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MESSAGE FROM EDITOR-IN-CHIEF



I would like to thank my team for their staunch support. I am sure that we will be able to achieve more milestones together. Please enjoy this effort and keep us posted about what else do you want to read about.

Thank You!

DR. TAHIRA PERVEEN

Editor in Chief-PSR Newsletter,
Assistant Professor
Head-Dept. of Rheumatology,
Liaquat National Hospital,
Karachi.

26TH PAKISTAN SOCIETY FOR RHEUMATOLOGY (PSR) CONFERENCE IN KARACHI

Courtesy : Dr. Syeda Rida-e-Zehra

26th Annual International Conference of Pakistan Society for Rheumatology was held at Pearl Continental Hotel, Karachi from 12 till 15 October, 2023 convened by Dr. Tahira Perveen, the conference was effectively materialized by the organizing committee which included Patron: Dr. Syed Mahfooz Alam, Convener: Dr. Tahira Perveen, Deputy Conveners: Dr. Tabe Rasool and Dr. Shafique Rehman, Co-Ordinators: Dr. Saliha Ishaq, Dr. Lubna Nazir and Dr. Lubna Abbasi, Committee Members: Dr. Hafiz Mehmood Riaz, Dr. Amir Riaz, Dr. Ashar E. Ahmed, Dr. Hamza Alam, Dr. Furqan Khan, Dr. Bashir Ahmed Khoso, Dr. Sarah Ismail, Dr. Samia Kazmi, Dr. Arshad Ali Bhutto, Mr. Humza Masood, Mrs. Faiza Humza Masood and Dr. Syeda Rida-e-Zehra. Embracing the digital age, the conference offered digital registration options, providing attendees a convenient way to participate. The conference commenced with honoring the legends of Rheumatology through a special presentation — “Stars of Rheumatology”. Their contributions to establish and advance Rheumatology in the region of Sindh were recognized and honored with awards. These awards highlighted the significant impact these legends have made, both in clinical practice and research that has been instrumental in improving patient outcomes. At the inauguration ceremony, Prof. Saad Khalid Niaz, the sitting Health Minister of Sindh, made pledges to expand rheumatology in the region. He announced plans to establish more centres for training in rheumatology to enhance healthcare services and support for patients with rheumatic diseases. The conference was a resounding success with insightful talks. A total of 26 scientific talks were delivered covering diverse



Continued on page 2

NEW OFFICE BEARERS AND COUNCIL MEMBERS OF PAKISTAN SOCIETY FOR RHEUMATOLOGY-PSR

Courtesy : Dr. Saba Samreen

NEW OFFICE BEARERS

Prof. M. Ahmed Saeed (President)
Dr. Tahira Perveen (President Elect)
Dr. Saira E Anwer (General Secretary)
Dr. Saba Samreen (Joint Secretary)
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Dr. Samina Mushtaq

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Prof. Nighat Mir Ahmad
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Dr. Javaid Mehmood Malik
Dr. Shahid Abbas
Dr. Khurram M. Chowdhry
Dr. Azra Arif Ali (Late)

26TH ANNUAL PAKISTAN SOCIETY FOR RHEUMATOLOGY (PSR) CONFERENCE IN KARACHI

Courtesy: Dr. Syeda Rida-e-Zehra

Continued from page 1

topics in rheumatology. Keynote speakers included 23 esteemed national and international speakers who reflected on their clinical experiences and shed light on developments in rheumatology across the globe. Special mention goes to Dr. Michelle Petri, a renowned Rheumatologist from Baltimore, USA who virtually joined to deliver an insightful lecture on “Lupus Nephritis Updates”.



One of the most captivating parts of the conference was the poster presentation session. It was revolutionized with the use of digital kiosks. The scientific committee received 33 scientific abstract submissions and 11 case report abstract submissions spanning basic immunology to clinical experiences. To encourage young researchers 03 best scientific abstracts were chosen by an impartial jury. A submission from Liaquat National Hospital, Karachi received the best case report award.

