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Editorial

Group for Research and Assessment of Psoriasis and Psoriatic Arthritis-GRAPPA (2003-2013)

The common concept of rheumatologists and dermatologists to deal with the combined evaluation of patients with psoriasis (PsO) and psoriatic arthritis (PsA) have led to the foundations of Group for Research and Assessment of Psoriasis and Psoriatic Arthritis (GRAPPA), now in its 10th anniversary. This editorial looks over the past ten years until the last meeting in Toronto last July.

A history of success

The association of PsO with articular manifestations, similarly to what was also known with inflammatory bowel disease and uveitis, have been known for long time, although the mechanism behind these clinical observations were and still are only partially understood. It was only in 1973 that John Moll and Verna Wright have tried to create fundamentals that would identify in a patient with psoriasis that he was also suffering from PsA (Table 1).¹

Using these diagnostic criteria, Moll and Wright described five subgroups of PsA: distal interphalangeal (DIP), asymmetrical oligoarthritis, polyarthritis, spondylitis, and arthritis mutilans.

In the 90's several other classifications were proposed by different authors and were reviewed by Gladman and Espinoza.² In the past decade an international group assembled what is now known as the Classification of Psoriatic Arthritis criteria (CASPAR). The original diagnostic criteria of Moll and Wright are now being replaced by the CASPAR criteria.³ CASPAR takes into account the presence of articular manifestations, the presence of skin disease or familial history, typical nail changes, the presence of swelling of the digit and juxta-articular bone in formation. It was shown that CASPAR has a sensibility of 98.7% and a specificity of 91.4%.

GRAPPA is a non-profit educational and scientific organization, created to facilitate sharing of information that relates to PsO and PsA. It was initiated 10 years ago with their first meeting in New York City (Fig. 1). Its objectives include: 1) Promote the development of national and international collaborative registries of PsA and PsO patients to standardize the

data being obtained and learn more about the natural history of the disease as well as its genetic underpinnings; 2) Work closely with representatives of patient service leagues to promote public education and awareness of PsA and PsO; 3) Work closely with representatives of biopharmaceutical companies to promote and conduct research on effective therapies for PsA and PsO; 4) Work closely with representatives of regulatory agencies to establish appropriate guidelines for regulatory approval of new therapies; 5) Work with other professional

Table 1 – Moll and Wright criteria for identification of psoriatic arthritis.

Inflammatory arthritis (peripheral arthritis and/or sacroiliitis and spondylitis)
The presence of psoriasis
The usual absence of serological tests for rheumatoid factor



Fig 1 – First GRAPPA meeting, New York, 2003. From left to right Mease, Zimmerman, Gladman, third row Khan, Helliwell, Nash, Ritchlin, Landwee, Espinoza, Smolen, Fitzgerald, Braun, Kalden, Antoni van der Bosch and Kavanaugh..

bodies, such as the American College of Rheumatology, American Academy of Dermatology, and OMERACT to promote knowledge of research about PsA and PsO within the context of those disciplines; and 6) Develop treatment guidelines for governmental and other interested parties.

Important publications that are now standard references were published during the past five years and are listed in Table 2:

Brazil have been an active participant in the mission of GRAPPA in Latin America with national meetings throughout in Brazil and Latin America; several Brazilian rheumatologists and dermatologists are now working together for the benefit of patients with both diseases. The first joined meeting was held in Porto Alegre (RS, Brazil) together with the Brazilian Congress; the second meeting was held in Fortaleza (CE, Brazil) in 2012 and the third will be in Salvador (BA, Brazil), on the second semester of this year.⁴ Last July, together with the 35th anniversary of the creation of the Psoriatic Arthritis Clinic at the University of Toronto, GRAPPA was commemorating its 10th anniversary since its inception in New York. The Brazilian rheumatologists Claudia Schainberg, Roberto Ranza, Sueli Carneiro, Penelope Pelarminos, Rachel Gryzpan and myself attended the event (Fig. 2).

As of today Brazil has 29 members affiliated with GRAPPA 15 of them are rheumatologists. New projects are being designed with participation of Brazilian rheumatologists in the upcoming years. The projects are listed below.

- New projects are being developed in refinement and validation of arthritis outcome measures in PsA
- Development of instruments to assess QOL, function, and participation
- Standardization of histologic and immunohistochemical assessments in PsA and PsO
- Updated criteria for classification of PsA (CASPAR)
- Imaging in PsA.

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1. Moll JM, Wright V. Psoriatic Arthritis Seminars in Arthritis and Rheumatism. 1973;3:55-78.

Table 2 – ARD Supplement - PsA and PsO: state of the art review and research advances.

ARD Treatment Recommendations for Psoriatic Arthritis, 2008
GRAPPA Newsletter, Primavera de 2012
JRheum Supplement - 2007 Updates; Screening & Assessment Tools, Quality etc
JRheum Supplement - 2008 Annual Meeting Imaging; Comp Measures; Biomarkers
JRheum Supplement - 2009 Annual Meeting of GRAPPA, Estocolmo, Suécia
JRheum Supplement - 2010 Annual Meeting of GRAPPA, Miami Beach, FL
JRheum Supplement - Systematic Review of Treatments for PsA
Patient Global Assessment in PsA: A Multicenter GRAPPA and OMERACT Study



Fig 2 – Tenth GRAPPA meeting, Toronto, 2013. From left to right: Luis Espinoza, Claudia Schainberg, John Moll and Morton Scheinberg.

2. Gladman DD, Espinoza LR. International symposium on psoriatic arthritis. J Rheumatol. 1992;19(2):290-1.
3. Taylor W, Gladman D, Helliwell P, Marchesoni A, Mease P, Mielants H; CASPAR Study Group. Classification criteria for psoriatic arthritis: development of new criteria from a large international study. CASPAR Study Group Arthritis Rheum. 2006;54(8):2665-73.
4. Goldenstein-Schainberg C, Ranza R, Bonfiglioli R, Carneiro S, Azevedo VF, Goldenberg J, et al. The presence of the Brazilian rheumatology in the GRAPPA. Rev Bras Reumatol. 2011;51(5):533-4