

Southend Giant Cell Arteritis Probability Score (SGCAPS)

The SCGCAPS is a sensitive scoring tool for GCA but should be used in conjunction with clinical judgement. Add the score of all items below using the scores (0 to 3) and subtract 3 if there is a likely alternative diagnosis.

GCA Probability Score					
Clinical variable	-3	0	+1	+2	+3
DEMOGRAPHICS					
Age (years)		≤ 49	50 - 60	61 - 65	≥ 66
Sex			Male	Female	
DURATION					
Onset of symptoms		> 24 weeks	12 - 24 weeks	6 - 12 weeks	< 6 weeks
LABORATORY					
C-reactive protein (CRP) mg/L		≤ 5	6 - 10	11 - 25	≥ 25
SYMPTOMS					
Headache		Nil	Present		
Polymyalgic symptoms		Nil		Present	
Constitutional symptoms		Nil	Single		Combination
Ischaemic symptoms		Nil			Present
SIGNS					
Visual (AION, CRAO, field loss, RAPD)		Nil			Present
Temporal artery abnormality		Nil	Tenderness	Thickening	Pulse loss
Extra-cranial artery abnormality		Nil	Thickening	Bruit	Pulse loss
Cranial nerve palsy		Nil			Yes
ALTERNATIVE DIAGNOSIS LIKELY (Infection, cancer, systemic rheumatic disease, head and neck pathology)	Yes				

Score Interpretation	
< 9	Low risk Consider an alternative diagnosis.
9 - 12	Intermediate risk Discuss with the on-call rheumatologist.
> 12	High risk Discuss with the on-call rheumatologist to arrange urgent review.

Reference: Laskou F, et al. (2019). A probability score to aid the diagnosis of suspected giant cell arteritis. Clinical and Experimental Rheumatology, 37(Suppl 117), 104–108.