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FRI0324

NO RADIOGRAPHIC SACROILIITIS PROGRESSION OVER 6 YEARS IN PATIENTS WITH EARLY SPONDYLOARTHRITIS FROM THE ESPERANZA COHORT

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Background: Longitudinal studies about the change from non-radiographic axial Spondyloarthritis (nr-axSpA) to r-axSpA (radiographic axial Spondyloarthritis) are scarce but show a 9-10% progression rate over 2 years (1-2) and a 24% progression rate over 10 years in another study (3). However, in early cohorts such as DESIR, this only represents a 5% over 5 years (4).

Objectives: The aim of this study was to know the rate of progression from nr-axSpA to r-axSpA over 6 years in the early Esperanza cohort.

Methods: This study included 94 patients of the Spanish early spondyloarthritis (SpA) Esperanza cohort, 60 fulfilled the ASAS classification criteria for SpA. Every patient had a baseline and a six years sacroiliac X-ray. Nine readers, blinded for the diagnosis, participated in the reliability exercise, all of them experienced rheumatologists and members of the Spanish spondyloarthritis working group (GRESSER). Patients with SpA were classified as having r-axSpA, at baseline or after 6 years of follow-up, if they fulfilled the radiographic item of the modified New York criteria (mNY) (presence of radiographic changes in the sacroiliac joints -SIJ- of at least grade II bilaterally or grade III or IV unilaterally). The gold standard of SIJ X-Ray was the categorical opinion of at least five of the expert readers. For the statistical analysis, the Chi-square and Kappa tests were performed.

Results: Demographic data of the SpA patients were: mean age 33.4±7.5 years; 37 (61.7%) male; mean CRP 6.4±6.5 mg/dl and ESR 10.3±10.6. Present smokers 30.6%; and past smokers 16.3%. HLA-B27 (+) 56.7%. Regarding the presence of X-Ray sacroiliitis: 20 patients had baseline sacroiliitis and 18 at the final visit; 11 had sacroiliitis at both baseline and final visits; 9 patients changed from baseline sacroiliitis to no-sacroiliitis and 7 changed from baseline no-sacroiliitis to sacroiliitis at the 6 year visit. The reliability of the readers was fair with a mean inter-reader kappa test of 0.375 (range 0.146 - 0.652) and a mean agreement of 73.7% (range 58.7% - 90%).

Conclusion: In this group of patients with early SpA no progression from nr-axSpA to r-axSpA over 6 years was observed. It appears that early diagnosis and standard treatment seem to reduce SIJ radiographic progression.

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Sacroiliac Joint Follow-up Basal to 6 years

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UVEITIS OCCURRENCE IN EARLY INFLAMMATORY BACK PAIN. FIVE YEARS DATA FROM A PROSPECTIVE FRENCH NATIONWIDE COHORT

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Background: Uveitis is the most frequent extra rheumatological manifestation in axial Spondyloarthritis (SpA). DESIR is a prospective multicenter cohort of patients with early inflammatory back pain suggestive of SpA. We reported previously a 8.5% baseline prevalence of uveitis for the patients included in the cohort; this history of uveitis at the first visit of the cohort was associated with inflammatory bowel disease (IBD) and preceding infection (1).

Objectives: The aim of the study was to evaluate the prevalence and incidence of uveitis over the first five years of prospective follow-up of the cohort, and to evaluate its associated factors.

Methods: DESIR is a prospective observational cohort of patients with recent onset inflammatory back pain (more than 3 months, less than 3 years), suggestive of axial SpA. All available factors in the database were compared between patients with and without uveitis at 5 years, by uni and then multivariate analysis. Baseline factors associated with new cases of uveitis occurrence over the 5 years were also analyzed. Significance: p less than 0.05.

Results: After 5 years, 91 patients (out of 480 with complete follow-up) had at least one uveitis episode, giving an estimated prevalence of 18.9% [95%CI: 15.4-22.4]. In multivariate analysis, uveitis was associated with dactylitis (OR 2.92 [2.06 - 4.14]; p=0.002**), ESR > 7 mm (median value) (OR 2.19 [1.57 - 3.06]; p=0.018*).

New incident uveitis occurred in 31 cases over 5 years, giving an estimated incidence rate of 1.29 [0.84 - 1.74] / 100 patient-years. New incidence of uveitis was