





PERSONAL INFORMATIONS

Michele M. Luchetti Gentiloni

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Gender Male | **Date of birth** 19/05/1963 | **Nationality** Italian

WORK EXPERIENCE	
From 1993 to 2000	Medical Hospital Doctor in the Department of Internal Medicine, Institute of Internal Medicine, Haematology and Clinical Immunology, "Umberto I - Torrette", University Clinic Regional Hospital, Ancona, Italy.
From 2000 to 31, oct, 2022	Assistant Professor in Internal Medicine, Institute of Internal Medicine, Dept. of Medical and Surgical Sciences, Polytechnic University of the Marche & University Clinic Regional Hospital "Umberto I - Torrette", Ancona, Italy.
From 1, nov, 2022 to present	Associate Professor in Internal Medicine , Institute of Clinical Medicine, Dept. of Medical and Surgical Sciences, Polytechnic University of the Marche & University Clinical Hospital, Ancona, Italy.
From 1, jan. 2013 to present	<ul style="list-style-type: none"> ▪ Head, Out-patients examination clinic of Internal Medicine and Rheumatology; ▪ Head of the Spondyloarthritis Clinic, Clinical Internal Medicine, "Azienda Ospedaliero Universitaria delle Marche", Ancona, Italy. ▪ Senior Consultant of the out-patients' examination clinic of Gastro-Rheumatology, IBD UNIT, "Azienda Ospedaliero Universitaria delle Marche", Ancona, Italy. ▪ Senior Consultant of the out-patients' examination clinic of Dermo-Rheumatology, "Azienda Ospedaliero Universitaria delle Marche", Ancona, Italy.
EDUCATION AND TRAINING	
1989	Degree in Medicine and Surgery, at the University of Medicine and Surgery of Ancona, Italy (final vote 110/110 cum laude).
1992	Fellowship in Internal Medicine, at the Institute of Internal Medicine, Haematology and Clinical Immunology of the University of Surgery and Medicine of Ancona, Italy.
From 1991 to 1993	Visiting Scientist in the Human Immunology Dept. – Unit of Molecular Biology and Cellular Differentiation (Head Prof. A. Mantovani) of the "Mario Negri Institute for the Research in Pharmacology", Milan, Italy.
1994	Specialization in Internal Medicine at the Institute of Internal Medicine, Haematology and Clinical Immunology of the University of Medicine and Surgery of Ancona, Italy (final vote 50/50 cum laude).

LANGUAGES					
Mother tongue(s)	ITALIAN				
Other language(s)	UNDERSTANDING		SPEAKING		WRITING
	Listening	Reading	Spoken interaction	Spoken production	
English	C2	C2	C2	C2	C1
Spanish	C2	C2	C2	C2	C2
Levels: A1/2: Basic user - B1/2: Independent user - C1/2 Proficient user Common European Framework of Reference for Languages.					

Selection since 2005	CLINICAL RESEARCH & SCIENTIFIC INTERNATIONAL BOARDS
1992	1. Grisar, Phase III, Clinical Trial for the safety and use of Ciclosporin, as investigator.
1993	2. Italian Antares Project, for the use and safety of Infliximab in Rheumatoid Arthritis, as investigator.
2003	3. European phase III Kineret Clinical Trial for the use and safety of Anakinra in Rheumatoid Arthritis, as investigator.
2005	4. European Gene Therapy phase II NVFGF-1 Trial, for the use and safety of the gene therapy with a

