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11. THE CLINICAL VALUE OF ENTHESITIS IN THE EARLY DIAGNOSIS OF PSORIATIC ARTHRITIS



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Introduction. Joint diseases are one of the most common chronic diseases of society, and one of the most common is psoriatic arthritis (PsA), which is differentiated by a high incidence of enthesitis.

Aim of study. Appreciation of ligamentous and muscular damage through enthesopathy in patients with psoriatic arthritis.

Methods and materials. The study included 50 patients diagnosed with PsA (according to CASPAR criteria): group 1 – duration of disease <2 years (n = 24), group 2 – >2 years (n = 26); age 18-65 (51.0 \pm 3.4) years. For the evaluation of enthesitis MASES score (Maastricht Ankylosing Spondylitis Enthesitis Score) was applied.

Results. Following the study, it was established that the frequency of the anatomica land clinical features of the joint syndrome was different in patients with early PsA and those with late PsA, in early PsA, unlike the late one, the oligoarticular variant was attested (41.7% and 15.3%, respectively), and less often – the spondyloarticular variant (8.3% and 19.2%), the polyarticular variant (33.3% and 38.4%), and the distal one (16.7% and 15.3%,) was found with the same frequency in both cases, while the osteolytic variant was observed only in the late stage of PsA (1.15%). Enthesities, by the MASES method, were determined with approximately the same frequency both in the early PsA group and in the group of patients with late PsA, in 10 (41.6%) and 11 (45.8%) patients, respectively (p>0.05). The mean values of MASES were higher in the late PsA group than in the early PsA 4.03 ± 0.8 and 2.6 ± 0.5 (p = 0.0032). In patients with early PsA, MASES was associated with the number of painful joints (r = 0.31 p = 0.03), the number of swollen joints (r = 0.29 p = 0.04), the BASDAI score (r = 0.34 p = 0.02) and BASFI (r = 0.39 p = 0.02), as well as the index score DAS28 (r= 0.31 p = 0.03). In patients with a longer evolution of the disease, the correlation of the MASES index only with the BASFI index was verified (r = 0.35 p = 0.02). The objectification of enthesitis was performed by musculoskeletal USG, the average value of the GUESS score in the late PsA group was 3.6 ± 0.3 compared to early 2.43 ± 0.2 (p = 0.02).

Conclusion. The early stage of PsA is characterized by a marked heterogeneity of its manifestations with the particularities of the joint syndrome and damage to the tendons and ligaments – oligoarticular and polyarticular variants of the joint syndrome are more frequently attested. Enthesitis is a characteristic manifestation of early PsA, it was found in 40% of patients, and the ultrasonographic examination of the calcaneal region confirmed it more frequently than the clinical data (69% and 31%).