was analyzed with a linear mixed-effect model. Relapse and durable relapse rates (respectively defined as DAS28 > 3.2, and DAS28 >3.2 not recovered at the following visit despite bDMARD escalation at previous step) were also compared between the 2 arms. Analysis were done per protocol (PP) according to a non-inferiority hypothesis (non-inferiority margin at 0.25 for DAS44 and 0.07 for relapse rates).

Results: 117 patients were randomized in Spacing arm and 116 in Maintenance arm (90 and 112 respectively for PP analysis). 165 (72.4%) patients were treated with TCZ and 63 (27.6%) with ABA. At the end of the follow-up in the Spacing arm, 12.4% of patients were able to discontinue their bDMARD (step 4), 38.9% had tapered them (step 1 to 3) and 23.9% needed to go back to initial step (step 0). In terms of disease activity, the non-inferiority of the Spacing strategy in terms of disease activity (DAS44) was not demonstrated for the whole population and the ABA subgroups: slope difference of 11% (95% CI: 9%, 32%) and 37% (95% CI: 4%, 77%) respectively. However, it was satisfied for the TCZ subgroup: slope difference 3% (95% CI: -21%, 27%) (Figure 1). Relapses (Figure 2) were more frequent in the Spacing arm: +45% (95% CI: 32%, 57%), +48% (95% CI: 24%, 71%) and +43% (95% CI: 29%, 58%) in the whole population, ABA and TCZ subgroups respectively. Durable relapses were more frequent in the Spacing arm: +10% (95% CI: 0%, 19%), 16% (95% CI: -5%, 37%) and 7% (95% CI: -3%, 16%) in the whole population, ABA and TCZ subgroups respectively. In terms of safety, the non-inferiority was satisfied in terms of disease activity for the TCZ subgroup.

Disclosure of Interests: Joanna KEDRA: None declared, Philippe Dieudé: None declared, Hubert MAROTTE: None declared, Alexandre Lafourcade: None declared, Emilie Ducourau: Speakers bureau: BMS and Abbvie, Thierry Schanverbeke: None declared, Aleth Perdriger: None declared, Martin SOUBRIER: None declared, Jacques Morel: None declared, Arnaud Constanti: None declared, Emmanuelle Derris: None declared, Valérie Royant: None declared, Jean-Hugues Salmon: Speakers bureau: Janssen Novartis, Thao Pham: Speakers bureau: Lilly, Novartis, Jacques-Eric Gottenberg Grant/research support from: Bristol-Myers-Squibb, Grant/research support from: Bristol-Myers Squibb, Consultant for: Bristol-Myers Squibb, Lilly, Pfizer, Sanofi-Genzyme, UCB Pharma, Consultant for: Bristol-Myers Squibb, Eli Lilly, UCB, Edouard set: None declared, maxime dougados Grant/research support from: Eli Lilly and Company, Pfizer, Abbvie, and UCB Pharma, Consultant for: Eli Lilly and Company, Pfizer, Abbvie, and UCB Pharma, Valerie Devau-chelle-Perssec Grant/research support from: Roche-Chugui, Speakers bureau: MSD, BMS, UCB, Roche, Philippe Gaudin: Speakers bureau: Roche, Chugui, BMS, Abbvie, Servier, Pfizer, MSD, UCB, ESAOTE, Gen-évr, Janssen, Novartis, Lilly, Biogen, Amge, Corinne CORMIER: None declared, Philippe Goupil: None declared, Xavier Mariette Grant/research support from: Servier, Consultant for: Astenza, Bristol-Myers Squibb, GlaxoSmithKline, Janssen, Pfizer, UCB Pharma, Francis Berenbaum: None declared, Didier Alcaix: None declared, SID AHMED ROUIDI: None declared, Jean-Marie Bertheilot: None declared, Agnés Monnier: None declared, Philippe Lioté: None declared, Frederic Lioté Grant/research support from: Astenza, Bristol-Myers Squibb, Pfizer, Roche, Sanofi and UCB Pharma., Speakers bureau: Speaking and/or consulting fees from Abbvie, Amgen, Bristol-Myers Squibb, Celgene, Eli Lilly, Gilead, Janssen, Merck-Serono, Medac, Nordic Pharma, Novartis, Pfizer, Roche, Sandoz, Sanofi and UCB Pharma., Isabelle CHARY VALCKENAERE: None declared, David Hajage: None declared, Florence Tubach Grant/research support from: Financial compensation received from MSD on a pro-rata basis for participation in Scientific Committee meetings and functions for this study, Bruno Faucet Grant/research support from: Abbvie, Lilly, MSD, Pfizer, Consultant for: Abbvie, Biogen, BMS, Celgene, Janssen, Lilly, Medac, MSD, NORDIC Pharma, Novartis, Pfizer, Roche, Sanofi-Aventis, Sanofi Genzyme, SOBI, UCB