

Lo mejor de - Espondiloartritis

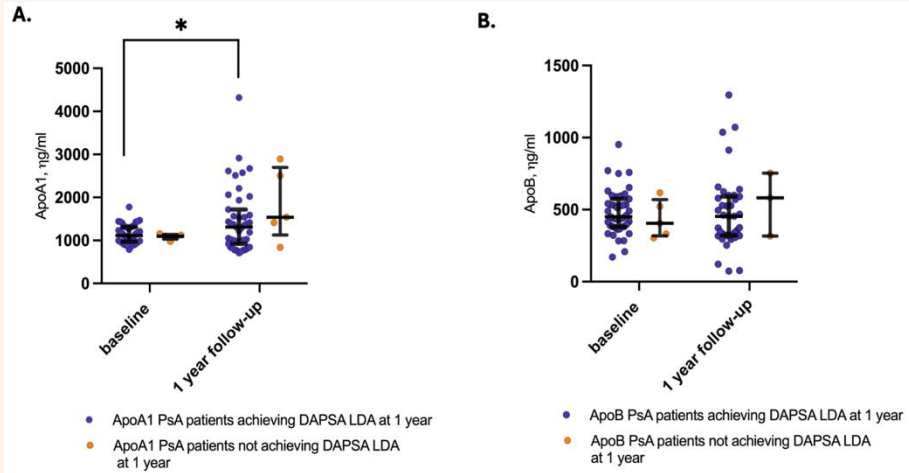
Dra. María Jesús Montesa Cabrera

Hospital Universitario Nuestra Señora de Candelaria



Inmunometabolismo

0528: Apolipoprotein A1 and B Levels Indicate Specific Lipid Changes In Early Treatment Naïve Psoriatic Arthritis and Correlate With 1-year Disease Activity



0849: Mortality and Major Adverse Cardiac Events (MACE) with GLP-1 Receptor Agonists (GLP-1 RA) in Psoriatic Arthritis

Outcome	Groups	Overall Risk, %	Risk Ratio	Overall Risk, %	Risk Ratio
		Before Propensity Score Matching		After Propensity Score Matching	
Ischemic Heart Diseases	GLP-1 RAs	9.7 (290/2,983)	1.189 (1.063-1.330) <i>p</i> value 0.003	9.0 (238/2,656)	0.715 (0.610-0.838) <i>p</i> value 0.000
	No GLP-1 RAs	8.2 (5,929/72,518)		12.5 (320/2,554)	
Cerebrovascular Diseases	GLP-1 RAs	4.5 (157/3,451)	0.951 (0.814-1.112) <i>p</i> value 0.531	4.7 (143/3,019)	0.605 (0.494-0.740) <i>p</i> value 0.000
	No GLP-1 RAs	4.8 (3,628/75,870)		7.8 (232/2,963)	
Acute myocardial infarction	GLP-1 RAs	2.5 (91/3,593)	1.239 (1.006-1.526) <i>p</i> value 0.044	2.3 (72/3,145)	0.578 (0.434-0.769) <i>p</i> value 0.000
	No GLP-1 RAs	2.0 (1,587/77,621)		4.0 (124/3,130)	
Cerebral infarction	GLP-1 RAs	1.8 (67/3,648)	0.973 (0.763-1.240) <i>p</i> value 0.823	1.8 (58/3,191)	0.633 (0.457-0.876) <i>p</i> value 0.005
	No GLP-1 RAs	1.9 (1,467/77,690)		2.9 (91/3,168)	
Heart Failure	GLP-1 RAs	11.9 (451/3,791)	1.848 (1.688-2.023) <i>p</i> value <0.000	10.5 (348/3,303)	0.703 (0.618-0.799) <i>p</i> value 0.000
	No GLP-1 RAs	6.4 (5,071/78,772)		15.0 (495/3,303)	
Death	GLP-1 RAs	1.6 (59/3,778)	0.518 (0.401-0.670) <i>p</i> value <0.000	1.4 (47/3,291)	0.307 (0.222-0.425) <i>p</i> value 0.000
	No GLP-1 RAs	3.0 (2,371/78,674)		4.6 (153/3,292)	

