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AB1411 JOINT RHEUMA-DERMA CLINIC: FOUR YEARS OF EXPERIENCE AT THE SAN MARCO HOSPITAL IN CATANIA

R. Foti1, G. Giuffrida2, A. Ramondetta2, E. Visalli2, G. Amato1, Y. Dal Bosco1, F. De Lucia1, R. Foti1, R. De Pasquale2.

Background: Psoriatic arthritis (PsA) affects up to one-third of patients with psoriasis. Many recent works in literature have underlined that the percentage of undiagnosed PsA is still high. A direct collaboration between dermatologists and rheumatologists appears fundamental for a better management of these patients, to reduce the risk of joint damage, disability, and comorbidities.

Objectives: The aim of this study is to highlight the benefits of a Rheuma-Derma clinic and a shared approach, focussed to an early diagnosis and prompt therapeutic strategy.

Methods: Patients with psoriasis complaining joint symptoms or rheumatologic patients with cutaneous involvement, were simultaneously assessed by a dermatologist and a rheumatologist. The collected data included demographics, clinical characteristics as joint patterns (axial/peripheral), clinimetric index evaluated (DAS28, HAQ, BASDAI, DAPSA, PASI, PGA) family history of psoriasis or PsA, BMI (Mass Body Index), psoriasis, comorbidities and Charlson Index, gastrointestinal and ophthalmic involvement, and previous and current treatments with conventional (csDMARDs) and/or biological therapy (bDMARDs).

Results: During the period from 2012 to 2016 the Rheumatology Department registered 255 of patients under biological treatment, against 374 of patients in our cohort. In the group analyzed 539 patients were treated with biological therapies (bDMARDs). The joint raise of the 46%. Globally the number of patients with the diagnosis of PsA under biological treatment registered 255 of patients against 374 of patients with psoriasis. Many recent works in literature have underlined that the percentage of undiagnosed PsA is still high. A direct collaboration between dermatologists and rheumatologists appears fundamental for a better management of these patients, to reduce the risk of joint damage, disability, and comorbidities.

In conclusion, the diagnosis of an Early PsA is essential, as an early treatment and management can alter the natural course of PsA and prevent irreversible joint damage. Our experience proved the increased number of patients since the Rheuma-Derma Clinic have started, such as an increased number of patients under treatment, leading to a significant improvement in the quality of life of PsA and PsO patients.


AB1412 IMPORTANCE OF TELEMEDICINE IN THE SYSTEMIC SCLEROSIS DURING COVID-19 PANDEMIC

G. Cuomo1, C. Di Vico1, F. Masini1, C. Iandoli1, D. Perretta1, R. Iraco1, M. Lorenzoni: None declared, Chiara Tani: None declared, Liliana Dell'Osso: None declared.

Background: Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), also called COVID-19 disease, was firstly reported in December 2019 in China and soon declared a pandemic by the World Health Organization (WHO) on March 11, 2020 (1). As a result, patients’ visits to medical facilities are affected. Systemic sclerosis (SSc) is a chronic systemic autoimmune disease characterized by vascular damage and skin fibrosis. In these patients, a tight follow-up is crucial to verify the specific cases and clinical needs. In particular, the infection risk in SSc might also be related not only to disease activity but also to possible failures due to therapy discontinuation. Telemedicine has demonstrated as a valid alternative to improve the quality of rheumatology patients’ care during COVID-19 pandemic, thus reducing hospitalizations only when truly indicated (2).

Objectives: In december 2020 the Azienda Policlinico Vanvitelli approved telemedicine by Irplus platform as a particular measure in the face of the COVID-19 pandemic. In this study we examined the impact of the COVID-19 pandemic on visit status of SSc patients at our centre and the patient benefits of telemedicine.

Methods: In this study, we retrospectively enrolled 480 SSc patients who visited our centre between January and December 2021. Of the patients included in the study, 198 patients (18 males and 180 females) used telemedicine, while 282 patients (20 males and 262 females) did not use it.

Results: During televisits, we assessed possible contacts with COVID-19 patients and/or potential risk of COVID-19, investigating about the occurrence of typical symptoms in the last 15 days. No significant differences in background data, such as the severity of the disease, type of treatment and frequency of complications were found between these two groups. In more detail, SSc is associated intestinal lung disease was complicated by 35.4% and 31.3% of patients in the telemedicine and non-telemedicine groups, respectively (p=0.9). Besides, 53.7% of patients in the telemedicine group and 49.9% of patients in the non-telemedicine group were treated with prednisone (p=0.344). 74.1% of patients in the telemedicine group were administered immunosuppressive drugs, compared to 78.5% of patients in the non-telemedicine group (p=0.000). The number of patients who discontinued treatment was significantly lower in the telemedicine group, with 14 patients (7%) compared to 30 patients (11.4%) in the non-telemedicine group (p=0.003). These patients who voluntarily discontinued treatment were finally resumed. However, the time required to resume treatment differed between the two groups. This means that the duration of treatment interruption was significantly shorter in the telemedicine group, with a mean ± standard deviation of 1.85 (5.5) days compared to 7.5 (12.1) days in the non-telemedicine group (p=0.001). There was no difference in the amount of change in laboratory data between the groups receiving telemedicine and those not receiving telemedicine.

Conclusion: This study confirmed the data published by Norimatsu et al (3), as that telemedicine may help SSc patients to continue and/or resume treatment under the COVID-19 pandemic. SSc is associated to intestinal lung disease, cardiac involvement, vascular injury and prednisone and immunosuppressive agents have been used as treatment. Thus, disruptions in treatment can lead to worsening of symptoms and missed opportunities for early interventions for complications. Patients who use telemedicine may be more motivated to treat, and this retrospective study demonstrated it. This study suggests that telemedicine can be useful in treating SSc and other diseases that require ongoing treatment in the COVID-19 infection.

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