

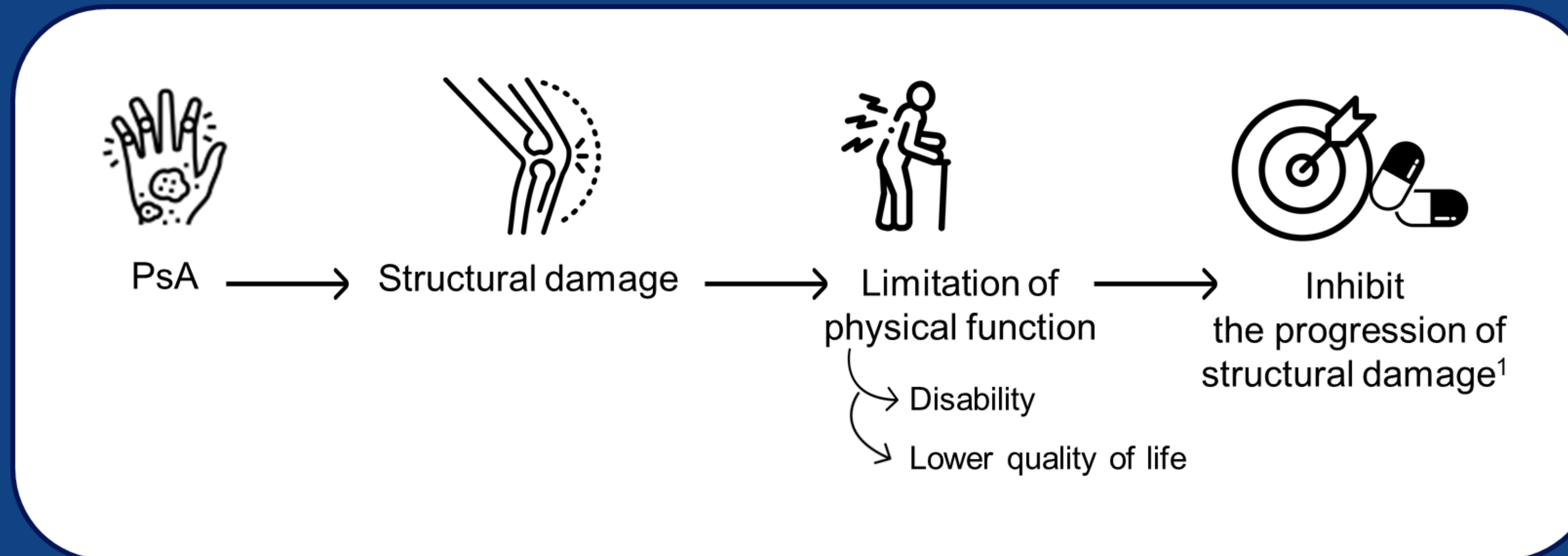
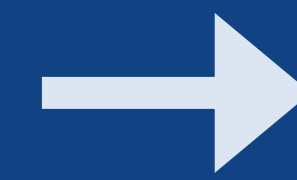
The Determinants of Radiographic Progression In Early PsA: A Longitudinal Analysis of the DEPAR Real-World Cohort



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Introduction

Persistent inflammation in Psoriatic arthritis (PsA) is associated with radiographic damage. Despite advances in diagnosis and therapy, radiographic structural damage is still prevalent in PsA (1).

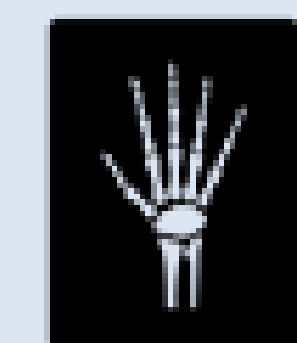
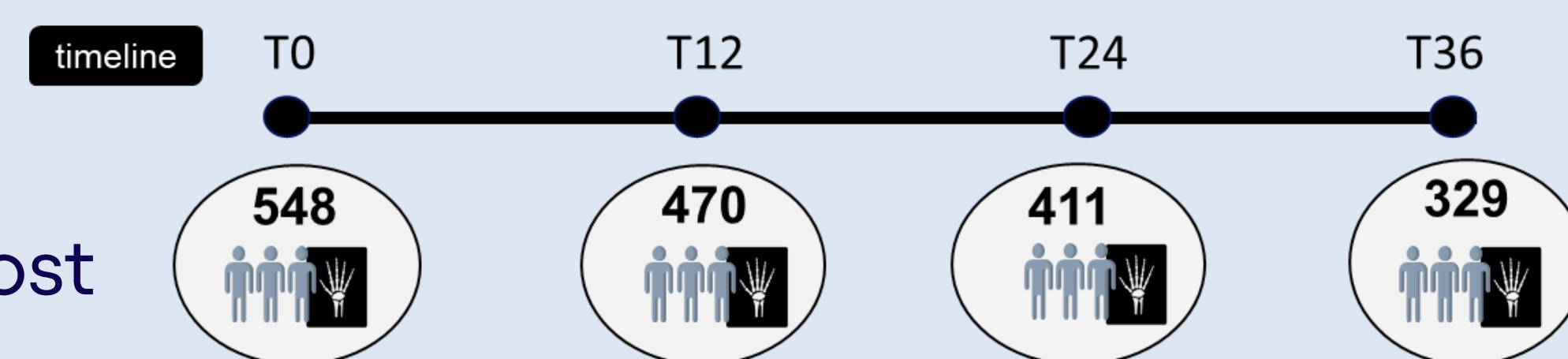


