

SPONDYLOARTHROPATHY

Sp1 Locally Available Biologic Agents in the Treatment of Psoriatic Arthritis

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INTRODUCTION. Traditional studies on Psoriatic arthritis have evaluated the response to treatment in terms of the rheumatic condition excluding the dermatologic condition. Treatment of the disease with biologic agents have been demonstrated to be effective in the control of both the arthritis and skin condition.

OBJECTIVE. To systematically review the efficacy of locally available biologic agents (etanercept and infliximab) in the treatment of rheumatic and dermatologic manifestations of psoriatic arthritis.

SEARCH STRATEGY. A MEDLINE search (from 1966 to June 2007) was performed using the following search terms: biologic agents, infliximab, etanercept, psoriasis, psoriatic arthritis and randomized clinical trials. Likewise, the Cochrane Database was also searched for existing studies on psoriatic arthritis. This was supplemented by citation tracking of published bibliographies and conference proceedings.

SELECTION CRITERIA. All randomized clinical trials evaluating the efficacy of etanercept and infliximab in adult patients with active psoriatic arthritis were included. Outcome assessments included evaluation of both arthritic and dermatologic manifestations of the disease; Psoriatic Arthritis Response Criteria (PsARC), American College of Rheumatology (ACR) Response Criteria (20, 50, and 70) and the Psoriatic Arthritis Severity Index (PASI) 75.

MAIN RESULTS. Nine studies were identified using the search strategy previously outlined. Of these, the four main clinical trials involving 569 patients were included in the quantitative analysis. Studies publishing the results of post hoc analysis were excluded if they did not assess for joint and dermatologic efficacy.

Quantitative analysis showed that patients treated with biologic agents were more likely to experience improvement in arthritic complaints compared to placebo [PsARC RR 0.32 favoring treatment 95% CI (0.25-0.40) P<0.0001] [ACR 20 RR 0.20 favoring treatment 95%CI (0.15-0.29) P<0.00001] and were more likely to experience improvement in skin lesions [PASI 75 RR 0.06 favoring treatment 95% CI (0.03-0.13) P<0.00001]. However, adverse events tended to occur more frequently in the biologics-treated patients – mostly in the form of infusion/injection-related reactions [RR 0.82 95% CI (0.61-1.09) P 0.17]

CONCLUSION. Infliximab and Etanercept are both effective in treating psoriasis and psoriatic arthritis.

Sp2 Clinical Profile of Psoriatic Arthritis among Filipino Patients

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1. **Poster Presentation. 14th PRA Annual Convention. Cagayan de Oro. Jan 2007**
2. **Oral Presentation (International scholarship award). 16th International Rheumatology Symposium and the 51st Annual Scientific Meeting of the Japan College of Rheumatology (JCR) Yokohama, Japan 26-28 April 2007**

BACKGROUND: Psoriatic arthritis (PsA) is an inflammatory joint disease associated with psoriasis. The disease patterns vary among patients, with only very limited data describing such patterns among Asians.

This study aimed to describe the clinical manifestations of PsA among Filipino patients seen in a tertiary care hospital.

METHODS A retrospective review of the clinical records of patients with PsA seen at the Rheumatology Clinics of the University of Santo Tomas Hospital from November 2005 to October 2006. was conducted. All patients fulfilled the Moll and Wright criteria for PsA. The data included demographic profile, family history, and disease characteristics including number (poly-, oligo-, or mono-articular), location e.g. sacroiliitis, spondylitis, and type of joint involvement. The presence of arthritis mutilans, enthesitis and/ or dactylitis were also reported.

RESULT The data of 55 PsA patients (25, 45.5% males and 30, 54.5% females) were included. The mean age of onset of psoriasis was 36.5 ± 14.5 years (range 3 - 70 years), and psoriatic arthritis was 40.6 ± 14.4 years (range 12-76 years). Arthritis preceded the skin lesion in 8 (15.0%) patients by a mean interval of 36.6 ± 44.1 months (range 1-108 months) and skin lesion antedated arthritis in 47 (85.0%) patients by a mean interval of 63.3 ± 71.4 months (range 0-240 months). At disease onset, monoarthritis was found in 12 (22.0%), oligoarthritis in 36 (65.0%) and polyarthritis in 7 (13.0%) patients. Symmetrical involvement of joints at the time of onset was found in 7 (13.0%), DIP involvement was seen in 13 (23.6%) patients, lumbar spondylitis in 10 (18.2%), and sacroiliitis in 5 (9.1%) patients. No one had arthritis mutilans. Enthesitis was reported in 14 (25.5%) and dactylitis in 17 (30.9%). Five (9.0%) patients had relatives with PsA or psoriasis.

CONCLUSION In this study of psoriatic arthritis in a Filipino group of patients, both genders were affected almost equally, with features typically that of an asymmetric oligoarthritis. Skin involvement preceded arthritis in the majority of patients.

