

# ARE ANALYTICAL PARAMETERS ARE SUITABLE PREDICTORS IN RHEUMATOLOGIC DISEASES?

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## OBJETIVES

ANALYZING THE DIFFERENCES OF THE ANALYTICAL, CLINICAL AND DISEASE ACTIVITY VARIABLES, IN PATIENTS WITH RHEUMATIC DISEASES WHO START TREATMENT WITH BIOLOGICS.

## OBSERVATIONAL AND RETROSPECTIVE STUDY

PATIENTS DIAGNOSED WITH RHEUMATOID ARTHRITIS (AR) OR ANKYLOSING SPONDYLITIS (AS) WHO STARTED TREATMENT WITH ADALIMUMAB (ADL), ETANERCEPT (ETN) OR INFlixIMAB (INF) BETWEEN 2012 AND 2016

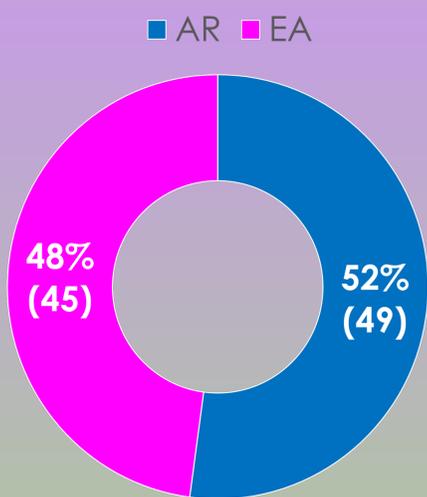
## MATERIALS AND METHODS

THE VARIABLES ANALYZED WERE: STUDY POPULATION, BASELINE DISEASE PARAMETERS (RF, ESR, CRP, HAQ, HLA-B27, ASQOL, BASFI) AND DISEASE ACTIVITY (DAS28 AND BASDAI)

THE DATA WERE COLLECTED FROM MEDICAL RECORDS, REPORTS BY LOCAL ADVISORY COMMISSION AND THE ATHOS-APD® SOFTWARE. A DESCRIPTIVE STATISTICAL ANALYSIS USING THE SPSS 17.0 SOFTWARE WAS PERFORMED

## RESULTS

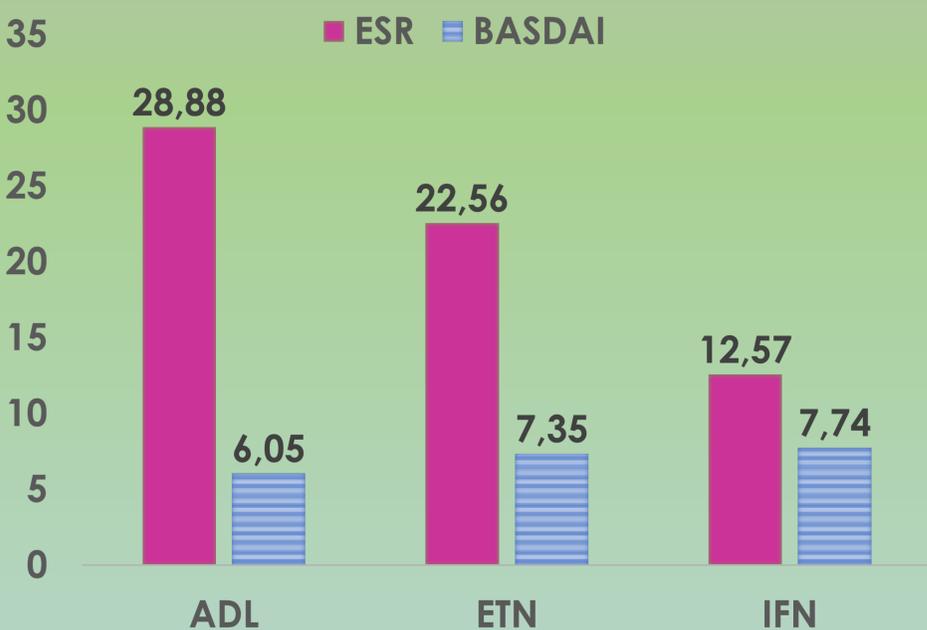
### NºPACIENTS



### DISTRIBUTION OF PATIENTS BY PATHOLOGY AND DRUG



### ESR BASDAI



RHEUMATOID ARTHRITIS	ADL	ETN	INF
RFI (+)	66,7% (16)	80% (18)	100% (3)
RFI (-)	33,3% (8)	20% (4)	0% (0)

ANKYLOSING SPONDYLITIS	ADL	ETN	INF
HLA B27 (+)	93,8% (18)	100% (17)	66,7% (5)
HLA B27 (-)	6,2% (2)	0% (0)	33,3% (3)

**CONCLUSION:** The results show that the registration of clinical data allows better pharmacotherapeutics study, although periodic analyzes should be performed to determine if there is an improvement in health outcomes. It would also be desirable to perform additional tests (pharmacokinetic and genetic) to validate the results obtained