Background: The Psoriatic Arthritis Impact of Disease 12-item questionnaire (PsAID-12) has been developed to measure the sensitivity of Psoriatic Arthritis (PsA) for purposes of monitoring and clinical management.

Objectives: Assess the sensitivity of the Russian version of PsAID-12 against the background of ongoing therapy at baseline and after 12 month (mo).

Methods: 172 (MF=90 (52.3%))/82(47.7%) PsA pts fulfilling the CASPAR criteria were included. Mean age 45.1±18.8 years (yrs), DAPSA 28±22 median (Me). All pts underwent standard clinical examinations and PROs (EQ-SD, VAS global assessments, VAS pain, BDI, SDQ, SCL-90, SIB, VAS fatigue, WAIQ subscales). All pts at the time of inclusion in the study and 12mo received DMARDs: NSAIDs-158 (91.8%), methotrexate-134 (77.9%), leflunomide-11 (6.3%), sulfasalazine-12 (6.9%), TNFi inhibitors -72 (44.0%), seukinumab -14 (8.1%), ustekinumab -3 (1.7%), ilirikumab -1 (0.58%), apremilast-16 (9.3%), tofacitinib -51 (29.1%). To determine the sensitivity of PsAID-12, its changes were analyzed depending on: I group of patients in whom MDA was achieved - 50, II - 43 REM / LDA patients, III - 79 patients with no effect on therapy.

Results: By 12 mo of therapy significant improvement in all PsA clinical examination (DAPSA - 28±22.2 vs 15±14.1, TJC 68 – 10.5±10.1 vs 6.68±5.77, SJC 65 – 8.3±7.2 vs 4.62±3.17, CRP – 13.6±8.06 vs 7.06±6.02, EQ-SD – 6.8±6.02 vs 3.39±3.11, SF-36 – 28±22.2 vs 15±14.1, TJC 68 – 10.5±10.1 vs 6.68±5.77, SJC 65 – 8.3±7.2 vs 4.62±3.17, CRP – 13.6±8.06 vs 7.06±6.02) and PROs (BAS-DMARD – 28±22.2 vs 15±14.1, TJC 68 – 10.5±10.1 vs 6.68±5.77, SJC 65 – 8.3±7.2 vs 4.62±3.17, CRP – 13.6±8.06 vs 7.06±6.02, EQ-5D – 0.68±0.21 vs 0.72±0.18) was observed in the plasma of sarcopenic patients compared with non-sarcopenic patients (2.0± 1.0 U/mg Hb vs 2.41± 0.88 U/mg Hb, respectively, p = 0.007). Similarly, catalase levels were significantly higher than in non-sarcopenic patients (3.20±1.00 vs 2.41±0.88 U/mg Hb, respectively, p= 0.008). No significant differences in CRP levels were detected (p= 0.254). An accumulation of lipid oxidation products (plasma malondialdehyde (MDA), and conjugated dienes (CD) levels) was measured using spectrophotometric methods.

Conclusion: Psoriasis is the most significant group of sarcopenic patients than in non-sarcopenic subjects (3.0± 1.0 U/mg Hb vs 2.41± 0.88 U/mg Hb, respectively, p = 0.007). Similarly, catalase levels were significantly higher in sarcopenic patients compared with non-sarcopenic patients (4.0±1.00 vs 3.20±1.00 U/mg Hb, respectively, p= 0.008). No significant differences in CRP levels were detected (p= 0.254).

Disclosure of Interests: None declared

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