Sp3 Health-Related Quality of Life of Filipino Patients with Psoriatic Arthritis

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13th PRA Annual Convention. Westin Hotel, Manila. Jan 2006

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OBJECTIVE. To determine the HRQoL of Filipino patients with psoriatic arthritis.

METHOD. Cross sectional study design

SETTING: inpatient and outpatient services of the Section of Rheumatology, Clinical Immunology, and Osteoporosis and Department of Dermatology of the University of Santo Tomas Hospital Section between December 2005-October 2004

PATIENTS/PARTICIPANTS. Adult males and females with psoriatic arthritis diagnosed based on American College of Rheumatology (ACR)

MAIN OUTCOME MEASURES: Psoriatic arthritis functional classification based on ACR criteria. Disability was measured using the Health Assessment Questionnaire (HAQ) Disability Index. Pain and global health status were measured by the HAQ Visual Analog Scale and HAQ Global health index.

RESULTS. Twenty-two patients (6 male, 16 female) entered the study. 13.35). Mean disease duration was duration was 39.36 ± 50.58 months. Majority (10 subjects, 45.4%) belonged to class II. The mean patient's global scale, disability index and pain analogue scale were 1.53 ± 0.78 , 1.12 ± 0.83 , and 1.65 ± 0.74 , respectively. Pain scores significantly correlated with the patient's global health scale ($p=0.002$). Functional class severity significantly correlated with patient's global scale ($p=0.000$). There was a direct and significant correlation between severity of functional classification and an increase in pain scores ($p=0.000$). Disability scores also had a significant relationship with patient's self-global health assessment ($p=0.004$).

CONCLUSION: Filipino patients with PsA experienced reduced HRQoL. This was related to a decrease in their functional class, severity of disability, and pain. Overall reductions in physical disability, increased pain severity and functional class led to an overall poor assessment of global health.

Research Grant: Rheumatology Educational Trust Foundation, Inc

Sp4 Juvenile Ankylosing Spondylitis

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Poster Presentation. 9th PRA Annual Convention. Edsa Shangri la Hotel, Manila. Jan 2002

A 17 year old male initially presented 10 years ago as left ankle inflammation, treated by a “hilot” and repeated plantar injections. Seven years ago, he started to have knee joint pain and swelling, accompanied by back pains. He received NSAIDs, methotrexate 15 mg/week and intermittent intraarticular steroid injections during “flares”. He was lost to follow up for a year. He returned to the clinic for severe back pains with difficulty of ambulation; he was kyphotic, with flexion contractures on both hips and knees with marked muscle atrophy, limited motion on the cervical, thoracic and lumbar spine.

Issues: Management from standpoint of Rheumatology, Rehabilitation Medicine and Orthopedic Surgery

Sp5 Ankylosing Spondylitis: A Review of Cases at the UP-PGH Out Patient Department from 1990-1995

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Phil J Internal Medicine Nov-Dec 2000. 38(6): 285-290.

OBJECTIVE: To review the clinical profile of patients with ankylosing spondylitis seen at the University of the Philippines- Philippine General Hospital from January 1990 to September 1995.

METHODS: Records of 14 patients diagnosed to have ankylosing spondylitis based on the 1966 New York criteria for ankylosing spondylitis were retrieved for review.

RESULTS: In this series, the male to female ratio was 6:1. The mean age at onset of symptoms was 21.8 years and the mean age at diagnosis was 29.7 years. The mean interval between onset of symptoms and diagnosis was 7.8 years. Peripheral joints were affected in 10 out of 14 patients. Extraskelatal manifestations mainly involved the eyes. Anterior uveitis was present in 36% of the cases. One patient had bilateral hip arthroplasty. Patients were maintained on NSAIDs, mainly indomethacin. Sulfasalazine was prescribed to all patients but only 5 were able to take the drug for a limited period of time. Only three patients have followed-up regularly. One patient who had irregular follow-up had developed severe kyphosis. Five patients have been lost to follow-up for the last 12 months. Early diagnosis and patient education are necessary to improve prognosis and outcome in this group of patients.

Sp6 Psoriatic Arthritis: PGH Experience

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The clinical characteristics of 28 psoriatic arthritis patients seen at the Philippine General Hospital from 1986 to 1993 were studied. The male to female ratio was 1:1.8 and the mean age at the time of diagnosis was 41.5 +/- 16 years. The arthritis was symmetrical in 68% and the most commonly involved joints were the knees and the interphalangeal joints of the hands. Radiologic findings were similar to that of rheumatoid arthritis but were negative in 5 cases. Methotrexate, low-dose prednisone and non-steroidal anti-inflammatory drugs were the most commonly used drugs. Three of the 28 patients died secondary to complications and side effects of treatment.