Diagnóstico precoz e imagen

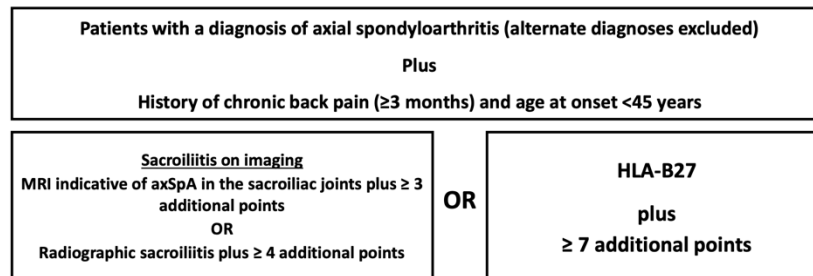
0540: Low-Dose CT reveals syndesmophyte progression in axial SpA, particularly in the thoracic spine: Insights from the SPACE cohort covering early and established disease

VU	Patients with new/growing syndesmophytes after 2 years				Spinal level
	Reader 1	Reader 2	Reader 3	Consensus	
1	0	1	3	0	C2-C3
2	1	1	1	1	C3-C4
3	1	0	1	1	C4-C5
4	2	0	1	1	C5-C6
5	1	0	2	0	C6-C7
6	3	0	5	3	C7-T1
7	0	1	2	0	T1-T2
8	3	0	4	1	T2-T3
9	4	2	9	4	T3-T4
10	6	2	6	4	T4-T5
11	5	1	6	4	T5-T6
12	6	4	6	5	T6-T7
13	10	4	11	8	T7-T8
14	7	5	7	5	T8-T9
15	6	2	14	4	T9-T10
16	7	2	8	2	T10-T11
17	6	0	11	5	T11-T12
18	5	2	8	5	T12-L1
19	5	2	5	5	L1-L2
20	2	2	3	2	L2-L3
21	4	4	4	4	L3-L4
22	1	0	1	1	L4-L5
23	3	1	2	2	L5-S1

Actualización criterios diagnósticos

0854: The Assessments in Spondyloarthritis International Society (ASAS) and Spondyloarthritis Research and Treatment Network (SPARTAN) Revised Classification Criteria for Axial Spondyloarthritis: Development and Validation in the Classification of Axial SpA Inception Cohort Study

2025 ASAS-SPARTAN Revised Classification Criteria for axSpA

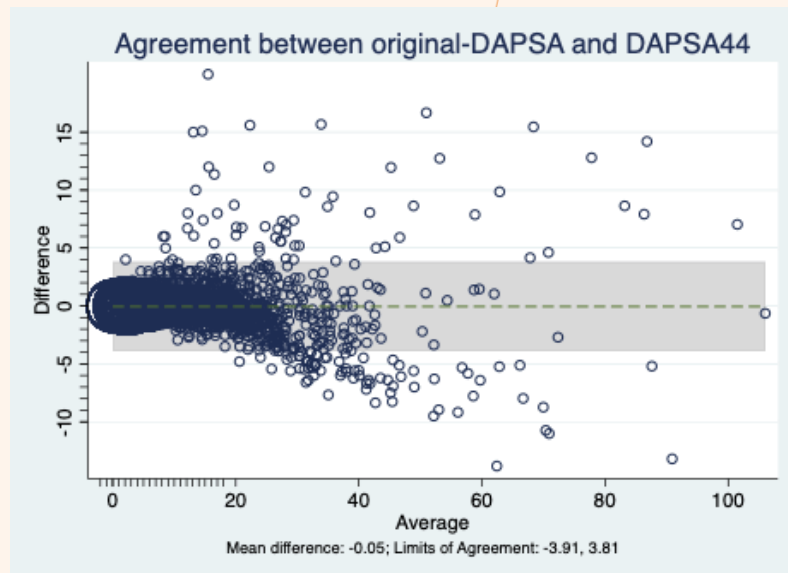


FEATURE	POINTS
HLA-B27 [#]	4
Inflammatory back pain ⁺	3
Peripheral arthritis	1
Inflammatory bowel disease	1
Acute anterior uveitis	1
Heel enthesitis	1
Elevated CRP (>5mg/L)	1
Psoriasis	1