	plasmid coding FGF-1 in the Peripheral Vascular Obstructive Disease, as principle investigator and coordinator.
2005	5. Investigator in the Red de Enfermedad Inflamatoria Intestinal (IBDnet), Organismo: Fundación Instituto de Investigaciones en Ciencias de la Salud, Germans Trias i Pujol, Spagna.
2005	6. Research Grant of the Società Italiana di Reumatologia (SIR). Person in charge of the Research Unit. Project: Un nuovo approccio terapeutico per la sclerodermia: la terapia genica.
2012-2016	7. Project "Studio del ruolo degli anticorpi anti-recettore del PDGF nella fibrosi nel modello di topo...". In collaboration with Prof. Marcela Del Rio and Fernando Larcher, CIEMAT, Madrid, Spagna.
2018-2021	8. Principal investigator. Clinical Study Protocol M15-554. A Phase 3, Randomized, Double-Blind, Study Comparing ABT-494 to Placebo in Subjects with Active Psoriatic Arthritis Who Have a History of Inadequate Response to at Least One Biologic Disease Modifying Anti-Rheumatic Drug (bDMARD) –SELECT–PsA. EudraCT 2016-004152-30.
2018-2021	9. Principal investigator. Clinical Study Protocol M15-572. A Phase 3, Randomized, Double-Blind, Study Comparing ABT-494 to Placebo and to Adalimumab in Subjects with Active Psoriatic Arthritis Who Have a History of Inadequate Response to at Least One Non-Biologic Disease Modifying Anti-Rheumatic Drug (DMARD)–SELECT–PsA 1. EudraCT 2016-004130-24.
2018-2020	10. Principal investigator. SIRENA - Spondyloarthritis Italian Registry: Evidence from a National pAthyway. Study number CNTO1275PSA4006 (italian registry NA).
2018-2020	11. Italian Coordinator of the Italian Multicentric Study , GRADES-IBD (GRoup for the vAlidation of the DEtail in Spondyloarthritis/Inflammatory Bowel Disease).
2019 to present	12. Principal investigator of the Italian Coordinator Group of the Clinical Study Protocol M15-998. A Phase 3, Randomized, Double-Blind Study Comparing Risankizumab to Placebo in Subjects with Active Psoriatic Arthritis Including Those Who Have a History of Inadequate Response or intolerance to Biologic Therapy(ies). EudraCT: 2017-002464-40.
2019 to present	13. Principal investigator of the Italian Coordinator Group of the Clinical Study Protocol M16-011. A Phase 3, Randomized, Double-Blind, Study Comparing Risankizumab to Placebo in Subjects with Active Psoriatic Arthritis (PsA) Who Have a History of Inadequate Response to or Intolerance to at Least One Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy EudraCT: 2017-002465-22.
2019-2022	14. Scientific Board of the Axial Group for the 2021 Guidelines of the GRAPPA (Group for Research and Assessment of Psoriasis and Psoriatic Arthritis, https://grappanetwork.org).
2019-2022	15. Scientific Board of the Extra-articular Manifestations Group for the 2021 Guidelines of the GRAPPA (Group for Research and Assessment of Psoriasis and Psoriatic Arthritis, https://grappanetwork.org).
2022 to present	16. Principal investigator RCT Phase 4, Multicenter, Randomized, Double-blind, Placebo-controlled Study Evaluating the Efficacy and Safety of Guselkumab Administered Subcutaneously in Bio-naive Participants with Active Psoriatic Arthritis Axial Disease. EudraCT NUMBER: 2021-000465-32.
2022-2024	17. Principal Investigator Observational Study UPARAREMUS "Clinical and ultrasonography remission in bio-naïve and bio-failure RA patients with moderate to high disease activity, treated with upadacitinib: a real life study".
2022-24	18. Principal Investigator-Coordinator Centre Observational Study UPREAL: "Upadacitinib effectiveness and factassociated with minimal disease activity achievement in patients with psoriatic arthritis: preliminary data of a real-life multicenter study". Studio clinico multicentrico nazionale italiano.
2022-2024	19. Principal Investigator Axial Involvement in Psoriatic Arthritis cohort (AXIS): the protocol of a joint project of the Assessment of SpondyloArthritis international Society (ASAS) and the Group for Research and Assessment of Psoriasis and Psoriatic Arthritis (GRAPPA). ClinicalTrials.gov ID: NCT04434885.
2022 to present	20. Principal Investigator PSA 360°: Beyond Psoriatic Arthritis Standard Of Care. Observational Study on the Role of Gusekumab in the treatment of Psoriatic Arthritis.
2023 to present	21. Principal Investigator CAIN45712401: A multicenter study of secukinumab, with a randomized double-blind, placebo-controlled withdrawal-retreatment period to evaluate maintenance of response in participants with non-radiographic axial spondyloarthritis who achieved remission. Clinical Trial Protocol Number: NCT05622708.
2024 to present	22. Scientific Board of the AXIAL Group for the Guidelines of the GRAPPA (Group for Research and Assessment of Psoriasis and Psoriatic Arthritis, https://grappanetwork.org).
2024 to present	23. Principal Investigator: Route Study. Observational Study on the efficacy and retention rate of Ixekizumab in patients with psoriatic arthritis.
2024 to present	24. Principal Investigator: PERIS: Prospective multi-country, real-world, multi arm study of treatment PErsistence with RISankizumab in Psoriatic Arthritis
2025	25. Principal Investigator: ICONIC. A Phase 3, Multicenter, Randomized, Double-blind, Placebo-controlled Study Evaluating the Efficacy and Safety of JNJ-77242113 for the Treatment of Biologic-experienced Participants with Active Psoriatic Arthritis. EUDRA CT/CTIS number: 2024-517284-23.
2025	26. Principal Investigator: LATITUDE. A Study of Zasocitinib (TAK-279) in Adults With Psoriatic Arthritis Who Have Not Taken Biologic Medicines. NCT06671483.
2025	27. Principal Investigator/Italian Coordinating Centre: Composition Study, GRAPPA.

GRANTS

<p>2000. Grant from the Telethon Organizationa, Italy. Telethon Project n. 0822: "Ruolo dei protooncogeni c-myb e B-myb nella regolazione dei geni del collagene".</p> <p>2002. Genethon project n. 0182, 5-7-2002 : "Tissue-targeted anti-fibrotic gene-therapy using antisense c-myb gene driven by the promoter of the human type I collagen gene". GENETHON, Francia.</p> <p>2005. Programmi di ricerca scientifica di rilevante interesse nazionale (PRIN)(Scientific research programs of significant national interest). PI of the Research Unit. Project: Development of an RNA-interference model, using plasmids and aav-2 viral vectors, for the study of the molecular mechanisms and gene therapy of fibrosis</p> <p>2005. "The cytokine pattern at the onset of rheumatoid arthritis and cytokine modifications induced by the therapy with Etanercept", EudraCT number 2005-003218-13.</p> <p>2005. Research Grant of the Società Italiana di Reumatologia (SIR). PI. Project: Un nuovo approccio terapeutico per la sclerodermia: la terapia genica.</p> <p>2006. Research Grant. "To determine the basis for reduced fibrosis and improved scar formation in c-myb heterozygous skin". Children Research Foundation (Australia), In collaboration with Allison Cowin, Dept. Tissue Development and Repair, Child Health Research Institute, 72 King William Road, North Adelaide, Australia.</p> <p>2014-17. Grant of the Swiss Health National System. The role of the diet in the development of neoplastic diseases. In collaboration with Prof. Roberto Coppari, Dip. di Anatomia, Università di Medicina di Ginevra, Svizzera.</p> <p>2020-24. IIS Grant from AbbVie, Chicago, USA. Evaluation of sclerostin and anti-sclerostin serum levels, gut epithelial impairment and microbial translocation in patients with psoriatic arthritis with or without axial involvement</p>

