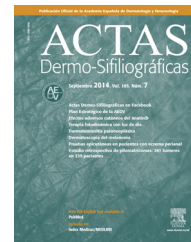




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ORIGINAL ARTICLES

Estimation of the prevalence of latent tuberculosis infection in patients with moderate to severe plaque psoriasis in Spain: The Latent study[☆]



M. Ribera,^a A. Zulaica,^b C. Pujol,^c M.L. Alonso,^d I.M. Rodriguez,^e
C. Garcia-Calvo^{f,*}, en representación del Grupo de Estudio Latent

^a Servicio de Dermatología, Hospital Universitari de Sabadell-Corporació Parc Taulí, Sabadell, Barcelona, Spain

^b Servicio de Dermatología, Complejo Hospitalario Universitario de Vigo, Vigo, Pontevedra, Spain

^c Servicio de Dermatología, Hospital Universitario La Fe, Valencia, Spain

^d Servicio de Dermatología, Hospital Universitario La Paz, Madrid, Spain

^e Servicio de Dermatología, Complejo Hospital Universitario de Badajoz, Badajoz, Spain

^f Departamento Médico Pfizer, Madrid, Spain

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KEYWORDS

Moderate to severe plaque psoriasis;
Latent tuberculosis infection;
Anti-TNF therapy

Abstract

Background and objective: Anti-tumor necrosis factor therapy for moderate to severe psoriasis can increase the risk of active tuberculosis in patients who have latent tuberculosis infection (LTBI). The main objective of this study was to estimate the prevalence of LTBI in patients with moderate to severe plaque psoriasis being treated in dermatology clinics in Spain.

Material and method: Non-interventional, cross-sectional, national epidemiological study conducted in Spain in 2011-2012. Patients with moderate to severe plaque psoriasis were included if they had undergone at least one tuberculin skin test (TST) and/or been evaluated with an interferon- γ release assay (IGRA) based on enzyme-linked immunosorbent assay (QuantiFERON TB Gold In-Tube) in the 2 years preceding the study.

Results: Data for 440 patients were valid for analysis. In total, 97.7% of the patients had undergone a TST, with a positive result in 23%. Of the 238 patients in whom the initial result was negative, 5% converted to positive on re-testing for a booster effect. IGRA results were available for 16.8%, 20.5% of them positive. Two of the patients with positive IGRA results had a

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* Corresponding author.

E-mail address: carmen.garciacalvo@pfizer.com (C. Garcia-Calvo).

PALABRAS CLAVE

Psoriasis en placas moderada a grave;
Infección tuberculosa latente;
Anti-TNF

negative TST. The prevalence of LTBI in the whole sample was 26.6%. The degree of concordance between the TST and the IGRA was moderate ($\kappa = 0.516$; $P < .001$).

Conclusions: The prevalence of LTBI in this study was similar to previous estimates for Spain.

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Estimación de la prevalencia de infección tuberculosa latente en pacientes con psoriasis en placas moderada a grave en España. Estudio Latent

Resumen

Introducción y objetivo: Los agentes biológicos anti-TNF usados para el tratamiento de la psoriasis moderada y grave pueden incrementar el riesgo de desarrollar tuberculosis activa en pacientes con infección tuberculosa latente. El objetivo principal de este estudio fue estimar la prevalencia de infección tuberculosa latente en pacientes con psoriasis en placas moderada y grave en consultas de dermatología en España.

Material y método: Estudio epidemiológico, no intervencionista, de corte transversal y ámbito nacional, realizado en España en 2011-2012. Se incluyeron pacientes con psoriasis en placas moderada y grave, a los que se les había realizado en los 2 años previos a su inclusión en el estudio al menos una prueba de tuberculina y/o una prueba de liberación de IFN- γ mediante la técnica de ELISA QuantiFERON[®]-TB gold In Tube.

Resultados: Se incluyeron 440 pacientes evaluables. Se había realizado una prueba de tuberculina al 97,7% de los pacientes, resultando positiva en el 23%. En 238 pacientes con una primera prueba negativa se realizó un *booster*, que fue positivo en el 5%. Se realizó la determinación del QuantiFERON[®]-TB al 16,8% de los pacientes, resultando positivo en el 20,5%; en 2 de estos pacientes la prueba de la tuberculina había sido negativa. En el total de la muestra, la prevalencia de infección tuberculosa latente fue del 26,6%. El grado de concordancia entre la prueba de tuberculina y el QuantiFERON[®]-TB fue medio (índice Kappa = 0,516; $p < 0,001$).

Conclusiones: La prevalencia de infección tuberculosa latente estimada en este estudio fue similar a la comunicada previamente en España.

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Introduction

After implementation of the Spanish Society for Rheumatology's 2002 guidelines on managing latent tuberculosis infection (LTBI) in patients treated with antagonists of tumor necrosis factor (anti-TNF agents), the prevalence of active TB fell by 78% in these patients according to a surveillance study of data from the BIOBADASER registry.¹ Another analysis of the registry found 34 cases of active TB, all in patients with rheumatoid arthritis treated with infliximab; only 2 of them, however, had started treatment after the 2002 recommendations had been implemented.¹ The use of anti-TNF biologics to treat moderate and severe psoriasis in dermatology began in 2004, so the guidelines of the Spanish Academy of Dermatology and Venereology (AEDV)^{2,3} had already incorporated the earlier recommendations. In spite of the efficacy of the recommended protocols, recent publications show that these patients continue to have higher risk of active TB than control populations or anti-TNF-naïve patients; researchers are therefore emphasizing the need to develop more effective strategies for detecting LTBI in Spain.⁴⁻⁶

The incidence of active TB in Spain in 2012, at 13.0 cases per 100 000 person-years,⁷ was higher than rates in

surrounding countries.^{7,8} Recent research also suggests that psoriasis itself may be an independent risk factor for active TB,^{9,10} and in Spain's psoriasis patients seems to be 7- to 10-fold higher than the general population.⁵ The main objective of this study was to provide additional information on the prevalence of LTBI in Spanish patients who are candidates for anti-TNF therapy for moderate to severe plaque psoriasis. LTBI screening was based on tuberculin skin tests (TSTs) and/or interferon (IFN)- γ release assays (IGRAs).

Material and Methods

Patients

This noninterventional, cross-sectional epidemiologic study of cases in 94 dermatology clinics in Spain was carried out in 2011 and 2012. Included were patients at least 18 years old with a diagnosis of moderate to severe plaque psoriasis. Within the 2 years prior to enrollment, all the patients had undergone TST screening (a first-step test, Mantoux method, and a second-step test if a booster phenomenon was suspected) and/or an IGRA. There were no exclusion criteria. The study was approved by a Spanish national

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