Objectives

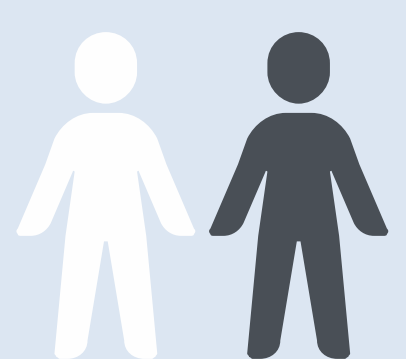
- to describe radiographic damage in early PsA patients in the first 3 years by using mTSS.
- to define baseline clinical determinants for radiographic progression in PsA in 3 years.

Methods

- The research is a post hoc analysis of the DEPAR study.



- mTSS (modified Sharp-Van der Heijde score)



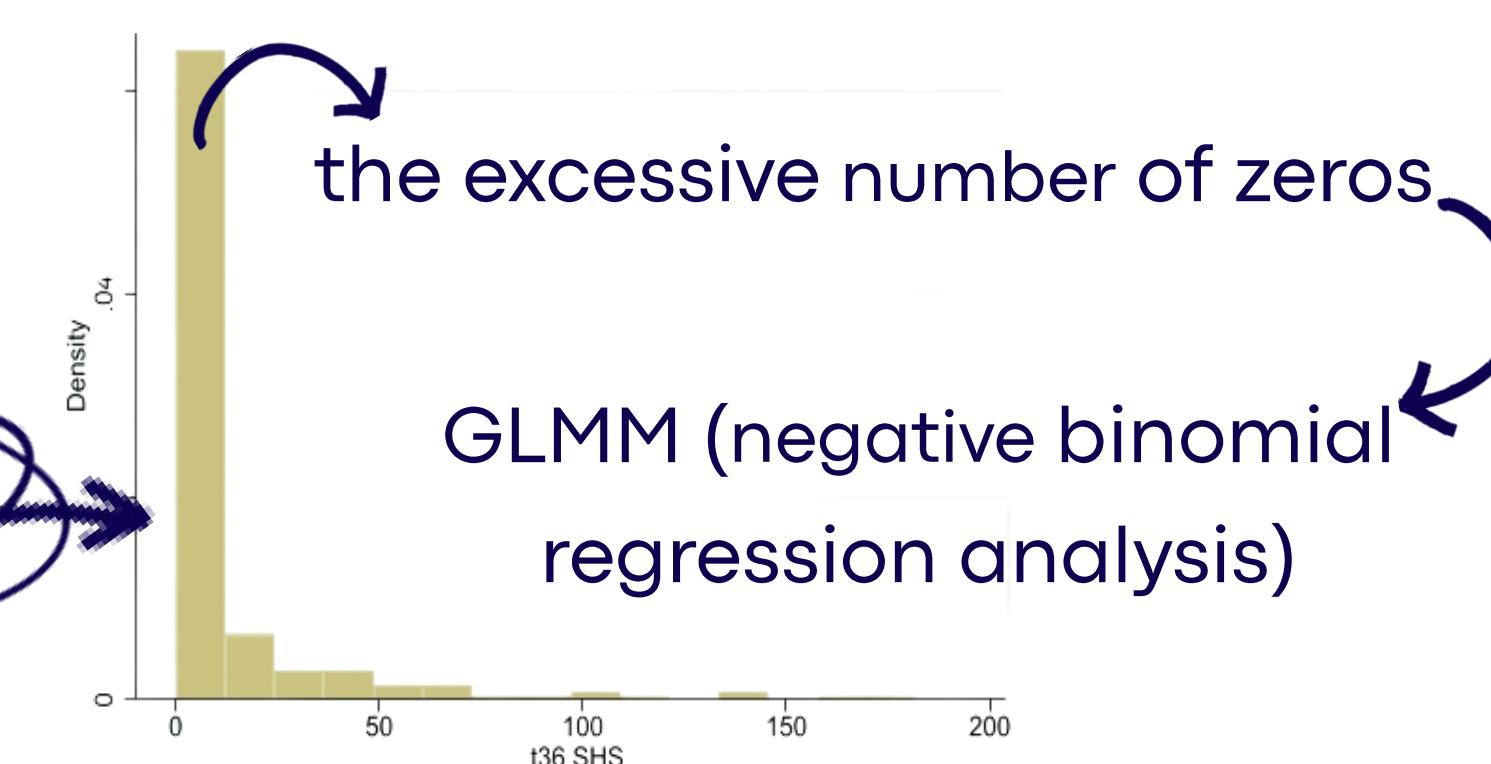
- The radiographic progression:
 - 1) a change in TSS > 0.07 (SDC)
 - 2) Any change in mTSSs to follow-up

Conclusion

According to this longitudinal real-world cohort, early PsA patients have low radiographic progressions with the current treatment protocols. Baseline clinical determinants for radiographic progression in 3 years are age, gender, and baseline radiographic changes.

