

# PMS77 Clinical and patient reported outcomes in psoriatic arthritis: a narrative review of the literature

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## Background

- Psoriatic arthritis (PsA) is a chronic inflammatory disease with heterogeneous manifestations affecting the skin, nails, peripheral joints, spine and entheses, normally associated with psoriasis<sup>1,2</sup>. PsA has a considerable negative impact on multiple physical and emotional aspects of patients' lives. Its burden is demonstrated both in terms of progression of clinical and radiological damage, and in terms of quality of life (QoL) and functional status of these patients<sup>1</sup>.
- Due to the complex presentation of PsA, several outcomes have been recommended to be assessed in PsA patients' follow-up<sup>3</sup>. Most of them have been adapted from other disease such as psoriasis or rheumatoid arthritis. Thus, they may not accurately reflect the whole experience of patients with PsA<sup>2</sup>.

## Objective

- To review the literature related to the instruments used to assess clinical outcomes and patient reported outcomes (PROs) during follow-up of PsA patients.

## Methods

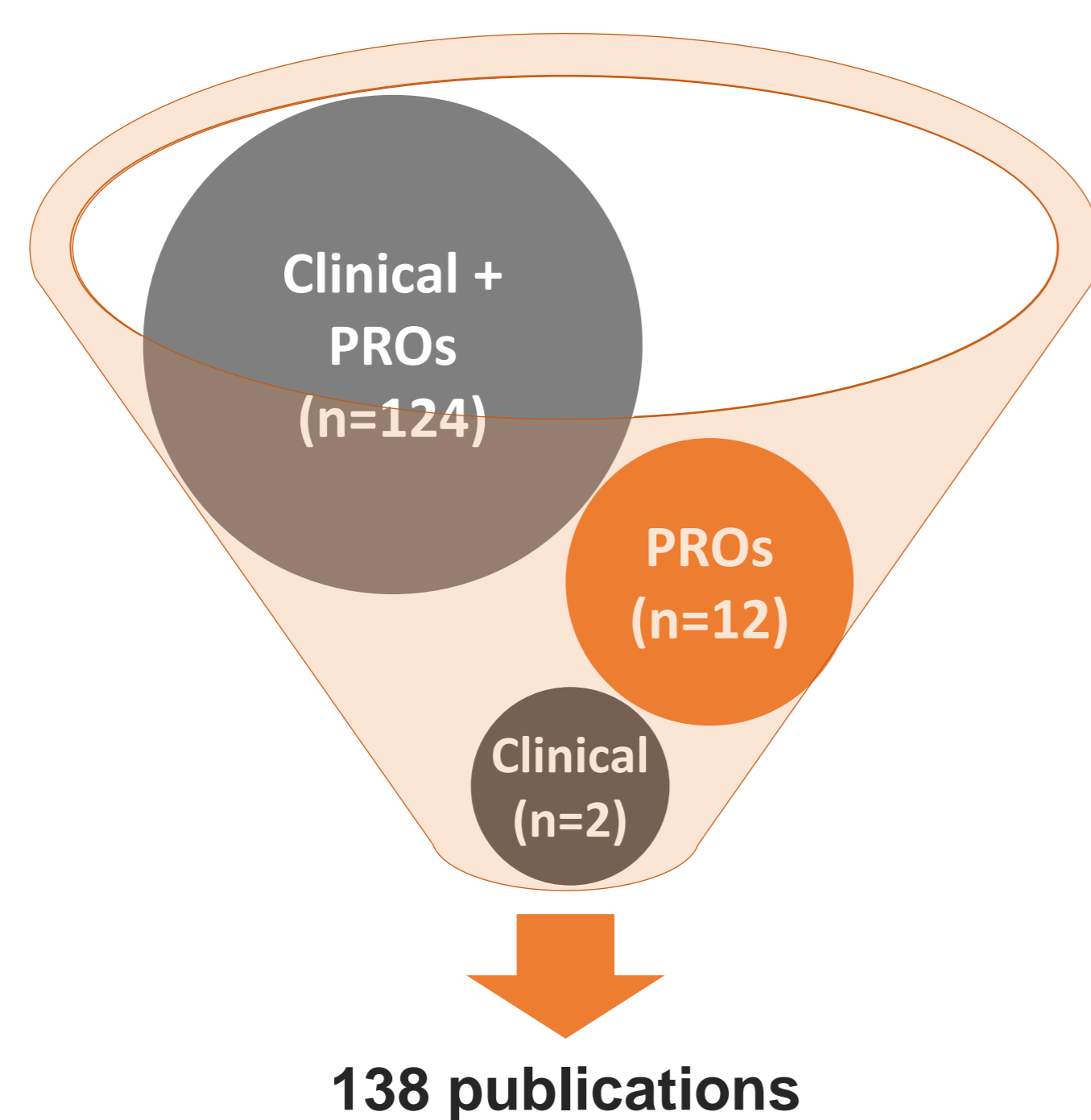
- Electronic databases (MedLine/PubMed, Google Scholar, Cochrane library and ISI-WOK) were searched to identify clinical trials, observational studies, registries or systematic reviews related to the PsA patients' follow-up. English and Spanish studies published until June 1<sup>st</sup> 2017 were selected.
- Outcomes and instruments used to follow-up PsA patients were identified.