To ensure fresh perspective and leadership for the organization, new office bearers were decided in the council meeting. Prof. M. Ahmed Saeed was elected as President and Dr. Tahira Perveen was elected as President-Elect with simple majority.



After 2 days of enriching sessions, the conference concluded with a well-deserved Gala Dinner at Mohatta Palace followed by refreshing picnic at Turtle beach the next day.

Overall the event left the attendees inspired with newfound knowledge and motivated to excel in the field of Rheumatology.



Organising Team: 26th Annual International PSR Conference, Karachi 2023





DEPARTMENTAL ACTIVITIES OF RHEUMATOLOGY DEPARTMENT SHALAMAR HOSPITAL, LAHORE

Courtesy : Dr. Saira E. Anwar Khan

RHEUMATOLOGY AT SHALAMAR

Shalamar Hospital, Lahore situated in Shalamar Tehsil (population 2,280,309) had no rheumatology department prior to 2021. Dr. Saira Khan and Dr. Shabnam Batool, both qualified rheumatologists, started establishing a rheumatology service providing 6 days/week cover over the last 2-years.

Today, an outpatient clinic includes private examination cabins, workstations connected to HMIS, and well-equipped procedure rooms with Musculoskeletal Ultrasound facilities and intra-articular/soft tissue injections. In-patient services include medical wards, CCU, ICU, and HDU. The rheumatology team developed an infusion-bay for biologics in male and female medical wards separately and trained staffs with established protocols.

This resulted in phenomenal success in all services. A comparison from 2020 to 2023 revealed the following respectively Out-patients 702 to 6316, In-patient 32 to 391, Intra-articular/soft tissue procedure 0 to 212, Biologic infusions from 0 to 188.

Success of the clinic necessitated expansion of the team. A junior consultant and two medical-officers were hired. A nurse hired in 2021 was trained over the ensuing two years for rheumatology services with the vision to develop independent nurse-led clinics. Once successful, this will be the first such nurse-led program in Pakistan. The rheumatology team then succeeded in getting accreditation from Pakistan College of Physicians and Surgeons to train Post Graduate trainees in FCPS Rheumatology, thus becoming the first medical sub-specialty in Shalamar Hospital to get this accreditation.

To ensure equitable access a rheumatology fund for free medicines was created by charitable donors in October 2023. So far 30 patients have been enrolled to receive free DMARD's with a provision for further 30 patients.

A separate Rheumatology Dashboard in the HMIS was established. We consider this dashboard to be our biggest and most innovative achievement as it incorporates clinical presentation, disease phenotypes, disease activity scores, algorithms to aid treatment, record patient care, ensure quality checks, facilitate future research and it continues to evolve.

The team has also started collaborative projects with Dorset University UK, (MSK USG training twice a month), with SKMH (Rheumatology-Pathology meeting for renal biopsies), and with SGRH (collaborative teaching sessions for post graduate trainees and House Officers). Despite clinical load two original articles and four case reports have been published and multiple studies are in pipeline.

To educate patients and the community, the team arranged awareness walks and symposiums, and uploaded patient educational videos on social media. This 'Rheum TV' project is in development. It was the result of an observer-ship at Johns Hopkins Hospital by a member of our rheumatology faculty. This observer-ship was fully funded by the Shalamar Institute as an ongoing project to develop a Women Health Centre.