TEACHING (see page 7 for Mentor Experience)	Since 1995, MMLG has been teaching in many medical courses at the Faculty of Medicine and mentoring residents of the Internal Medicine Residency Programme at the Polytechnic University of the Marche Region, Italy.
From 2024 to present	▪ Professor in Medical Pathology, at the University Medical School of the Marche Polytechnic University (Ancona, Italy).
From 2013 to 2024	▪ Professor in Emergency Medicine, at the University Medical School of the Marche Polytechnic University (Ancona, Italy).
From 2013 to present	▪ Professor in Internal Medicine, at the University School of Nursing Formation, of the Marche Polytechnic University (Ancona, Italy).
From 2002 to present	▪ Professor in Internal Medicine, at the University School of Nursing Formation, of the Marche Polytechnic University (Ancona, Italy).
From 2003 to 2013	▪ Lecturer in Clinical Innovative Pharmacology, at the School of Specialization of Internal Medicine, Marche Polytechnic University (Ancona, Italy).
From 2010 to 2024	▪ Lecturer in Emergencies in Internal Medicine, at the University School of Nursing Formation (Fermo pole), of the Marche Polytechnic University (Ancona, Italy).
From 2003 to 2013	▪ Professor in Resuscitation and Emergencies in Internal Medicine, at the University School of Technicians and Safe in the Working Places, of the Marche Polytechnic University (Ancona, Italy).
From 2010 to 2013	▪ Lecturer in Molecular Biology Techniques in Internal Medicine, at the School of Specialization in Laboratory Techniques, of the Marche Polytechnic University (Ancona, Italy).
2001-2003	▪ Lecturer in Allergology and Clinical Immunology, at the University School of Nursing Formation, of the Marche Polytechnic University (Ancona, Italy).
2001-2003	▪ Lecturer in Molecular biology methods for the study of promoter's regulation, at the Master in Biotechnologies, University of Urbino, Urbino (PS), Italy.
From 2003 to 2005	▪ Lecturer in Genetherapy methods and approaches, at the Master in Biotechnologies, University of Urbino, Urbino (PS), Italy.
From 2003 to 2005	▪ Lecturer in Rheumatology and Autoimmune diseases, at the University School of Fisiokinesitherapy, of the Marche Polytechnic University (Ancona, Italy).
From 2001 to 2005	▪ Lecturer in Rheumatology and Autoimmune diseases, at the University School of Nursing Formation, of the Marche Polytechnic University (Ancona, Italy).
From 2001 to 2005	▪ Lecturer in Internal Medicine, at the School of Specialization of Fisiokinesitherapy, of the Institute of Neurology, Marche Polytechnic University (Ancona, Italy).

AWARDS-MEMBERSHIP-EDITORIAL BOARDS

1993. A.I.L. (Associazione Italiana contro le Leucemie) award for his research in the field of the neoplastic haematological disorders.
2005. Best Basic Research Abstract Award, European Rheumatologist Conference (EULAR), Wien, Austria.
2006. Case Study Competition Winner, in "Advancing arthritis therapy: addressing patients needs", Seville, Spain.
2013. Member of the Committee/Regional Coordinator of the "Società Italiana di GastroReumatologia" (SIGR)
2017. Invited Overseas Fellow of the "Royal Society of Medicine" (RSM), Royal Society of Medicine, London, UK, www.rsm.ac.uk .
2018. Member of the Editorial Board of the "Journal of Clinical Medicine" (MDPI).
2018. Member of the Directory Board of the "Società Italiana di Gastroreumatologia". http://sigr.it
2019. GRAPPA membership (Group for Research and Assessment of Psoriasis and Psoriatic Arthritis, https://grappanetwork.org) and the members of the board selected for the 2020 GRAPPA guidelines.

2020. ASAS membership (Assessment of Spondyloarthritis International Society)
2021. Associate Editor "Frontiers In Immunology". https://www.frontiersin.org
2022- SIR (Società Italiana Reumatologia)
2022- Gruppo di Studio (GDS) Antonio Spadaro , belonging to SIR (Società Italiana Reumatologia), focused on the research in psoriatic arthritis.
2023. EULAR membership (European League Against Rheumatism)
2023. Knight of the Italian Republic , for merits related to Healthcare during the COVID-19 Pandemic 2020-21

PUBLICATIONS
(selected since 2005)

See also: <http://scholar.google.it/citations?user=eFCgMVMAAAAJ&hl=it>
https://www.researchgate.net/profile/Michele_Luchetti/publications/?ev=prf_pubs_p2
H-Index= 28 (Scopus).