References
1. van der Heijde D, Gladman DD, Kavanaugh A, Mease PJ. Assessing structural damage progression in psoriatic arthritis and its role as an outcome in research. Arthritis Res Ther. 2020 Feb 3;22(1):18. doi: 10.1186/s13075-020-2103-8. PMID: 32014044; PMCID: PMC6998345.

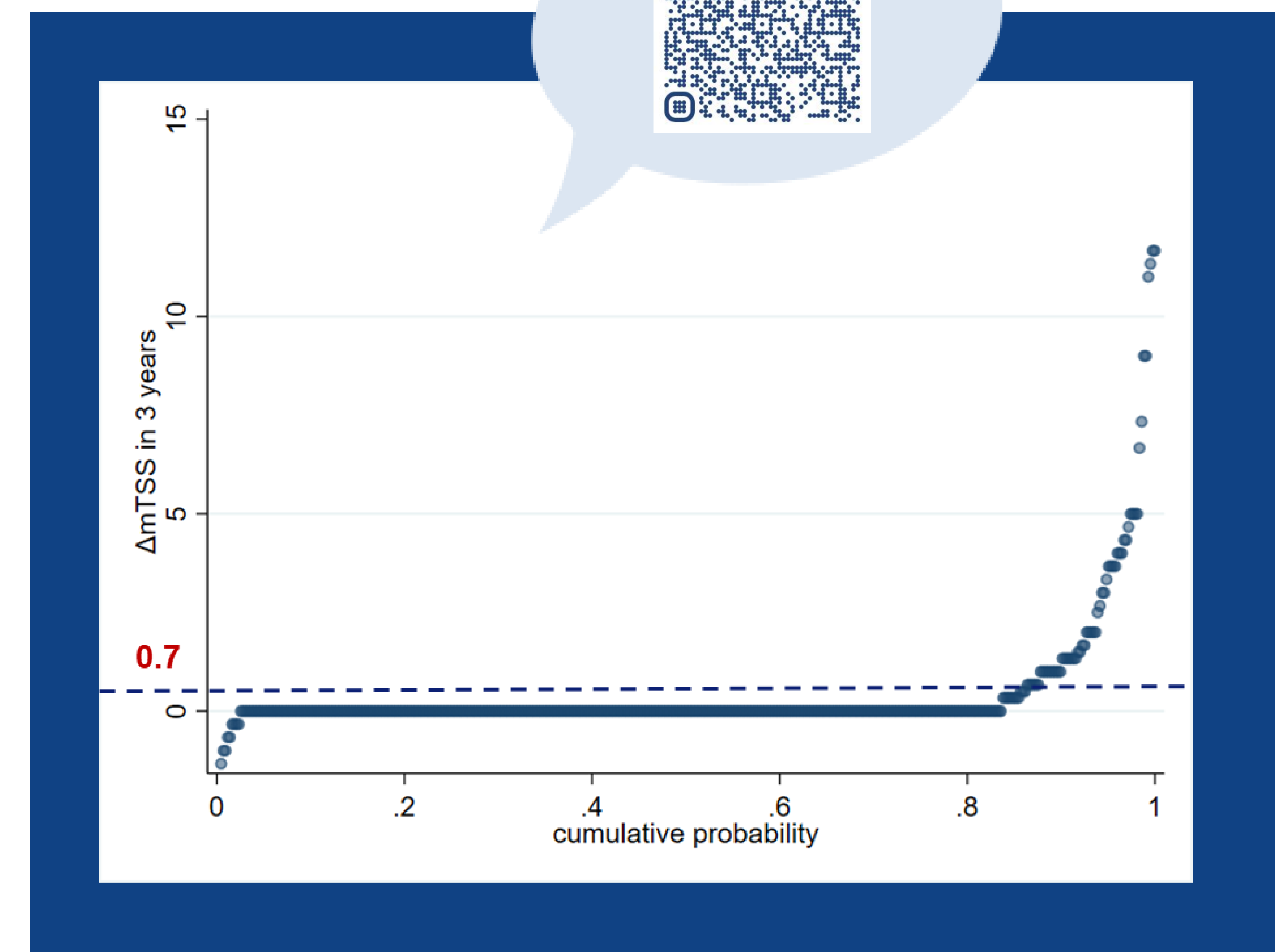
Analysis



Results

- The radiographic progression rate in the DEPAR cohort was found as **13%**.
- Significant baseline factors for radiographic changes:
 - From univariable analysis; **symptom duration, swollen joint count, skin severity index, general health, dactylitis, and baseline mTSS.**
 - From multivariable analysis; **age, gender, and baseline mTSS.**

scan here for more information:



DEPAR

