



**SP**ondylo**Ar**thritis **R**esearch & **T**reatment **N**etwork

Volume 2 Issue 3

## SPARTAN NEWS

Greetings!

As we prepare for American College of Rheumatology meeting, I look forward to seeing many of you in D.C. this year. Besides a robust scientific Spondyloarthritis (SpA) program, SPARTAN will be hosting the SpA study group on Tuesday 1-2pm. I hope to see you there, where we will have an interactive session on meeting the education gap in MRI imaging. A portion of this session will be a case-based mini-Maksymowych workshop; we would also like to hear from the audience what they perceive the gap is, and how we can close it.

The SPARTAN education committee has been diligently working on our own annual meeting, now set for the first weekend in May in Boston. I want to acknowledge the tireless effort of Joerg Ermann, who has led his group to a very successful start.

We have also been working on the proposed projects we had laid out in July. I want to thank all those members for the many hours of work already. We will be proposing a Request for Application (RFA) for a PI on the classification criteria study. This will go out to the membership after ACR. There will be a month to respond with a 2-page proposal and budget. Details to follow.

If there are questions or comments, feel free to email me or catch me in D.C.

All the best,

Lianne



Lianne Gensler, MD  
Chair, SPARTAN

# Save the Date for the 2017 Annual Meeting!

May 6-7, 2017



Boston

## Ghent Meeting Report

- Liron Caplan, MD

The 10th International Congress on Spondyloarthritis was held at the Vlaamse Opera in Gent, Belgium on Sept 15th-17th. Robert Landewé (The Netherlands) and Georg Schett (Germany) served as conference presidents. Scientific sessions were delivered related to the IL-17/23 pathway, treat-to-target in SpA, and the interaction of IBD in the setting of SpA, as well as challenges in assessing disease activity in SpA. Over 160 posters were presented. For those interested in the biennial conference, the website is located at: <http://spa-congress.org/>

## SPARTAN EVENTS at ACR



Saturday 11/12:

5-7pm GRAPPA meeting, Marriott Marquis Hotel, Salon E

Sunday 11/13:

9-11am SpA and PsA: Axial and peripheral SpA posters I

2:30-4pm Advanced imaging in RA and SpA

4:30-6pm SpA and PsA II: Axial SpA Treatment

Monday 11/14:

9-11am SpA and PsA Clinical aspects and Treatment ARHP poster

9-11am SpA and PsA Poster II: Psoriatic Arthritis

9-11am SpA and PsA: Pathogenesis, Etiology: Poster I

12:30pm ASAS workshop, Marriott Marquis, Salon 9-10

2:30-4pm SpA and PsA: clinical aspects and treatment III: Axial SpA

Tuesday 11/15:

9-11am SpA and PsA: Clinical and treatment Poster III

9-11am SpA And PsA: Pathogenesis, Etiology Poster II

1:00 pm SpA Study Section, 140A

2:30-4pm SpA PsA: Pathogenesis, Etiology I

4:30-6pm SpA and PsA: Clinical IV: PsA-Clinical

Wednesday 11/16:

## Updates in Spondyloarthritis

- Grant Louie, MD

- In a phase 3 clinical trial of patients with active ankylosing spondylitis (AS) who were either TNF inhibitor (TNFi) naïve or TNFi inadequate responders, secukinumab produced a significantly higher ASAS20 response at Week 16 compared to placebo (68% and 50% vs 31% and 24%, respectively).

*Sieper J, Deodhar A, Marzo-Ortega H, et al, Secukinumab efficacy in anti-TNF-naïve and anti-TNF-experienced subjects with active ankylosing spondylitis: results from the MEASURE 2 study. Ann Rheum Dis 2016 Aug 31 doi: 10.1136/annrheumdis-2016-210023. [Epub ahead of print]. PMID: 27582421*

- This prospective cohort study of 954 patients with spondyloarthritis reported that comedication with a conventional synthetic DMARD (csDMARD) did not result in longer time to first TNFi discontinuation due to inefficacy compared to without comedication with csDMARD (HR 0.83, 95% CI 0.59-1.16).

*Sepriano, A., Ramiro, S., van der Heijde, D., et al, Effect of comedication with conventional synthetic DMARDs on TNF inhibitors-retention in patients with spondyloarthritis: A prospective cohort. Arthritis & Rheumatology 2016 June 6. Accepted Author Manuscript. doi:10.1002/art.39772. PMID: 27273894*

- In a prospective inception cohort study of 51 healthy 1st degree relatives aged 18-40 years of patients with HLA-B27-positive AS, 33% fulfilled ASAS criteria for SpA with either clinical and/or radiological abnormalities.

*Turina, M. C., de Winter, J. J., Paramarta, J. E., et al, Clinical and Imaging Signs of Spondyloarthritis in First-Degree Relatives of HLA-B27-Positive Ankylosing Spondylitis Patients: The Pre-Spondyloarthritis (Pre-SpA) Cohort Study. Arthritis & Rheumatology 2016, 68: 2444-2455. doi:10.1002/art.39766. PMID: 27214232*

- Patients with SpA treated with TNFi have similar cancer risk as compared with their TNFi naïve counterparts (RR 0.8, 95% CI 0.7-1.0) as well as the general population in this retrospective study using 2 different biologics registries.

*Hellgren K, Dreyer L, Arkema EV, et al, Cancer risk in patients with spondyloarthritis treated with TNF inhibitors: a collaborative study from the ARTIS and DANBIO registers. Ann Rheum Dis 2016 May 4. pii: annrheumdis-2016-209270. doi: 10.1136/annrheumdis-2016-209270. PMID: 27147709*

- In this cohort study of 1914 patients with axial SpA, TNFi retention and

clinical efficacy were lower in patients treated with TNFi monotherapy compared to patients treated with csDMARD comedication (HR 1.17, 95% CI 1.01-1.35).

*Nissen MJ, Ciurea A, Bernhard J, et al, The Effect of Comedication With a Conventional Synthetic Disease-Modifying Antirheumatic Drug on Drug Retention and Clinical Effectiveness of Anti-Tumor Necrosis Factor Therapy in Patients With Axial Spondyloarthritis. Arthritis Rheumatol 2016 Sep;68(9):2141-50. doi: 10.1002/art.39691. PMID: 27015429*

- Among rheumatology practices in the United States, patients with chronic back pain for  $\geq 3$  months with onset before 45 years of age could be identified with SpA versus nonspecific back pain if they fulfilled at least 1 of 3 SpA features (HLA-B27 positivity, current inflammatory back pain, or sacroiliitis by MRI or plain radiography).

*Deodhar A, Mease PJ, Reveille JD, et al, Frequency of Axial Spondyloarthritis Diagnosis Among Patients Seen by US Rheumatologists for Evaluation of Chronic Back Pain. Arthritis Rheumatol 2016 Jul;68(7):1669-76. doi: 10.1002/art.39612. PMID: 26816002*

- In a population-based inception cohort of patients with nonradiographic axial SpA, 16 of 83 (19%) subjects progressed to AS after mean follow-up of 10.6 years. More frequent and more rapid progression occurred in patients who fulfilled ASA criteria with the imaging arm compared with the clinical arm.

*Wang R, Gabriel S, Ward MM, Progression of Nonradiographic Axial Spondyloarthritis to Ankylosing Spondylitis: A Population-Based Cohort Study. Arthritis Rheumatol 2016 Jun;68(6):1415-21. doi: 10.1002/art.39542. PMID: 26663907*

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