Continuance rete of TNFi (IFX and ADA) treatment was significantly lower in ADRa-positive patients than in those negative (p=0.0066 and p=0.0127, respectively). In IFX group, patients with ANA titers of >160 before treatment showed moderately worse EULAR treatment response (p=0.037 and p=0.033, respectively). In ADA group, 7 of 9 ANA-negative patients before treatment showed moderate or good EULAR response, but positive ANA both before and after treatment was not connected with to the clinical response.

Conclusion: The presence of ANA before IFX or ADA is a risk factor for the appearance of ADRa, while ADRa did not appeared in any patient negative for ANA before treatment. ANA of high titers before and after IFX treatment predicted existence of ADRa and possibly leading to the treatment failure.

REFERENCES

Disclosure of Interests: Shunichi Kuma...