RESEARCH PAPERS

Following are published research papers:

1. It's About Time: A Study of Rheumatology Patient Consultation Times.
 - a. Khan R, Imami SK, Anwer Khan SE, Batool S, Naeem F, Zaffar MA. It's About Time: A Study of Rheumatology Patient Consultation Times. *Cureus*. 2023 Oct 30;15(10):e48007. doi: 10.7759/cureus.48007. PMID: 38034181; PMCID: PMC10687325. Published: 2023 Oct 30
 - b. The study was conducted to ascertain the actual time that a patient spends in the rheumatology consultation with the doctor. Furthermore, the study stratified the consultation in sub-categories to determine the most time-consuming process. These processes were studied for the 2 most commonly seen diseases i.e., rheumatoid arthritis and systemic lupus erythematosus.
2. An Atypical Initial Manifestation of Systemic Lupus Erythematosus: Lupus Enteritis Accompanied by Intestinal Pseudo-Obstruction and Bilateral Hydronephroureter

- a. Naeem F, Noor M U, Batool S, et al. (December 16, 2023) An Atypical Initial Manifestation of Systemic Lupus Erythematosus: Lupus Enteritis Accompanied by Intestinal Pseudo-Obstruction and Bilateral Hydronephroureter. *Cureus* 15(12): e50628. doi:10.7759/cureus.50628
3. Mycophenolate mofetil vs. cyclophosphamide-based induction regimens for lupus nephritis: Outcomes at a tertiary care centre in Lahore, Pakistan. Muhammad Ahmed Saeed, Asadullah Khan, Faiza Naeem, Nighat Mir, Pakistan. April 2024 *Journal of the Pakistan Medical Association* 74 (5):868-873. DOI:10.47391/JPMA.8694
 4. A Case Report on the Atypical Symptoms of the Synovitis, Acne, Pustulosis, Hyperostosis, and Osteitis (SAPHO) Syndrome: Could COVID-19 Be a Cause?
 - a. Anwer Khan SE, Khattak UM, Nousherwani MD. A Case Report on the Atypical Symptoms of the Synovitis, Acne, Pustulosis, Hyperostosis, and Osteitis (SAPHO) Syndrome: Could COVID-19 Be a Cause? *Cureus*. 2023 Jul 7;15(7):e41498. doi: 10.7759/cureus.41498. PMID: 37551213; PMCID: PMC10404349.
 5. Khan, Saira Elaine Anwer; Shamim, Roshila; Khan, Asadullah; Batool, Shabnam; Aslam, Muhammad Zeeshan. Experience with Macrophage Activation Syndrome Associated with Systemic Lupus Erythematosus: A Single-Center Study from Pakistan. *Indian Journal of Rheumatology* 17(2): p 118-123, June 2022. DOI: 10.4103/injr.injr_230_21
 6. Shamim R, Khan A, Khan SEA, Aslam MZ and Talia A (2022) Eyes See What Mind Knows: Fibrodysplasia Dysplasia Ossificans Progressiva, a Mimicker of Spondyloarthritis. *J Rare Disord Diagn Ther* Vol.8 No.6: 45.
 7. Ahmed S, Grainger R, Santosa A, Adnan A, Alnaqbi KA, Chen YH, Kavachanda C, Kaw NSK, Kelly A, Khan SEA, Masri B, Nakarmi S, Parlingdungun F, Rahman N, So H, Soroush MG, Thilakarathne AS, Traboco L. APLAR recommendations on the practice of telemedicine in rheumatology. *Int J Rheum Dis*. 2022 Mar;25(3):247-258. doi: 10.1111/1756-185X.14286. Epub 2022 Jan 19. PMID: 35043576.

DEPARTMENTAL ACTIVITIES

1. Observed lupus day and organized Lupus walk (10-5-24)
2. Organized Bone symposium on osteoporosis day (20-10-23)
3. 8th International Shalamar Conference
4. Title: Healthcare and Health Education in AI era on 26-04-24 to 27-04-24
5. Dedicated Rheumatology session; "The miracle of human hand" with Guest speaker, Prof Mehmet Tuncay Duruoz from Turkiya
6. Collaborative MSK USG teaching sessions with Dorset University Hospitals twice / month
7. Collaborative Rheum-Path session with Shaukat Khanum hospital pathology department. Once /month (Renal biopsy slide discussion)
8. Collaborative teaching session about latest guidelines with rheumatology department Sir Ganga Ram Hospital .

