IDENTIFICATION OF MAJOR CLINICAL CHARACTERISTICS OF CHINESE SLE PATIENTS AND LINEAR CORRELATIONS AMONG SLEDAI, SF-36 AND HADS-ANXIETY USING MOBILE SMART SYSTEM OF DISEASE MANAGEMENT (SSDM)

1GS Wang, 2Yang, 3XH Duan, 2ZB Wu, 2JL Huang, 2JL Ru, 1Xie, 4YH Wang, 5C Zhao, 6R Wu, 1H Wei, 2ZC Zhang, 2ZL Li, 1HB Li, 2YK Zuo, 1HL Wu, 1YS Li, 1Ha Jia, 2FX Xiao, 1XM Li, 1Anhui Provincial Hospital, Department of rheumatology, Hefei, China; 2Central Hospital of MianYang-Sichuan, Department of rheumatology, MianYang, China; 3The Second Affiliated Hospital of Nanchang University-Nanchang, Department of rheumatology, Nanchang, China; 4The First Affiliated Hospital of The Fourth Military Medical University, Department of Rheumatology and Immunology, Xi’an, China; 5The Sixth Hospital Affiliated to Sun yat-sen University, Department of rheumatology, Guangzhou, China; 6The 264th Hospital of the PLA, Department of rheumatology, Taiyuan, China; 7Affiliated hospital of Guangdong medical University, Department of rheumatology, Zhanjiang, China; 8The First Affiliated Hospital of BaoTou Medical College, Department of rheumatology, BaoTou, China; 9The First Affiliated Hospital of Guangzhou Medical University, Department of rheumatology, Nanning, China; 10The First Affiliated Hospital of Nanhang University, Department of rheumatology, Nanhang, China; 11Northern Jiangsu People’s Hospital, Department of rheumatology, Yangzhou, China; 12People’s Hospital of Linyi Shandong, Department of rheumatology, Linyi, China; 13The First Affiliated Hospital of Bengbu Medical College, Department of rheumatology, Bengbu, China; 14The Affiliated Hospital of Inner Mongolia Medical University, Department of rheumatology, Hohhot, China; 15Xiangya Hospital of Central South University, Department of rheumatology, Changsha, China; 16People’s Hospital of Dongguan, Department of rheumatology, Dongguan, China; 17People’s Hospital of Zhejiang Province, Department of rheumatology, Hangzhou, China; 18Gothic Internet Technology Corporation, Medical Department, Shanghai, China

Background and aims The association among SLEDAI, SF-36 and HADS in China was unknown. Smart System of Disease Management (SSDM) is a series of mobile applications for chronic diseases management. The purpose of this study is to describe major clinical characteristics of Chinese SLE patients using SSDM and analyse the potential association among SLEDAI, SF-36 and HADS.

Methods SSDM includes physicians’ and patients’ application system. The patient application system includes SSDM, SF-36, HADS and medication management. After data entry, patients can synchronise data to the mobile terminal of authorised rheumatologist. All patients fulfilling the 1997 ACR criteria for SLE were recruited.

Results A total of 3717 SLE patients from 490 rheumatologists in 214 rheumatology centres across China participated in the study (89% were women). The mean age was 34.09±11.87 years and the median disease duration was 3.15 years. 1,908 patients performed self-assessment for 3085 times. The mean score of SLEDAI, SF-36, HADS-Anxiety (HADS-A) and HADS-Depression (HADS-D) were 9.41±2.52, 60.09±20.01, 7.86±4.09 and 8.77±4.25 respectively. According to the SLEDAI criteria, 43.71%, 18.50%, 13.42% and 24.37% patients achieved Remission, Low, Moderate and High disease activity. SLEDAI was significantly correlated with SF-36 and HADS-A independently. The regression equation was “SLEDAI=21.753–0.179*SF-36” (p=0.011) and “SLEDAI=0.461+1.114*HADS-A” (p=0.028).

Conclusions SSDM is an effective mobile interface to serve for SLE patients performing self-management as well as to supply physicians with valuable data. SLEDAI was significantly correlated with SF-36 and HADS-A independently.

LIKELIHOOD OF PATIENTS WITH INCOMPLETE LUPUS TO ENTER A RANDOMISED, PLACBEO-CONTROLLED TRIAL OF HYDROXYCHLOROQUINE

1D Karp*, 2B Chong, 3C Ariens, 1J James, 4M Ishimori, 5M Weisman, 6D Wallace, 7N Olsen, 1UT Southwestern Medical Centre, Rheumatic Diseases Division, Dallas, USA; 2UT Southwestern Medical Centre, Dermatology, Dallas, USA; 3Oklahoma Medical Research Foundation, Arthritis and Clinical Immunology, Oklahoma City, USA; 4Cedars Sinai Medical Centre, Rheumatology, Los Angeles, USA; 5Penn State Hershey Medical Centre, Rheumatology, Hershey, USA

Background and aims Hydroxychloroquine (HCQ) is used by the majority of patients who have incomplete lupus erythematosus (ILE), defined as positive ANA and 1–2 other criteria for SLE, although efficacy in this situation has never been proven in a rigorous clinical trial. The Study of anti-Malarials in Incomplete Lupus Erythematosus (SMILE) is a proposed placebo-controlled trial of HCQ in ILE designed to measure the effect of drug on progression to SLE. In order to judge trial feasibility, “mock recruitment” was performed.

Methods 45 patients seen in outpatient clinics of the SMILE investigators for ANA and musculoskeletal or cutaneous complaints were interviewed using a structured script explaining the need for the trial, potential risks and benefits of HCQ and the possible randomization to placebo. They were then asked questions to ascertain their understanding of the trial and their willingness to enrol.

Results 96% of the subjects were female; median age was 35 and median symptom duration 3 years. 13% were Hispanic and 13% were African American. 18% had a personal history of autoimmune disease other than lupus; 42% had a family history. Musculoskeletal and cutaneous symptoms were each in 60% of subjects. 73% of subjects were interested, and 64% were likely to enrol. The most common reason for disinterest was lack of time to participate (50%), risks of HCQ (25%) and possibility of getting placebo (19%).

Conclusions A placebo-controlled clinical trial is feasible when the standard of care is an approved drug. 50% more subjects need to be screened to have enough to enrol in the trial.

EVALUATION OF ATOPY AND EOSINOPHILIA IN PATIENTS WITH PSORIASIS

1M Khoshkhui*, 2P Hosseini, 3M Rezaie, 2R Faridhosseini. 1Masshad, Iran; 2Masshad University Of Medical Science, Allergy and Clinical Immunology, Masshad, Iran; 3Masshad University Of Medical Science, Cardiology, Masshad, Iran

Background and aims Psoriasis is a TH1 and TH17 cells-dependent autoimmune disease of the skin and joint while allergic disorders are TH2 cell-dependent. There are conflicting reports about the effect of atopy on psoriasis. With regard to these reports, the aim of the current study was to determine the frequency of atopy, allergic disorder (such as allergic rhinitis, asthma and eczema) and eosinophilia in patients with psoriasis.

Methods For this purpose, this case-control study was performed in Masshad Ghaem hospital. History of allergic diseases including: allergic rhinitis, asthma and eczema were evaluated based on ISAAC standard questionire. Skin prick test was performed with 5 common allergens in our region and atopy was defined as a result of only one positive skin