1. Impiego didattico delle simulazioni cliniche simulate con il calcolatore: le perdite di coscienza reversibili. A Salvi, G Pomponio, MM Luchetti, N Foschi, G Giuliani. *Medicina ed Informatica*,7(2), 57-62,1990.
2. Interleukin 2, soluble interleukin 2 receptor and tumor necrosis factor in sera from patients with rheumatoid arthritis. A Corvetta, MM Luchetti, G Pomponio, R Della Bitta, A. Recchioni, P Strusi, G De Sio, G Danieli. *Res Clin Lab* 20 (4): 275, 1990. IF = 2.107
3. Hypertext application and clinical simulation: innovative approaches in computer aided teaching of Medicine. A Corvetta, G Pomponio, A Salvi, MM Luchetti, FJ Leven in: O Rienhoff, DAB Lindberg (ed): *Lecture notes in Medical Informatics*, Springer-Verlag, 406-410, 1990.
4. Cyclosporin A in rheumatoid arthritis. Angelo Corvetta, Giovanni Pomponio, Ruggero Della Bitta, Patrizio Litargini, Michele Maria Luchetti. *Quad March Med* 2, 61-63, 1990.
5. Tenoxicam and ketoprofen level monitoring with high-performance liquid chromatography in patients affected by rheumatoid arthritis. A Corvetta, R. Della Bitta, M.M. Luchetti, G. Pomponio, V. Ciuffoletti. *Clin Exp Rheumatol* 9(2), 143-148, 1991. IF = 1.504.
6. 5-methylcytosine content of DNA in blood and synovial mononuclear cells and in synovial tissue from patients affected by rheumatic autoimmune disease. A Corvetta, R. Della Bitta, M.M. Luchetti, G. Pomponio. *J Chromatography*, 566 (2): 481-491, 1991. IF = 3.359
7. Effect of high-doses intravenous immunoglobulin in rheumatoid arthritis. A Corvetta, M.M. Luchetti, G. Pomponio, P.J. Spaeth, G. Danieli In: *Immunotherapy with Intravenous Immunoglobulin*. P. Imbach (ed.). Academic Press Ltd, 1991, pag. 283-295.
8. Teaching medicine using hypertexts: three years of experience at the Ancona Medical School. A Corvetta, G. Pomponio, M.M. Luchetti, A. Salvi *Artif Intell Med* 3, (4),203-209, 1991. IF = 1.124.
9. Cyclosporin in rheumatoid arthritis. A Corvetta, G. Pomponio, M.M. Luchetti, G. Danieli. In: Bonomo L. (ed.) : *Cyclosporin in autoimmune*
10. Casi clinici simulati al computer di perdite di coscienza reversibili (PCR): un'esperienza di formazione per la guardia medica. G. Giuliani, N. Foschi, G. Pomponio, A. Salvi, M.M. Luchetti. *Riv Neurobiologia* 36 (2), 143-148, 1990.
11. Low number of complement C3B/C4B receptors (CR1) on erythrocytes from patients with essential mixed cryoglobulinemia, systemic lupus erythematosus and rheumatoid arthritis. A Corvetta, G. Pomponio, R. Bencivenga, M.M. Luchetti, M. Spycher, P.J. Spaeth, G. Danieli. *J Rheumatology* 18 (7), 1021, 1991. IF = 2.86.
12. La place des immunoglobulines dans le traitement des collagenoses. A Corvetta, G. Pomponio, M.M. Luchetti, N. Rinaldi e G. Danieli *Med et Hyg* 49, 1325-1332, 1991. IF = 2.01
13. Cyclosporin A leads to a drop in the DNA 5-methylcytosine content of peripheral blood mononuclear cells from patients affected by rheumatoid arthritis. A Corvetta, M.M. Luchetti, G. Pomponio, N. Rinaldi, A. Salvi, G. Danieli. *J Immunol Res* 4 (1), 16-20, 1992. IF = 1.05
14. MR imaging of rheumatoid hand lesions: comparison with conventional radiology in 31 patients. A Corvetta, A. Giovagnoni, S. Baldelli, P. Ercolani, G. Pomponio, M.M. Luchetti, N. Rinaldi, E. De Nigris. *Clin Exp Rheumatol* 10: 217-222, 1992. IF = 2.973
15. Therapeutic approach with IVIG in patients affected by connective tissue disease. A Corvetta, M.M. Luchetti, G. Pomponio, N. Rinaldi and P.J. Spaeth. *Transfusion Sci*13: 3, 1992 IF = 3.708
16. Terminal complement complex in synovial tissue from patients affected by rheumatoid arthritis, osteoarthritis and acute joint trauma. A Corvetta, G. Pomponio, N. Rinaldi, M.M. Luchetti, C. Di Loreto, D. Stramazzotti. *Clin Exp Rheumatol* 10: 433-438, 1992. IF = 2.973
17. Criteri di scelta nell'uso degli antibiotici. A Corvetta, G Pomponio, MM Luchetti, N Rinaldi. *Adria Medica*, 8: 9-21, 1993.

