



RHUPUS: SUSTAINED EFFICACY AFTER 1-YEAR FOLLOW-UP OF ANTI-TNF-A

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BACKGROUND

The efficacy of antitumour necrosis factor alpha (anti-TNF- α) treatment is well recognised in Rheumatoid Arthritis (RA) but remains controversial in Systemic Lupus Erythematosus (SLE). Therefore, the role of anti-TNF- α treatment in 'Rhupus', a disease sharing features of RA and SLE, is still debated.

CASE REPORT

J.L.C, male, 68 years old, ex smoker. In November 2016, presented with small and large polyarthritis joints, bilaterally and symmetrically, with intense morning stiffness. It had areas of hyperemia in the trunk and proximal thigh (itchy rashes). He had Raynaud, calcinosis in hands, periungual vasculitis and polyneuropathy in the legs. He was treated with hydroxychloroquine and methotrexate, but presented gastric intolerance. Replaced by leflunomide, but presented gastric intolerance, alopecia, leucopenia and lymphopenia. We tried methotrexate subcutaneous and corticotherapy. In December 2017 started Infliximab and evolved with an important improvement of polyarthritis, and corticoid dose reduction scheme.

Currently he presents without arthritis, maintaining Infliximab, methotrexate subcutaneous, and corticoid 5mg /day. Latest exams have evidenced no changes in the immunology, anti-dsDNA, complements remain negatives.

Laboratory tests in 2016: FAN 1:320 Nuclear Homogeneous, reagent metaphase plate, rheumatoid factor 32, Anti-CCP >340, Anti-Sm positive, Anti-La/SSB 13, Anti-dsDNA negative, and Anti-Ro/SSA negative, regular complements, VHS 83 and negative PCR, hemoglobin 14, leukocytes 4810, lymphocytes 1029, platelets 149000.

Laboratory tests in 2019: hemoglobin 15,3 leuk 7300 platelets 182000, negative PCR, urinary sediments negative, VHS 18, C3 38 (10-40), C4 50 (19-52), anti-La negative, anti-Ro negative, anti-DNA negative, anti-Sm negative, anti-RNP negative.

CONCLUSION

Anti-TNF- α treatments could be an alternative strategy in Rhupus. In this case, this strategy was sustained throughout the 1-year follow-up, proving to be effective and safe. There was no worsening or reactivation of lupus.