HLA-B27 does not count twice

Nueva propuesta DAPSA

2332: Development and validation of a Disease Activity index for PSoriatic Arthritis based on 44 joints: DAPSA44



Acceso abierto: <https://www.sciencedirect.com/science/article/pii/S0003496725043262?via%3Dihub>

Metodología con Inteligencia Artificial

2354: ChatGPT or SPSS? A comparison between AI-based and Traditional Statistical Analysis of Longitudinal Inflammatory Marker Data in Spondyloarthritis

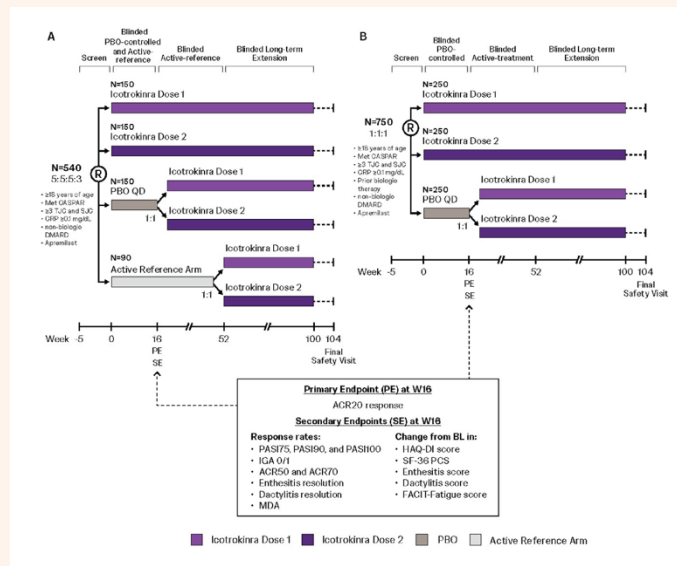
Table 1. Differences between SPSS and ChatGPT

Feature	SPSS	ChatGPT
Requires installation	Yes	No
Interface type	Graphical interface	Conversational interface
Type of analysis	Parametric and non-parametric tests	Prompt-guided and contextual analysis
Exact reproducibility	High	Variable (depends on prompt)
Assistance with interpretation	Limited	High (clinically contextualized)
Learning curve	Moderate	Low

Vídeo explicativo: <https://drive.google.com/file/d/1F55Vlb-TgwMLPOk1a3L5T2sJmFEaoKS/view?usp=drivesdk>

Terapias emergentes

0562: Icotrokinra (ICO), a Novel Targeted Oral Peptide, in Patients With Psoriatic Disease: Exploratory Assessments From a Phase 2 Psoriasis (PsO) Study Informing a Phase 3 Clinical Program in Psoriatic Arthritis (PsA)

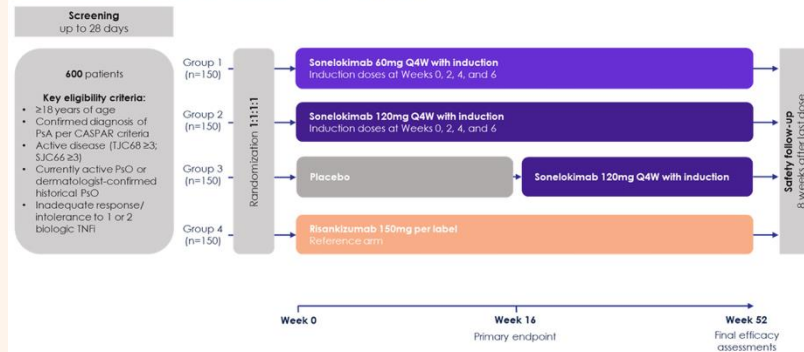


0567: Sonelokimab in Biologic-Experienced Patients With Active Psoriatic Arthritis: Results From a Phase 2 Trial (ARGO) and Study Design of a Phase 3 Trial (IZAR-2) in Patients With Inadequate Response or Intolerance to Biologic TNFi, Including a Risankizumab Reference Arm

Figure. Study design

IZAR-2 (NCT04641089)

