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AB0756

COMPARATIVE CHANGE IN QUALITY OF LIFE MEASURES IN PRECLINICAL AND ESTABLISHED PSORIATIC ARTHRITIS PATIENTS UNDER SECUKINUMAB TREATMENT. DATA DERIVED FROM THE PROSPECTIVE OPEN LABEL PSARTROS STUDY

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Background: Psoriasis (PsO) and psoriatic arthritis (PsA) differentially impact patients' quality of life (QoL) due to pain, mental changes in the context of chronic inflammation and impaired physical function. Effective anti-inflammatory therapy has shown to be effective to improve QoL in PsO and PsA patients. However, the impact of anti-inflammatory therapy on QoL may be different in the earliest stages of PsA as compared to established disease.

Objectives: To perform a detailed comparative investigation of the effect of interleukin (IL)-17 inhibition with 300 mg secukinumab (SEC) on QoL in patients with very early PsA/pre-PsA and established PsA.

Methods: Patients from the IVEPSA study (1) on very early PsA/pre-PsA (N=20) and the PSARTROS (2) study on established PsA (N=20) were longitudinally assessed for SF-36, DLQI, PsAID and HAQ-DI at baseline and after 4, 12 and 24 weeks. All patients received SEC treatment; 19/20 pre-PsA patients and 17/20 established PsA patients completed the study. Changes from baseline values were evaluated using linear mixed effects models adjusted for baseline values of each scale, gender, age and disease duration, and plotted as model coefficients and respective 95% confidence intervals that represent adjusted mean absolute improvement from baseline. Scale signs were inverted as necessary to ease interpretability. Further subgroup analysis was conducted using Mann-Whitney.

Results: Significant and rapid improvements were observed in both pre-PsA and established PsA treated with SEC with regard to pain (SF-36 bodily pain, BP), general health perception (GH), dermatology quality of life index (DLQI) and PsA impact of disease (PsAID), as well as in the SF-36 component scores (mental component score of SF-36, MCS and physical component score of SF-36, PCS). Physical function-oriented instruments like SF-36 physical functioning (PF), role limitation due to physical problem (RP) and HAQ-DI were preferentially affected in established PsA group due to the higher functional burden of disease (Figure). There were more differences with respect to the course of QoL improvements through week 12 and 24, as established PsA patients showed an incremental improvement in SF-36 BP, PF and GH from week 12 to 24 while most of the responses plateaued in the pre-PsA group. Furthermore, established PsA patients who achieved minimal disease activity showed a significantly higher improvement in PsAID, HAQ-DI, SF-36 PF, RP and BP (all $p < 0.05$).

Conclusion: Pain, mental health, general health perception and impact of disease rapidly improve in both very early PsA/pre-PsA and established PsA patients treated with SEC. These data support the concept that very early treatment of PsA leads to significant improvement in QoL with the additional benefit of prevention of bone damage as previously shown (1, 2).

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Figure:

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AB0757

ANALYSIS OF THE PROGNOSTIC VALUE OF THE 12-ITEM PSORIATIC ARTHRITIS IMPACT OF DISEASE (PSAID-12) QUESTIONNAIRE FOR EVALUATION OF PSORIATIC ARTHRITIS ACTIVITY (PSA) BY DISEASE ACTIVITY INDEX FOR PSORIATIC ARTHRITIS (DAPSA) IN ROUTINE CARE: DATA OF THE RUSSIAN PSORIATIC ARTHRITIS REGISTRY (RU-PSART)

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Background: The PSAID-12 is an instrument for assessment the impact of PsA on patients' lives by examine both physical and psychological components of health. DAPSA is a valid and discriminative tool for evaluation of the PsA activity. There is limited data about the PSAID-12 correlations with PsA activity by DAPSA in clinical care [1].

The Russian Psoriatic Arthritis Registry (RU-PSART) collected data from 25 rheumatology clinics in the Russian Federation regions.

Objectives: to investigate the predictive value of the PSAID-12 for evaluate PsA activity by DAPSA in real-world settings.

Methods: 138 (male/female=79/59) patients (pts), median age 40 (Min-Max/23-71), with PsA, according to CASPAR criteria, were included in