18. Impiego di ambienti ipermediali nella didattica medica. G. Pomponio, A. Corvetta, M. Fratini, M.M. Luchetti, G. Danieli *Adria Medica*, vol. 10, 99-107, 1994.
19. The Myb oncogene family of transcription factors: potent regulators of hematopoietic cells proliferation and differentiation. M. Introna, M.M. Luchetti, M. Castellano, M. Arsura, J. Golay. *Seminars In Cancer Biology*, vol. 5, 113-124, 1994. IF = 9.143
20. Dissociation between p93-B-myb and p75-c-myb expression during proliferation and differentiation of human myeloid cells lines. M. Arsura, M.M. Luchetti, E. Erba, J. Golay, A. Rambaldi, M. Introna. *Blood*, 83:7, 1994. IF =9.775.
21. La PCR (reazione a catena della polimerasi) e la medicina molecolare: una nuova era della medicina. A. Gabrielli, Michele M. Luchetti, G. Piccinini. *Rivista degli Ospedali di Ancona "Meridiana"*, 2: 2, 1995
22. C-myb proto-oncogene is expressed by quiescent scleroderma fibroblasts and, unlike B-myb gene, does not correlate with proliferation. G. Piccinini, M.M. Luchetti, M.L. Caniglia, A.M. Carossino, M. Montroni, M. Introna, and A. Gabrielli. *J Invest Dermatol*, 106:1281-1286, 1996. IF = 6.372
23. c-myb, but not B-myb, upregulates $\alpha 1(I)$ and $\alpha 2(I)$ collagen gene expression in fibroblasts. Piccinini G, Golay J, Flora A, Songia S, Luchetti M, Gabrielli A, Introna M. *J Invest Dermatol* 112, 191-196, 1999. IF = 6.372
24. Monocytes of patients with systemic sclerosis (scleroderma) spontaneously release in vitro increased amounts of superoxide anion. Sambo P, Jannino L, Donini M, Candela M, Salvi A, Dusi S, Gabrielli A. *J Invest Dermatol* 112, 78-84, 1999. IF = 6.372
25. Expression of c-myb and B-myb oncogenes on myelofibrotic marrow fibroblasts. Scortechini AR, Rupoli S, Piccinini G, Luchetti MM, Cantori I, Gabrielli A, Leoni P. *Leukemia and Lymphoma* 1-10, 1998. IF = 2.605
26. Reduction of bcl-2 in T-cells during immunosuppressive therapy in patients with severe juvenile onset systemic lupus erithematosus. F. Falcini, C. Azzari, Amg Gelli, M. Luchetti, A. Gabrielli, A. Calzolari, A. Pignone, S. Generini, M. Mattucci Cerinic. *Clinical Immunology*, Vol. 93, No.1, October, 1999. IF = 3.034
27. Expression and production of the long pentraxin PTX-3 in rheumatoid arthritis. Luchetti M M, Piccinini G, Introna M, Peri G, Matteucci C, Pomponio G, Fratini M, Fraticelli P, Montroni M, Mantovani A, Gabrielli A. *Clinical and Experimental Immunology*, 119:196-202, 2000. IF = 3.278
28. Oxidative stress in scleroderma: Maintenance of scleroderma fibroblast phenotype by the constitutive up-regulation of free radical generation through the Nadph-oxidase complex pathway. Sambo P, Svegliati S, Luchetti M, Paroncini P, Orlandini G, Dusi S, Gabrielli A. *Arthritis Rheum* 44: Nov 2001. IF = 7.871
29. Characterization of the myb-responsive region of the human $\alpha(2)$ type I collagen gene. Luchetti MM, Paroncini P, Majlingovà P, Frampton J, Mucenski M, Svegliati Baroni S, Sambo P, Golay J, Introna M, and Gabrielli A. *J Biol Chem* 278,3, 1533-1541, 2003. IF = 4.6
30. A new HLA-DRB1*11 allele, DRB1*1144, identified by cloning and sequencing. S. Nesci, O. Buffi, A. Iliescu, M. Luchetti, M.R. Battarra, M. Amadei, G. Visani, M. Andreani. *Tissue Antigens*, 63, 282–283, 2004. IF = 1.99
31. Scleroderma fibroblasts constitutively express the long pentraxin PTX3. M.M. Luchetti, P. Majlingovà, P. Sambo, S. Svegliati Baroni, P. Paroncini, A. Stoppacciaro, G. Peri, M. Introna, A. Mantovani, A. Gabrielli. *Clin Exp Rheumatol*, 22, 66-72, 2004. IF = 2.973
32. Reversible transdifferentiation of secretory epithelial cells into adipocytes in the mammary gland M. Morroni , A. Giordano, M.C. Zingaretti, R. Boiani, R. De Matteis, B. B. Kahn, E. Nisoli, C. Tonello, C. Pisoschi, M.M. Luchetti, M. Marelli, and S. Cinti. *PNAS* 30, 101, 16801–16806, 2004. IF = 10.452.
33. Platelet-derived Growth Factor and Reactive Oxygen Species (ROS) Regulate Ras Protein Levels in Primary Human Fibroblasts via ERK1/2. Amplification of ros and ras in systemic sclerosis fibroblasts. Silvia Svegliati, Raffaella Canello, Paola Sambo, Michele Luchetti, Paolo Paroncini, Guido Orlandini, Giancarlo Discepoli, Roberto Paterno, Mariarosaria Santillo, Concetta Cuzzo, Silvana Cassano, Enrico V. Avvedimento, and Armando Gabrielli. *J Biol Chem* 280,43, 36474–36482, 2005. IF = 4.6
34. A novel HLA-Cw*16 allele, Cw*160102, identified by cloning and sequencing. S. Nesci, A. Iliescu, O. Buffi, T. SisTA, M.M. Luchetti, A. Gabrielli, G. Rinaldi. *Tissue Antigens*, 65, 580–581, 2005. IF = 2.35
35. Identification of a novel human DRB1*13 allele by sequence-based DRB typing. L. Caggiari, M.P. Simula, A. Marzotto, A. Caragnano, M. Luchetti, A. Gabrielli, V. De Re. *Tissue Antigens* 66: 246–247, 2005. IF= 2.35
36. Stimulatory auto-antibodies to the PDGF receptor in Systemic Sclerosis (scleroderma). Silvia Svegliati Baroni, Mariarosaria Santillo, Federica Bevilacqua, Michele Luchetti, Tatiana Spadoni, Matteo Mancini, Paolo Fraticelli, Paola Sambo, Andrius Kazlauskas, Enrico V. Avvedimento and Armando Gabrielli. *New England Journal of Medicine* 354,25, 2667-2676, 2006. IF = 38.57
37. HLA-B*4904, a new allele identified in two unrelated individuals from the same Italian region. Nesci S., Buffi O., Iliescu A., Scalari P., Luchetti M.M. *Tissue Antigens*, 70, 89–90, 2006. IF = 2.35
38. Collagen loss and impaired wound healing is associated with c-Myb deficiency. Kopecki Z, Luchetti M, Adams D, Strudwick X, Mantamadiotis T, Stoppacciaro A, Gabrielli A, Ramsay R, Cowin A. *J Pathol*, 211(3):351-61, 2007. IF = 8
39. Stimulatory autoantibodies to PDGF receptor in patients with extensive chronic graft-versus-host disease. Svegliati S, Olivieri A, Campelli N, Luchetti M, Poloni A, Trappolini S, Moroncini G, Bacigalupo A, Leoni P, Avvedimento EV, Gabrielli A. *Blood*, 1;110(1):237-41, 2007. IF = 9.775
40. Stimulatory autoantibodies to the PDGF receptor: A link to fibrosis in scleroderma and a pathway for novel therapeutic targets. Gabrielli A, Svegliati S., Moroncini G., Luchetti M., Tonnini C., Avvedimento E.V. *Autoimmunity Rev* 7:121–126, 2007. IF 5.792.