LAUNCH OF ARTHRITIS CARE FOUNDATION'S REGISTRY FOR TARGETED SYNTHETIC DMARDS

Courtesy : Prof. Muhammad Ahmed Saeed

PROF. MUHAMMAD AHMED SAEED
MBBS, FRCP, FACP, FACR
FCPS Internal Medicine
FCPS Rheumatology
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Consultant Rheumatologist, and visiting
Faculty National Hospital Post-graduate
Institute.
Director and Consultant Rheumatologist,
Arthritis Care Centre, Lahore
Co-Chair and Founding Board Member,
Arthritis Care Foundation
President Pakistan Society for
Rheumatology (PSR)



JAK inhibitors are one class of drugs approved across several immune mediated diseases by FDA. Tofacitinib was the first JAKi which was launched in 2012 for the indication of Rheumatoid arthritis. In Pakistan the first generic was made available in 2021 coinciding with FDA's black box warning following the publication of the oral surveillance trial.¹ According to this post-marketing surveillance trial in individuals over the age of 50 with at least one CV risk factor the Hazard ratio of Major adverse cardiovascular events was 1.24 in patients who were on Tofacitinib 5 mg twice daily as compared to anti-TNF, and malignancy risk of Tofacitinib was estimated at HR of 1.47. This has sparked concerns within the medical community in general as well as patients who are already on this medication. However, considering that JAK inhibition is a potential target across the spectrum of autoimmune diseases and being an oral drug and availability of cheaper generics (than most of the biologics), it is pertinent to consider them as viable option in selected group of patients.

A research consortium of two academic fellowship programs and multiple rheumatology services under the umbrella of Arthritis Care Foundation has been able to set-up a registry gathering the real-world experience of Tofacitinib in Pakistani patients. This registry is primarily looking at long-term effectiveness and safety profile in our population. By examining the outcomes and adverse events associated with Tofacitinib therapy in a diverse patient cohort, we aim to provide clinicians with evidence-based guidance for optimizing treatment strategies and mitigating potential risks. This effort underscores the importance of real-world data in informing clinical decision-making and enhancing patient care in the context of Jak inhibitors and their use across immune mediated diseases in Pakistan.

REFERENCES

1. Ytterberg SR, Bhatt DL, Mikuls TR, Koch GG, Fleischmann R, Rivas JL, Germino R, Menon S, Sun Y, Wang C, Shapiro AB. Cardiovascular and cancer risk with tofacitinib in rheumatoid arthritis. *New England Journal of Medicine*. 2022 Jan 27;386(4):316-26.

IMPORTANT RHEUMATOLOGY RESEARCH UPDATES

FATIMA MEMORIAL HOSPITAL, LAHORE

Courtesy : Prof. Muhammad Haroon

ANALYSIS OF RISK FACTORS ASSOCIATED WITH DIFFUSE ALVEOLAR HAEMORRHAGE IN PATIENTS WITH ANCA-ASSOCIATED VASCULITIS

A retrospective study was conducted from January 2012 to May 2023 focusing on patients diagnosed with AAV. Clinical and laboratory data were collected from these patients. The potential predictors of AAV combined with DAH were evaluated and determined by using multivariate Logistic regression analysis.

A total of 234 patients with AAV were included. Among this cohort of AAV, 85 patients developed DAH, with an incidence rate of 36%, and the average age was 63±12. Using multivariable logistic regression analysis, it was noted that Age [OR-1.037 (95%CI: 1.006, 1.071), p=0.019], platelet count [OR-0.996 (95% CI: 0.992, 0.999), p=0.029], ESR [OR-1.028 (95%CI: 1.015, 1.042), p<0.01], Haemoglobin [OR-0.978 (95%CI: 0.959, 0.996), p=0.024], and haematuria [OR-3.77 (95%CI: 1.677, 8.976), p=0.001] were independent predictors of AAV combined with DAH.

