





PSORIATIC ARTHRITIS: AN EPIDEMIOLOGICAL PROFILE AND THE IMPORTANCE OF SCREENING FOR LATENT INFECTIONS

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BACKGROUND

Psoriasis arthritis is a part of the spondyloarthritis group and affects up to 30% of patients with psoriasis. Treatment with immunobiologicals provided a better therapeutic response and quality of life for patients. However, with its advent also arises the concern of adverse events, as the risk of serious infections and reactivation of chronic infections

The objective of this study is to outline an epidemiological profile of patients treated at the Psoriatic arthritis outpatient clinic of the São José do Rio Preto Medical School (FAMERP), especially concerning the research, prevalence, prophylaxis and reactivation of chronic infections in individuals using Biological DMARDs.

MATERIALS AND METHODS

Retrospective study, based on the collection of patient data from the FAMERP psoriatic arthritis outpatient clinic, from 01/07/2018 to 12/31/2018.

RESULTS

In the study, the prevalence of sex among the 63 patients was not observed. The mean age was 54.9 years. The mean time between onset of symptoms at the start of treatment was 5.9 years Regarding treatment, 71.4% of the patients were using biological DMARD, and in 80% of them they were taking anti-TNF. Of the 34 patients whose records documented research for latent tuberculosis, there was a 41% prevalence of latent infection, and all these patients performed the treatment proposed by the Ministry of Health, and there were no cases of reactivation. We found 6 patients with anti-HBC total reagent, all with anti-HBS reagent and HBsAg negative. Of these, 4 received prophylactic treatment for this, without any case of reactivation.

CONCLUSION

With the data from this study, we suggest the latent tuberculosis and serological profile for viral hepatitis and HIV in patients with psoriatic arthritis with immunobiological prescription due to the possibility of treatment of latent infection or prophylaxis. In addition, a delay between the onset of symptoms and the initiation of treatment of approximately 6 years was observed, which may have an impact on the control and evolution of comorbidity.