41. Microcirculatory effects of the transfusion of leukodepleted or non-leukodepleted red blood cells in patients with sepsis: a pilot study. Donati A, Damiani E, Luchetti M, Domizi R, Scorcella C, Carsetti A, Gabbanelli V, Carletti P, Bencivenga R, Vink H, Adrario E, Piagnerelli M, Gabrielli A, Pelaia P, Ince C. *Crit Care* 17;18(1), 2014. IF: 5.04.
42. Diet-induced unresolved ER-stress hinders KRAS-driven lung tumorigenesis. Ramadori G., Konstantinidou G., Venkateswaran N., Biscotti T., Morlock T., Galié M., Williams N.S., Luchetti M., Santinelli A., Scaglioni P.P., and Coppari R. *Cell Metabolism* 21, 6, 117-125, 2015. IF: 17.878.
43. Successful treatment of a Caucasian case of multifocal Castleman's disease with TAFRO syndrome with a pathophysiology targeted therapy - a case report. Tedesco S, Postacchini L, Manfredi L, Goteri G, Luchetti MM, Festa A, Gabrielli A, Pomponio G. *Exp Hematol Oncol*. 2015 Jan 14;4(1). I.F. 3.5
44. Plasma free hemoglobin and microcirculatory response to fresh or old blood transfusions in sepsis. Damiani E, Adrario E, Luchetti MM, Scorcella C, Carsetti A, Mininno N, Pierantozzi S, Principi T, Strovegli D, Bencivenga R, Gabrielli A, Romano R, Pelaia P, Ince C, Donati A. *PLoS One*. 2015 May 1;10(5). IF: 3.534.
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MENTORSHIP PERSONAL EXPERIENCE AND SITE OFFERINGS FOR THE MENTEE

Since earning my degree in 1989, I have been engaged in both basic and translational research, working in laboratories while also balancing clinical activities.

In this regard, I have been working in the rheumatology clinics of my ward (Clinica Medica), thereby gaining experience in managing three rheumatology clinics specialised in spondyloarthritis.

I genuinely believe I am a strong candidate for this application because, in my academic role, I have gained extensive experience as a mentor, tutoring university students and residents from various specialisations for at least 25 years, and I can meet all the requirements outlined in the GRAPPA call.

In particular, during my teaching and tutoring activity:

- I have personally tutored all 45 residents of the Internal Medicine Residency Programme
- Since 1995, I have supervised 8-10 residents/year in the Internal Medicine Residency Programme, enrolled in the Spondyloarthritis Clinic, overseeing their clinical and research activities in spondyloarthritis and psoriatic arthritis.

