PROJECT PROTCOL

DIFFICULT-TO-TREAT PSORIATIC ARTHRITIS

PROPONENTS: Catarina Abreu, Vanessa Fraga, Alice Morais Castro, Maria José Santos

Psoriatic Arthritis (PsA) is a complex inflammatory arthropathy associated with psoriasis and classified within the spondyloarthritis (SpA) group of diseases. Despite the growing number of biological and targeted synthetic disease modifying antirheumatic drugs (b/tsDMARDs) for the treatment of psoriatic arthritis (PsA), it is not uncommon to find in clinical practice patients with persistently high disease activity that fail to respond to multiple therapeutic agents. In 2020, the European Alliance of Associations for Rheumatology (EULAR) proposed a definition for difficult-to-treat (D2T) rheumatoid arthritis (RA) according to the following criteria¹:

- Treatment according to EULAR recommendations and failure of ≥2 b/tsDMARD (with different mechanisms of action (MOA)) after failing conventional synthetic DMARD therapy (unless contraindicated);
- Presence of signs suggestive of active/progressive disease;
- o Management of signs and/or symptoms perceived as problematic by the rheumatologist and/or the patient.

Recently, Anand Kumthekar et al, published the first proposed criteria for D2T PsA which differs from D2T RA definition by suggesting failure of 3 or more b/tsDMARDs with different mechanisms of action (MOA)². Although D2T PsA is a common finding in clinical practice, a definition is lacking. When managing patients with D2T RA/PsA, possible differential diagnosis, pharmacologic and non-pharmacological treatment adherence, comorbidities (cardiovascular, obesity and fibromyalgia) and patients' expectations, should be carefully assessed^{1,2}.

In an exploratory analysis of 141 patients with PsA followed in our department we observed a prevalence of 4,3% of D2T PsA when applying D2T RA criteria. However, no differences were found in clinical presentation or presence of comorbidities between D2T and non-D2T PsA.

Our aim is to estimate the prevalence of patients with D2T PsA in clinical practice according to different definitions, describe the use of bDMARDs in D2T PsA and identify clinical and demographic characteristics associated with D2T PsA patients.

An observational cross-sectional study of prospectively collected data on patients with the clinical diagnosis of PsA registered in the Rheumatic Diseases Portuguese Registry (Reuma.pt) will be performed, including patients with ≥18 years old at initial diagnosis with a registered diagnosis of PsA and available baseline and follow-up information, with at least one registered visit after September 2017.