## Results

- A total of 138 publications were reviewed. Most of them (n=124, 89.8%) used a combination of clinical outcomes and PROs to follow-up PsA patients, while 8.7% (n=12) and 1.4% (n=2) employed exclusively PROs and clinical outcomes.

Figure 1

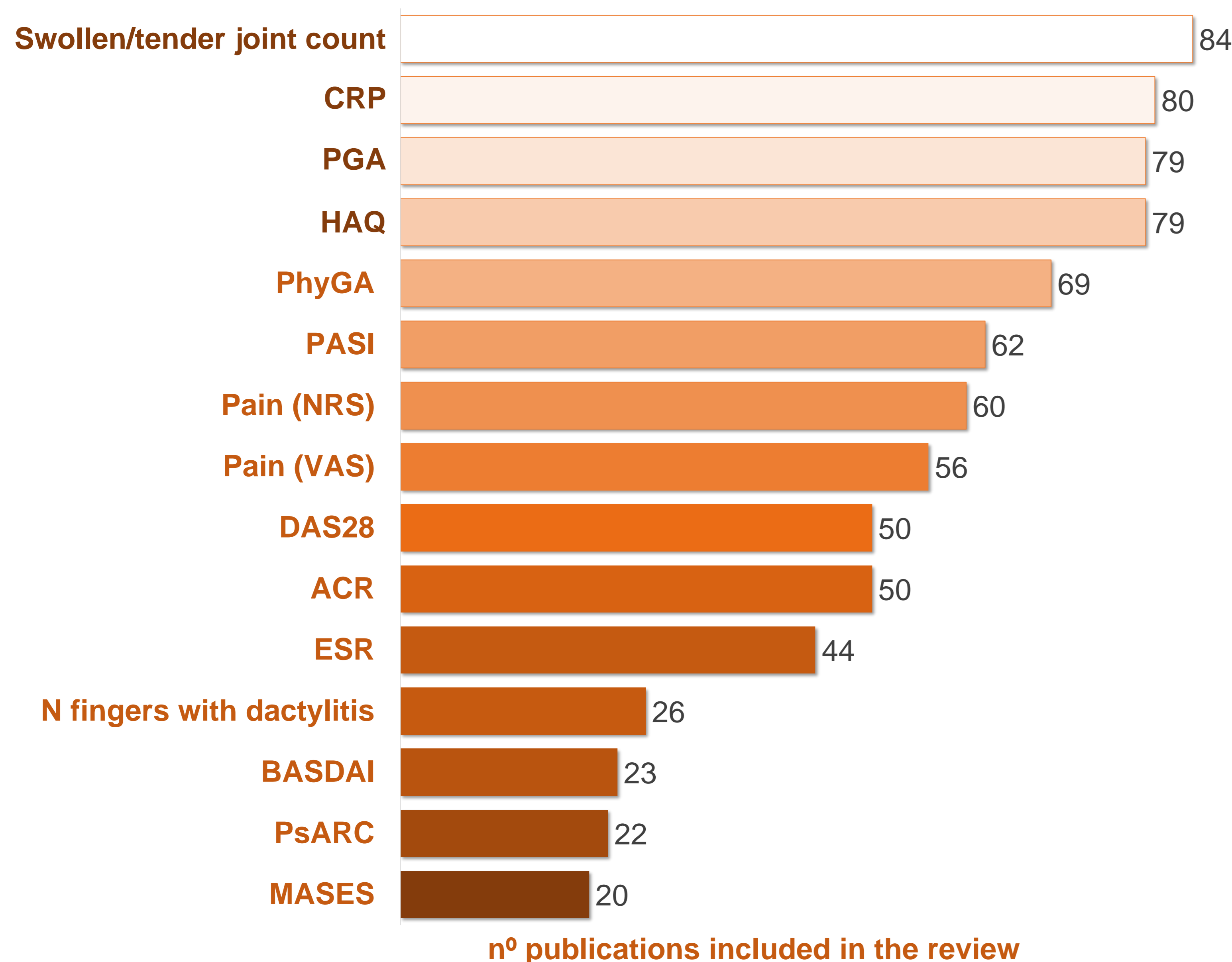
Figure 1. Outcomes used in the reviewed publications