- I have mentored 115 residents of the Internal Medicine Residency Programme in preparing their Degree Research Thesis in the field of spondyloarthritis research.
- I have mentored 65 students in preparing their degree theses at the Faculty of Medicine.

WHAT MAY I OFFER TO A PUTATIVE MENTEE?

DESCRIPTION OF SITE OFFERINGS.

Clinica Medica is a university clinical ward located in the Faculty of Medicine and Surgery of the Polytechnic University of the Marche Region (https://www.univpm.it/Entra/Universita_Politecnica_delle_Marche_Home/L/1) (Fig. 1) and I carry out all my clinical activities in the hospital named Azienda Ospedaliero Universitaria delle Marche (ex-Umberto I-Lancisi hospital) (<https://portale.ospedaliriuniti.marche.it/>)(Fig.1). The hospital has been listed in the best 10 italian hospital by the institutional governative agency Agenas in the 2025.



Figure 1. Faculty of Medicine and Surgery of the Polytechnic University of the Marche Region (on the left, orange-white) and Azienda Ospedaliero Universitaria delle Marche, Italy (all the buildings on the back).

Both are located next the city of Ancona, a nice historic town lying in front of the Adriatic sea (Fig. 2, and the video <https://www.youtube.com/watch?v=j0KrJ65Taoc>).



Figure 2. The Ancona town. In front, the Romanic cathedral and the port (on the right). On the back, the downtown.

In this clinical setting, I am currently leading and mentoring a team of Internal Medicine residents who work in the Spondyloarthritis (SpA) Clinics and are well-known within the Committee because they are all Y-GRAPPA members and have been actively involved in numerous poster presentations at conferences and other GRAPPA activities.

The spondyloarthritis clinic evaluates about 30 new patients a week and has in follow-up about 2000 patients affected by psoriatic arthritis or spondyloarthritis. Among patients in follow-up, about 45 are routinely evaluated in the clinic each week, excluding new patients or patients affected by the acute disease phase.

All patients' data are collected during each clinical examination using an eCRF supported by REDCap software (<https://project-redcap.org/>), which was specifically designed and developed by the senior investigator of the SpA Clinic (Dr Paci V.).

The Musculoskeletal Ultrasound (USD) Clinic, led by Dr Paci V, is a vital component of the SpA Clinic. It is equipped with an Esaote Mylab x8, featuring a multi-frequency linear probe from 13 to 24 Mhz, and a portable linear multi-frequency VSCAN for rapid USD assessments during outpatient rheumatologic examinations. It performs approximately 80-100 USD scans each month to diagnose and monitor immunomediate arthritis.

Furthermore, the Laboratory of Molecular Medicine, part of Clinica Medica, offers a robust perspective in translational research. The laboratory is equipped with all the essential instruments for molecular biology and cell culture techniques.

Following, there are listed all the clinical infrastructures available for the mentee:

A. Clinical Infrastructure

- Three dedicated SpA clinics with high weekly volumes.
- A longitudinal database of over 2000 PsA/SpA patients, systematically collected using REDCap eCRFs fully developed and maintained on-site (eCRF system designed by Dr Valentino Paci).
- An advanced Musculoskeletal Ultrasound Clinic, equipped with high-resolution probes suitable for assessing entheses, joints, and the nail–enthesis complex.
- Clinical access to MRI and radiology services, including whole spine and SI joints, in collaboration with expert musculoskeletal radiologists.

B. Translational Research Infrastructure

- The Laboratory of Molecular Medicine, located within Clinica Medica, is equipped for:
 - cell culture,
 - ELISA and multiplex immunoassays,
 - biomarker quantification,
 - molecular diagnostics, from basic to advanced molecular biology techniques (up to the single cell analysis).This environment has supported several translational PsA and axSpA projects [52,57,66; Agostinelli A et al. AnnRheumDis 2025,84,Suppl.1], and offers a strong foundation for mentees interested in immunopathology and biomarkers.

C. Ultrasound Equipment

The Musculoskeletal Ultrasound Clinic has available:

- High-end ultrasound systems with high-frequency linear probes (15–24 MHz),
- Power Doppler with high sensitivity for enthesitis,
- Dedicated settings for nail plate and capillaroscopic assessment,
- USD-guided interventional capabilities (injections, aspirations).

This equipment is routinely used for advanced training, courses, and research, including projects such as the prePsA-US study and the development of an ultrasound-based MSK atlas.

- D. **University Pole:** free access to university facilities (rooms, IT services, etc.), situated right next to the hospital.

PROPOSED MENTORSHIP TYPE.

Considering all the clinical facilities, the high number of patients routinely evaluated at the SpA Clinic, and the close link with the Laboratory of Molecular Medicine, I may suggest a purely clinical or translational research project, depending on the mentee's interests, focused on our area of expertise (see the chapter below).

AREAS OF EXPERTISE AND ANTICIPATED FOCUS.

I lead a talented team of residents, under close co-supervision with my assistant professor (Dr. Paci V.), actively involved in several clinical (observational and RCTs studies) and translational research projects, in connection with many international and national rheumatological centres [53-55,59,61,64,70,79,84-93]. In the observational studies mentioned below, my team is the leading and coordinating Italian centre.

