

POSTER PRESENTATION

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PReS-FINAL-2064: Effect of Goloimumab a new anti-TNF, in patients with the diagnosis of juvenile idiopathic arthritis

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Introduction

Golimumab is a fully human monoclonal antibody targeting tumor necrosis factor-alpha (TNF- α), which plays an important role in the pathogenesis of juvenile idiopathic arthritis. Golimumab was approved for the treatment of rheumatoid arthritis, psoriatic arthritis and ankylosing spondylitis.

Objectives

To assess the effectivity and safety of Gololimumab in juvenile idiopathic arthritis.

Methods

We analysed retrospectively the data of all our patients who have been treated with Golimumab (Simponi®) every 28 days sub cutaneously.

Results

18 patients with the diagnosis of juvenile idiopathic arthritis (15 with juvenile enthesitis associated arthritis, 2 with juvenile psoriatic arthritis and 1 with juvenile idiopathic polyarticular arthritis), for a mean time of 13.7 months per patient (4-26 months). 16 patients have been treated with other biologic agents before. In 13 patients Golimumab was started because of disease progression, in 3 because of intolerance to other biologic agents and in 2 because they described severe phobia of injections. Mean number of painful, swollen and limited joints were before and at the end of the treatment period after 13.7 months (4.5/2.39; 1.78/0.94; 2.72/2.83). The mean value at baseline after the mean follow up were of the physician global assessment score (2.03/0.84), mean erythrocyte sedimentation

rate (8.72 mm/7.41 mm) and mean c-reactive protein (4.36 mg/l/3.97 mg/l). 13 patients developed side effects, one patient developed a severe adverse event (appendicitis with consecutive appendectomy). None of the patients was the drug discontinued because of the side effects.

Conclusion

According to this preliminary study in patients with JIA golimumab seems to be a safe and effective treatment. The data of the prospective study is pending.

Disclosure of interest

None declared.

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