### Instruments identified

- The reviewed publications used a total of 87 instruments (49.4% PROs, 36.8% clinical outcomes, 13.8% composite indices) to follow-up PsA patient.
- The most used instruments in the reviewed publications were the number of swollen/tender joint count (n=84) followed by C-reactive protein (n=80), Patient Global Assessment (n=79) and Health Assessment Questionnaire (n=79). Most of these instruments were used in a composite index such as ACR (n=50, 35.97%) or Disease Activity Score-28 (n=50, 35.97%).

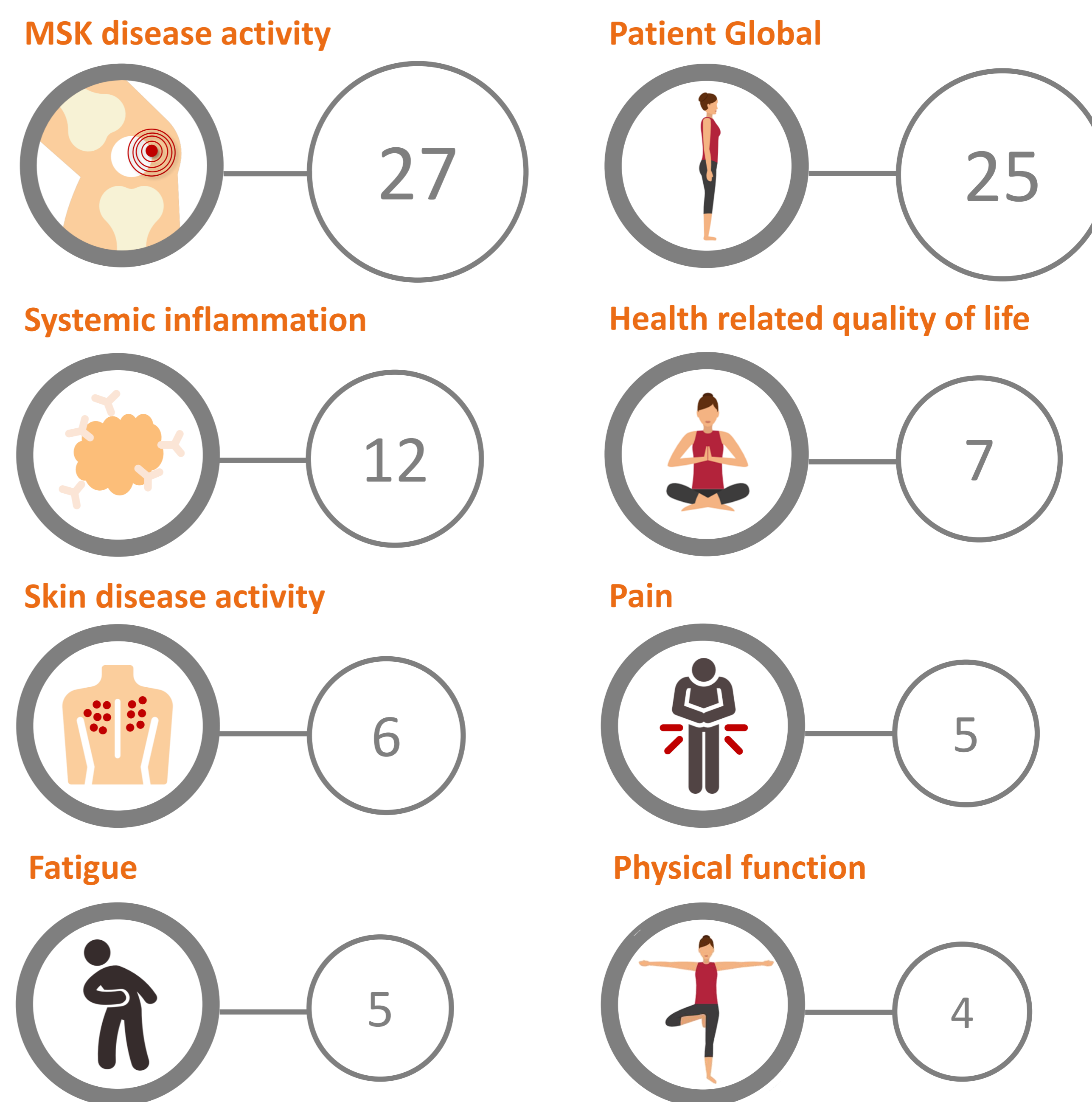
Figure 2. Instruments used in the reviewed publications



CRP: C-reactive protein; HAQ: Health Assessment Questionnaire; PGA: Patient Global Assessment; PhyGA: Physicians Global Assessment; PASI: Psoriasis Area Severity Index; NRS: Numeric Rating Scale; VAS: Visual Analog Scale; ACR: American College of Rheumatology (PGA+PhyGA+pain+HAQ+ESR/CRP); DAS28: Disease Activity Score (TJS28/SJS28+ESR/CRP+PGA); ESR: Erythrocyte Sedimentation Rate; BASDAI: Bath Ankylosing Spondylitis Disease Activity Index; PsARC: Psoriatic Arthritis Response Criteria (TJS68/SJS66+PGA+PhyGA); MASES: Maastricht Ankylosing Spondylitis Enthesis Score.

- The instruments identified were classified based on the PsA core domains established by international GRAPPA-OMERACT working group<sup>2</sup> in musculoskeletal disease activity (n=27), patient global (n=25), systemic inflammation (n=12), health related quality of life (n=7), skin disease activity (n=6), pain (n=5), fatigue (n=5) and physical function (n=4). Some instruments assessed more than one domain.

Figure 3. Instruments identified according to PsA core domains (GRAPPA-OMERACT)<sup>2</sup>



## Conclusions

- Most of the studies used a combination of clinical outcomes and PROs to follow-up PsA patients, highlighting the importance to include PROs in patients' follow-up in routine clinical practice. However, results of the review release the need to establish and standardize the instruments to be applied in PsA patients.

## References

- Gladman et al. Psoriatic arthritis: epidemiology, clinical features, course, and outcome. Ann Rheum Dis 2005;64 Suppl 2:ii14-7.
- Orbai et al. International patient and physician consensus on a psoriatic arthritis core outcome set for clinical trials. Ann Rheum Dis 2016;0:1-8.
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