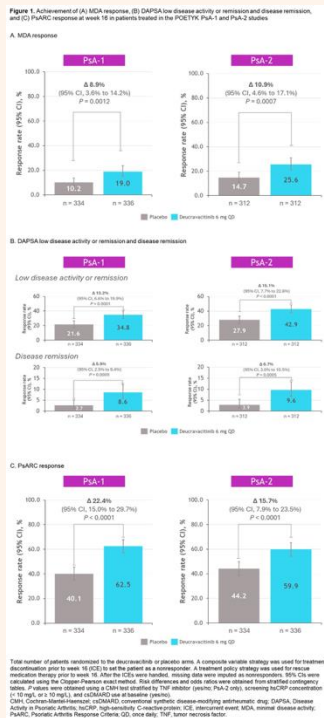
PsA with previous intolerance or inadequate response to biologic TNFi



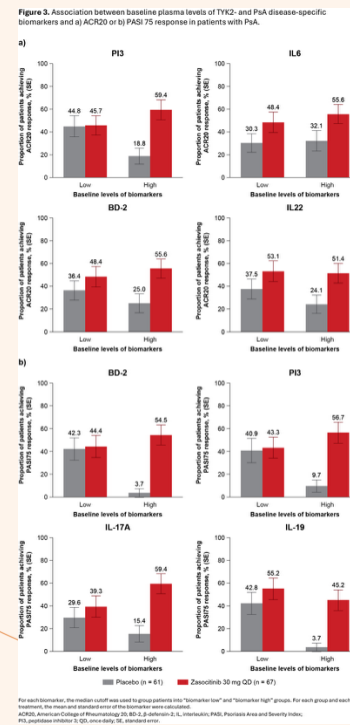
CASPAR, Classification Criteria for Psoriatic Arthritis; PsA, psoriatic arthritis; PsO, psoriasis; Q4W, every 4 weeks; SJC66, 66 swollen joint count; TJC68, 68 tender joint count; TNFi, tumor necrosis factor inhibitor.

Terapias emergentes

0874: Impact of Deucravacitinib on Disease Activity in Patients With Psoriatic Arthritis (PsA): Results From the Pivotal Phase 3 PsA Studies



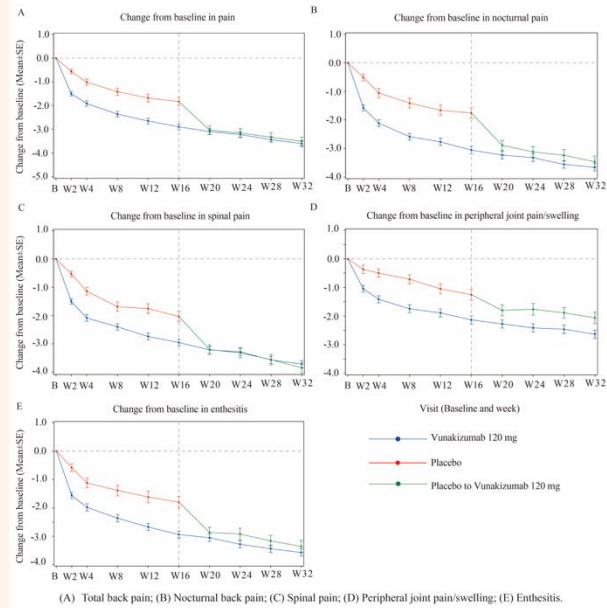
2351: Modulation of Tyrosine Kinase 2- and Disease-Related Biomarkers by Zascocitinib (TAK-279), an Oral, Allosteric, Highly Selective and Potent Tyrosine Kinase 2 Inhibitor, Is Associated With Clinical Response in Patients with Active Psoriatic Arthritis



Terapias emergentes

2376: Efficacy of Vunakizumab in Reducing Pain in Ankylosing Spondylitis: A Post-Hoc Analysis of a Phase 2/3 Clinical Trial

Figure 1. Pain Scores in the Placebo and Vunakizumab Groups from Baseline to Week 32.



Head-to-Head

LB06: AgAIN Study: First Head-to-Head Trial of Secukinumab vs. Ustekinumab in TNF α Inhibitor-Experienced Psoriatic Arthritis Patients Reveals Better Efficacy Across Multiple Domains

