

# SPARTAN

Spondyloarthritis Research  
and Treatment Network

Summer 2020

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Greetings!

The COVID-19 pandemic has imposed unprecedented changes in our personal and professional lives over the last few months. I want to thank everyone in the organization for their flexibility and contributions to this year's virtual SPARTAN annual symposium.

We had a successful conference with a good review of ongoing clinical and basic science research in Spondyloarthritis. This edition of the newsletter will review of the highlights from the annual meeting and provide information about future Spondyloarthritis meetings.

We would also like to welcome our new committee members with our thanks for stepping up to to serve SPARTAN. Our committees are essential for accomplishing work within the organization and pursuing the educational and research goals of SPARTAN.

Finally, I would like to thank Lianne Gensler, Andreas Reimold, and Michael Weisman for their leadership and many years of service to SPARTAN as they have completed their board terms.

Best Wishes,

Judy



Judy Smith  
SPARTAN Chair

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## CLASSIC STUDY UPDATE

There has been steady progress with the CLASSIC study and a total of 6 sites have been activated. We now have sites in the USA and Mexico active, and we look forward to adding our first Canadian site in the near future. A total of 39



patients have been enrolled across 3 different sites to date. Dr. Philip Mease, Dr. Lianne Gensler and Dr. Runsheng Wang have been top recruiters and have been inspirational to other sites

## ANNOUNCEMENTS

Founding member **John Reveille, MD** received the **RESEARCH CAREER ACHIEVEMENT AWARD** for a lifetime of outstanding contributions to research in spondyloarthritis. Congratulations, John!

*SPARTAN announced Junior Faculty and Fellowship grants to nurture young scientists and support ongoing basic science and clinical research at the annual meeting.*

***Congratulations to the 2020-2021 awardees!***

### **JUNIOR FACULTY SEED GRANT**

**Jean Liew, MD** (Boston University)

"The impact of tumor necrosis factor inhibitor use on cardiovascular events in ankylosing spondylitis"

### **FELLOWSHIP GRANTS FOR PILOT PROJECTS**

**Yuliya Afinogenova, MD**, Yale (Abhijeet Danve, Mentor)

*"Awareness and Attitudes Regarding Axial Spondyloarthritis among Non-Rheumatology Providers"*

**Pamela Diaz, MD**, University of Toronto (Lihi Eder, Mentor)

*"Axial Psoriatic Arthritis – Correlation between Clinical, Genetic and Axial MRI Findings"*

**Rouhin Sen, MD**, University of Colorado (Liron Caplan, Mentor)

*"Neutrophil/Lymphocyte Ratio and Platelet/Lymphocyte Ratio as a Biomarker in Axial Spondyloarthritis"*

## RECENT PUBLICATIONS

**Maintenance of clinical remission in early axial spondyloarthritis following certolizumab pegol dose reduction** Robert BM Landewé<sup>1,2</sup>, Désirée van der Heijde<sup>3</sup>, Maxime Dougados<sup>4</sup>, Xenofon Baraliakos<sup>5</sup>, Filip E Van den Bosch<sup>6</sup>, Karl Gaffney<sup>7</sup>, Lars Bauer<sup>8</sup>, Bengt Hoepken<sup>8</sup>, Owen R Davies<sup>9</sup>, Natasha de Peyrecave<sup>10</sup>, Karen Thomas<sup>8</sup>, Lianne Gensler<sup>11</sup>

Peer review by Gopi K Penmetsa MD

There are no adequate studies to establish an appropriate treatment strategy for maintenance therapy after AxSpA patients achieve remission.

C-OPTIMIZE is a randomized controlled trial which compared the effects of dose reduction vs withdrawal in AxSpA patients. This is a well-designed randomized double blinded placebo controlled study and patients were monitored over extended period of 48 weeks. They performed sub-group analysis with patients separated into radiographic AxSpA and non-radiographic AxSpA.

The results showed patients on dose reduction (Cimzia 200 mg Q4 wks) had sustained remission rates similar to standard dose (Cimzia 200 mg Q2 wk). Patients who have been off treatment demonstrated higher rates of flare ups.

Overall this study offers some insight that dose reduction of TNF inhibitors may be appropriate in some AxSpA patients who achieved remission. One limitation of the study was, the patients enrolled had early AxSpA with shorter disease duration (< 5 years) and results may not be similar in patients with longer disease activity.

**The microbiome in rheumatology: Where are we and where should we go?** Julia Manasson, Rebecca B Blank, Jose U Scher. *Ann Rheum Dis.* 2020 Jun;79(6):727-733. doi: 10.1136/annrheumdis-2019-216631. Epub 2020 Apr 24.

Peer review by Kristi Kuhn MD, PhD

This review begins by providing a historical account of the connection between bacteria and rheumatologic diseases (including SpA and AS) and

our current state of understanding. The authors then call for more rigorous study design including sufficient subjects for adequate power to adjust for multiple confounders, longitudinal studies, sample and sequencing data quality, and integration with additional 'omics. Finally, the authors address potential methods for altering disease through by manipulating the microbiome.

Overall, this is a timely perspective as microbiome studies in axSpA accumulate, challenging us investigators to collaborate and build larger cohorts to address multiple confounders but also to consider mechanisms by which the microbiome leads to disease as well as provide therapeutic avenues.

## UPCOMING SPONDYLOARTHRITIS EVENTS



May 20–22, 2021

Madison, Wisconsin

ACR annual conference ACR Convergence 2020: The ACR's All-Virtual Annual Meeting November 5–9, 2020

**SPARTAN GRAPPA ASAS Symposium** on axSpA and PsA will be a virtual event with ACR Convergence. Details TBA

**Annual ASAS Workshop** January 15–16, 2021. Location/format TBD.

**SPARTAN Annual Meeting**

## THANK YOU VIRTUAL MEETING SPONSORS!



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