

Hall C forenoon session – 22-11-2024

- 1) Utility of Infrared thermography (IFT) is useful in detecting subliminal synovitis – Dr Nitish Chandra
- 2) Early referral to a Rheumatologist helps in drastically reducing catastrophic healthcare expenditure - KRAeb study (Karnataka rheumatology economic burden study) – Dr A S Harshini
- 3) The homozygous (del/del) genotype was higher in SpA in TLR -2 (23 bp) promoter polymorphism compared to controls, Serum TNF alpha levels, disease activity indices were higher in the mutant variants i.e, (del/del) and (ins/del) as compared to the wild variant (ins/ins) – Dr Anil Kumar Sahu
- 4) In a Case Control study with 43 cases and around 1000 controls of psoriatic arthritis, Positive association in AS like phenotype was seen in HLA B 27, HLA A02, HLA C02. Protective role was noted with HLA C06. In the Peripheral Psoriatic arthritis, reverse genetic association was noted in RA like phenotype (Positive association with HLA C04 and protective association with HLA A01 and HLA C12) as compared to the pSpA like phenotype (Positive association with HLA A01, HLA C12 and protective association with HLA c04- Dr Meera Shah
- 5) In a USG based study of 88 patients with lateral hip pain - gluteus medius tendinosis - 28%, greater trochanter bursitis - 11% and ITN thickening 11% were the leading causes -Dr Smriti Ramteke
- 6) In a RCT of 106 patients with primary knee OA - no significant differences in between Pregabalin and duloxetine in terms of change in WOMAC or ICOAP -Dr Harsh Jain
- 7) Approximately 50% of thrombotic APS cases are primary, from Indian data
- 8) APS can involve kidneys in the form of thrombotic nephropathy, glomerular involvement such as MSGN, FSGN, MCD, membranous nephropathy etc.
- 9) DOACs should be avoided when patients have history of "Arterial" thrombosis.
- 10) Addition of Aspirin was recommended in lupus with APS,
- 11) When target INR is not achieved, factor 2 and factor 10 assays need to be checked
- 12) Avoid alcohol and cranberries while on warfarin.
- 13) Despite the low evidence Rituximab may be used 4-5 months prior to pregnancy for resistant obstetric APS to reduce the antibody load

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