In particular, the anticipated areas of ongoing research are the following:

a. Preclinical PsA: Clinical and USD evaluation

- prePsA-US Study – Longitudinal assessment of nail–enthesis complex lesions and microvascular abnormalities as early predictors of PsA onset in psoriasis (prospective cohort, US + capillaroscopy).
- Preclinical axial involvement – Collaboration with dermatologists for early identification of symptoms consistent with axial PsA.

b. Observational multicentre clinical studies on DMARDs effectiveness, patients' subgroups, screening procedures

- AIRE Study – Real-world comparison of IL-17 inhibitors (ixekizumab) vs adalimumab in PsA and axSpA; includes survival modelling and subgroup analyses. Ongoing
- SPIB Cohort – Integrated gastro-rheumatology cohort evaluating joint–gut remission in IBD-associated SpA.
- Effectiveness of IL-23 inhibitors (risankizumab, guselkumab) – Ongoing observational analyses.

- Ixekizumab real-world effectiveness from the patient's perspective – Multicentre analysis specifically focused on PROs and functional assessment. Ongoing.

c. Musculoskeletal Ultrasound Research

- Development of a multisite MSK Ultrasound Atlas – Covering pathological and normal findings, including entheses, tendons, joints, nail–entheses complex, and SpA-specific lesions.
- ASSET Study – Collaborative project with the scleroderma clinic, evaluating early joint lesions in systemic sclerosis using MSK ultrasound.
- Ultrasound assessment of biologic DMARD effectiveness – Focused on enthesitis and peripheral joint inflammation [89,93].

d. Translational studies on laboratory biomarkers useful for monitoring and predicting peripheral and axial PsA.

- Biomarkers of Microbial Translocation and Systemic Immune Activations Study – Derived from the ATTRACT study [85,91] biosamples; explores epithelial gut damage, microbial translocation, SOST pathways, and their correlations with PsA phenotypes and peculiarities of the activation of the immune system [52,57,66; Agostinelli A et al. AnnRheumDis 2025,84,Suppl.1].

These areas are merely provisional guides for the mentee to participate in one of the projects mentioned above or, preferably, to propose a new study to develop under my supervision.

OPPORTUNITIES FOR SKILL DEVELOPMENT.

My mentoring and my team may easily provide many opportunities for skill development, as following:

▪ **Advanced Musculoskeletal Ultrasound Training**

The mentee will receive specialised training in advanced MSK ultrasound, including enthesitis assessment in accordance with OMERACT and EULAR standards, as well as targeted evaluation of the nail–entheses complex. Sessions will emphasise optimal probe application, Grayscale and Doppler settings, and consistent interpretation of a broad range of findings, with opportunities to observe ultrasound-guided procedures in routine care and to participate in US national and international trials in the rheumatology field.

▪ **Trial Design and Research Methodology**

The mentorship could offer essential skills in study design, from protocol development to data collection, with exposure to observational cohorts, cross-sectional studies, and ongoing clinical RCTs.

▪ **Statistical Programming (R) and AI-Assisted Analysis**

Training in statistical programming will concentrate on using R in a practical way for clinical research, including preparing datasets and performing key statistical analyses. The mentee will also learn how to utilise AI tools to draft and improve R code for statistical tests, data visualisation, and figure creation, incorporating these outputs into reproducible workflows suitable for abstracts and manuscripts.

▪ **REDCap and Digital Research Tools**

The mentee will gain practical experience in designing and managing REDCap eCRFs, implementing branching logic, automated checks, and digital workflows. Exposure to REDCap API features will demonstrate how to create efficient data pipelines and research dashboards.

Academic Development

The mentorship will also support the mentee in developing concise scientific writing, preparing abstracts and manuscripts, and structuring presentations for academic meetings. Basic guidance in project organisation and early career development will round out the training pathway.

SITE FACILITIES, ANTICIPATED COST FOR OBSERVERSHIP

The city of Ancona is situated in central Italy, and there are no special considerations for travellers coming from the European Community (EC) or outside the EC. No visa permission is required.

Travel Costs.

Ancona has good connections by train, plane, or ship. The cost varies depending on the distance from the mentee's home country and can range, for example, from 60 euros by train or 200-400 euros from Rome's airport to Ancona.

There are also direct flights to Ancona airport from Germany, the UK, Romania, and in summer, from Spain.

Lodging Facilities.

The Polytechnic University of Marche (UNIVPM) does not have a traditional 'dormitory', but offers a service called 'Looking for Accommodation' that provides furnished apartments in Ancona for students, including those from outside the area, Erasmus students, and international students.

It is the main service provided by UNIVPM to find accommodation. Students can access furnished apartments near the university campuses. Following this, there is the link to view information and contacts.

<https://www.cercoalloggio.com/en>

The cost may vary from 250 euros/month for a single room to 600 euros/month for a flat.

ANTICIPATED MENTORSHIP DURATION

Considering the potential projects and my serious intent towards mentorship, I suggest a mentorship period of at least 8 to 12 months, including a minimum of 6 to 8 weeks on-site.

The duration may vary depending on the project's development and the skills the mentee wishes to learn or expand.

I hereby declare that I authorise the use of these data in accordance with the Italian D.Lgs. 196/03, 2018/101, and the EU Regulation 2016/679.

Ancona, ITALY 14th Dec 2025

Prof. Michele Maria LUCHETTI GENTILONI

