Abstracts

(LRA n=20) refractory RA patients failing to respond to one or more biologics. Healthy control group (HC n=20) and additional comparable group of 20 early RA patients treated with methotrexate (MTX).

Results Our previous data evaluating IL-6 pathway (JAK-STAT and also, PI3K/Akt and MAPK/ERK) in T-, B- and monocyte cells showed that p-STAT3 is predominantly affected in CD4 +T cells. Constitutively, p-STAT3 levels in CD4 +T cells were higher in later RA group (MFI:316±33.3) compared to ERA (MFI:296±40.96; p=0.057) and healthy individuals (285±21.6; p=0.01). Upon stimulation of the pathway using cis and trans Il-6 activation, there was little induction in individuals (285±21.6; p=0.01). Upon stimulation of the pathway using cis and trans Il-6 activation, there was little induction in individuals (285±21.6; p=0.01). Upon stimulation of the pathway using cis and trans Il-6 activation, there was little induction in individuals (285±21.6; p=0.01). Upon stimulation of the pathway using cis and trans Il-6 activation, there was little induction in individuals (285±21.6; p=0.01). Upon stimulation of the pathway using cis and trans Il-6 activation, there was little induction in individuals (285±21.6; p=0.01).

Conclusions Our results are in line with previous findings, there was a difference in p-STAT3 levels at baseline between early and later RA, and differential response to stimulus with IL-6. Investigation of early vs later RA biologic response profiles will enable us to better understand the multiple cytokine networks, their interaction, and how disease duration and therapy alters this.

REFERENCES

Disclosure of interest None declared