Figure 1. A 57-years old man, who suffered from ulcers associated with tophaceous gout for around 3 months, was successfully treated with VAC therapy.

Abstract SAT0379 – Figure 1. A 57-years old man, who suffered from ulcers associated with tophaceous gout for around 3 months, was successfully treated with VAC therapy.

Figure 2. A 35-years old man, who suffered from ulcers associated with tophaceous gout for around 6 months, was successfully treated with VAC therapy.

Abstract SAT0379 – Figure 2. A 35-years old man, who suffered from ulcers associated with tophaceous gout for around 6 months, was successfully treated with VAC therapy.

Conclusions: Our preliminary study suggests that VAC therapy is effective and safe in treating chronic ulcers associated with tophaceous gout and appears to be superior to CWC therapy. Large-scale studies are needed to further evaluate the efficacy and safety of the VAC therapy in the treatment of chronic ulcers associated with tophaceous gout.

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Infection-related rheumatic diseases

SAT0380

PANLAR-ACCAR RECOMMENDATIONS ON DIAGNOSIS AND TREATMENT OF CHIKUNGUNYA-RELATED INFLAMMATORY ARTHROPATHIES IN LATIN AMERICA

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Background: Although mortality rates related with Chikungunya (CHIK) outbreaks into Latin America's endemic-dengue rural and new urban regions are low, dealing with symptoms and sequelae can produce both a significant burden of disease and diminish quality of life — from many months to years — after the acute phase of infection, with a significant impact on public and individual health.

Objectives: The aim of this work was to establish a PANLAR-ACCAR consensus on diagnosis and treatment of CHIK-related inflammatory arthropathies transmitted by *Ae. Aegypti* and *Ae. Albopictus* in Latin America (LA).

Methods: Based on the Consensus Development Conference format, a panel of ACCAR rheumatologists (n=10) took part in this PANLAR initiative. Experts voted recommendations from a previous content analysis of the medical literature on CHIK, four subsequent topic's Conferences and a workshop. Consensus represents the majority agreement (≥80%) achieved for each recommendation.

Results: The panel reach four overarching principles: 1) CHIK virus (CHIKV) is a re-emergent virus transmitted by two species of mosquitoes: *Ae. Aegypti* and *Ae. Albopictus*; 2) CHIKV caused massive outbreaks in LA; 3) Chronic CHIKV infection produces an inflammatory joint disease that in some cases can last several months to years, and 4) Currently, there are no vaccines or antivirals available for CHIKV infections.

Conclusions: PANLAR-ACCAR achieve 13 recommendations on CHIK categorised in three groups: 1) epidemiology and clinical manifestations; 2) diagnosis, and 3) treatment, representing the consensus agreement from the panel's members.

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