect signs of UAP, FCP and/or OCD  
osteophytes are present of ≥5 mm.  
or step of >5 mm between radius and ulna (obvious INC) or obvious presence of UAP, FCP and/or OCD