OBESITY IN PATIENTS WITH PSORIATIC ARTHRITIS IN OUR AREA


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Background: Obesity is a comorbid condition in patients with psoriasis which tends to be less common in patients with psoriatic arthritis (PsA). In the general population, obesity is associated with increased inflammatory load and vascular risk, and with hypovitaminosis D.

Objectives: To explore the relationship between obesity and disease activity, vascular damage, serum concentrations of vitamin D (25(OH)D) and bone mineral density (BMD) in patients with PsA.

Methods: Descriptive cross-sectional study. Patients with PsA patients and peripheral joint involvement were consecutively included. Demographic (age, sex), clinical [duration of the disease, BMI (body mass index)], B25(OH)D and analyti- cal (25OHD, CRP, ESR) variables were collected. Patients with a BMI<30 kg/m² were considered obese, and we considered vitamin D deficiency when 25OHD <20 ng/ml and vitamin D insufficiency when 25OHD 20-30 ng/ml. Within a period of 3 months, atheroma plaque and intima media thickness (IMT) mea- surement was performed by ultrasonography of the carotid artery using an Esaote MyLab70XVG with a 7-12 MHz linear transducer and an automated program measuring IMT through radiofrequency (Quality intima media Thickness in –a period of 3 months, atheroma plaque and intima media thickness (IMT) meas-

Conclusions: Ustekinumab is a safe drug, presenting high rates of drug reten-

Disclosure of Interest: None declared


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CANADIAN ADALIMUMAB POST-MARKETING OBSERVATIONAL EPIDEMIOLOGICAL STUDY ASSESSING THE EFFECTIVENESS OF ADALIMUMAB VS NON-BILOGIC DMARDs IN PSORIATIC ARTHRITIS (COMPLETE-PSA): 12-MONTH EFFECTIVENESS DATA

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Background: To date, observational studies comparing the effectiveness of ada-
limumab (ADA) to non-biologic DMARDs (nbDMARD) in psoriatic arthritis (PsA) patients are scarce. This study explored drug effectiveness and outcomes of patients initiating nbDMARD or ADA and compared the 12 month real-life effectiveness of both treatments.

Methods: Patients eligible for COMPLETE PsA are anti-TNF naïve adults, with active PsA who require change in their treatment regimen, per the judgment of the treating physician. In the current analysis patients enrolled during Jul/2011–Jun/ 2016 were included. Outcome measures analysed were: DAS28, SF-12, DLQi, presence of extra-articular manifestations (EAMs; enthesitis and dactylitis), psors-

Conclusions: