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THU0328 MIR-499 POLYMORPHISM IS ASSOCIATED WITH SUSCEPTIBILITY TO PSORIATIC ARTHRITIS – PRELIMINARY STUDY

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Background: Polymorphism within the miR-499 has been reported to be associated with susceptibility to rheumatoid arthritis (RA) in various populations.

Objectives: Our study aimed to find out whether similar association could be observed also in Polish population in both RA and psoriatic arthritis (PsA) patients.

Methods: For this purpose 359 individuals were studied, including 111 RA patients, 86 patients with PsA and 162 healthy blood donors that served as a control group.

Genotyping for miR-499 rs3746444 T/C was performed using a LightSNIP assay.

Results: Distribution of the miRNA-499 alleles and genotypes was similar in RA patients and controls. Among RA patients those carrying the CC homozygous genotype presented with lower DAS28 at diagnosis (0.027) but higher CRP levels after 12 weeks of anti-TNF treatment ($p=0.042$).

Interestingly, the TT genotype (rs3746444) was overexpressed in patients with PsA as compared to controls (OR=1.85, $p=0.034$) but its frequency was not significantly different when compared to RA cases. This polymorphism was also not found to be associated with clinical parameters in PsA patients.

Conclusions: These results show that miR-499 rs3746444 T/C polymorphism may constitute a risk factor for psoriatic arthritis development.

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THU0329 AN ITALIAN OBSERVATIONAL PROSPECTIVE STUDY ON PREDICTORS OF CLINICAL RESPONSE TO GOLIMUMAB AT 6 MONTHS IN PATIENTS WITH ACTIVE PSORIATIC ARTHRITIS

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Background: The identification of markers of response to biologic agents in the treatment of active psoriatic arthritis (PsA) may help in predicting the outcome and hence in optimising therapy.

Objectives: To evaluate the ability of a panel of candidate factors to predict the clinical response, defined as the achievement of minimal disease activity (MDA) following 6 month therapy with golimumab.

Methods: This Italian 6 month observational study included 149 PsA patients (53.7% males, mean age 49 years (SD 11) inadequate responders to conventional therapies who started the anti-tumour necrosis factor- α golimumab. Estimated factors included demographic data and baseline characteristics of the disease, measures of disease activity and functional disability, and biomarkers.

Results: At 6 months, a high rate of treatment persistency (80%) was observed. MDA was achieved in 44.3% of patients. Multivariate analysis showed Disease Activity in Psoriatic Arthritis (DAPSA) score, high-sensitivity C-reactive protein (hs-CRP), age, and disease duration as baseline factors correlating with MDA achievement at 6 months (table 1). A higher hs-CRP value and the absence of comorbidities were predictive factors for MDA at 6 months in biomarker-enhanced prediction models.

Golimumab was effective in improving disease and functional parameters and was well tolerated.

Conclusions: The availability of predictive factors of treatment response identified in this study may be helpful in driving the selection of PsA patients that are most likely to benefit of the therapy with golimumab.

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THU0330 OBESITY IN PSORIATIC ARTHRITIS: COMPARATIVE PREVALENCE WITH SKIN PSORIASIS AND ASSOCIATED FACTORS

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Background: Obesity (BMI ≥ 30 kg/m²) is a common cardiovascular risk factor in psoriatic disease¹. Although the prevalence of obesity is high, the factors associated with it in psoriatic arthritis (PsA) are poorly understood.

Objectives: We aimed to evaluate the prevalence and obesity-associated factors in patients with PsA.

Methods: Retrospective cross-sectional study that included 205 consecutive patients with PsA according to CASPAR criteria. The prevalence of obesity was compared with that of 310 patients with skin psoriasis of similar age (± 3 years). The factors associated with obesity were first analysed by a conditional logistic regression. The significant factors in this first model were then introduced in a multivariate model using a backward step approach (p -values < 0.05 were considered significant).

Results: One-hundred twelve men and 94 women were included, with a mean age of 53 ± 13 years. Obesity was more prevalent among psoriatics (36.5%) compared to PsA patients (24%), OR 1.6 (1.1–2.3), $p < 0.05$. The factors associated with obesity in the univariate analysis ($p < 0.05$) were: onset of psoriasis > 40 years (OR 2.4), onset of arthritis > 40 years (OR 2.1), PsA family history (OR 3.1), polyarticular presentation (OR 1.9), axial presentation (OR 2.5), polyarticular evolution (OR 2.4), axial evolution (OR 4.2), diabetes (OR 3.6), HBP (OR 3.9), and dyslipidemia (OR 3.5). After correcting for age, sex, disease duration and other confounders, independent associations with obesity found in the multivariate model ($p < 0.05$) were: PsA family history (OR 3.6, IC95%: 1.1–14.4), axial evolution (OR 4.4, IC95%: 1.0–22.4) and dyslipidemia (OR 3.5, IC95%: 1.5–8.6).

Used model	Parameter	Item considered	Odds Ratio	95% confidence interval	P value
Univariate logistic model (ULM)	Gender	Female	0.3197	0.1531–0.6677	0.0024
	Age	Continuous	0.9570	0.9252–0.9899	0.0109
	Baseline DAPSA score	Continuous	0.9287	0.8967–0.9618	<0.0001
	Baseline HAQ total score	Continuous	0.2937	0.1423–0.6063	0.0009
	Baseline Pain	Continuous	0.9833	0.9684–0.9984	0.0299
	Baseline BASDAI	Continuous	0.7036	0.5733–0.8635	0.0008
	Comorbidities	Presence	0.3258	0.1465–0.7241	0.0059
Multivariate logistic model (MLM)	Age	Continuous	0.9542	0.9112–0.9993	0.0465
	Baseline hs-CRP	Continuous	1.0015	1.0002–1.0028	0.0241
	Baseline DAPSA score	Continuous	0.9255	0.8879–0.9647	0.0003
	Disease duration	Continuous	1.0057	1.0007–1.0107	0.0260
	Baseline hs-CRP	Continuous	1.0688	1.008–1.1334	0.0261
Biomarker-enhanced ULM	Comorbidities	Presence	0.2645	0.0881–0.7941	0.0177
Biomarker-enhanced MLM	Baseline DAPSA score	Continuous	0.9231	0.8850–0.9628	0.0002