This study shows that some simple clinical parameters (age, Hb, ESR, PLT and haematuria) have the potential to predict the risk of AAV patients complicated with DAH.

REFERENCE:

Analysis of risk factors associated with diffuse alveolar haemorrhage in patients with ANCA-associated vasculitis and construction of a risk prediction model using line graph. *Clin Exp Rheumatol*. 2024 Apr;42(4):864-871

VERY LATE ONSET SYSTEMIC LUPUS ERYTHEMATOSUS - COMPARISON WITH YOUNGER PATIENTS

Usually it is considered that SLE hardly if ever would have its onset after the age of 60 years, and hence, not surprisingly, data on such very late onset SLE (vSLE) patients is scarce. In this study, authors have characterized a large SLE patient cohort from their SLE clinic, and compared the clinical and serological features at the different ages groups categorised based on the age at diagnosis, focusing on those whose disease began at 60 or later.

Lupus patients who were evaluated from January 1978 to May 2023 were included in this study. Such lupus patients were divided into four groups according to age at diagnosis: juvenile SLE (jSLE - <18 years); adult SLE (aSLE - 18-49 years); late SLE (lSLE - 50-59 years); vSLE (≥ 60 years).

Overall, 845 patients were enrolled in this study. jSLE, aSLE, lSLE, and vSLE groups included 153 (18.1%), 630 (74.6%), 47 (5.56%), and 15 (1.78%) patients, respectively. The mean age at diagnosis in vSLE patients was 66.7 years. Strikingly less female-to-male ratio was noted in the vSLE group (4:1; p=0.282). vSLE patients had the lowest survival time (20.3 years; p<0.001). The most frequent clinical feature at follow-up in all groups was arthritis, and arthritis was least common among vSLE patients (73.3%; p=0.043). Oral ulcers, Sjögren's syndrome (SS - 33.3%; p<0.001) and rheumatoid arthritis (RA - 13.3%; p<0.001) was more common in patients with vSLE. Neuropsychiatric involvement, myositis, positive anti-dsDNA antibodies and low C3 levels were significantly less common among vSLE patients.

REFERENCE:

Rheumatology, Volume 63, Issue Supplement 1, April 2024, keae163.191, <https://doi.org/10.1093/rheumatology/keae163.191>

METHOTREXATE USE NOT LINKED WITH INCREASED INTERSTITIAL LUNG DISEASE (ILD) RISK AMONG PATIENTS WITH DERMATOMYOSITIS (DM)

ILD affects approximately 23% of DM patients and the commonly used MTX has generally been considered to carry a low risk of pneumonitis and pulmonary fibrosis in 0.3% to 11.6% (in RA), respectively. Such risks have been the cause of concern for the use of MTX in ILD.

Patients were recruited from the NIH-sponsored All of Us Research Program and enrolled DM patients (without baseline DM) starting immunomodulating treatment like azathioprine, intravenous immunoglobulin, MTX, mycophenolate mofetil/mycophenolic acid [MMF/MPA], rituximab, or systemic steroids. Primary outcome was ILD risk associated with MTX exposure using Kaplan-Meier and multivariable Cox proportional hazards regression modelling.

Of 163 patients with DM, 58 (36%) received MTX and 105 (64%) did not. The study was powered (80%) to detect a 12.7% absolute difference in ILD between groups. MTX exposed vs un-exposed were demographically and clinically similar. DM-ILD Rates were equal and paralleled to the rates reported for ILD in

DM. For example, 18 MTX-exposed (17%), 9 MTX-unexposed (16%), and no significant differences in ILD risk with noted with MTX exposure (HR 0.79; 95% CI, 0.35-1.78; P = .56)

Methotrexate was not associated with increased ILD risk, and similar were seen with MMF or RTX use. Methotrexate was negatively associated with malignant neoplasm, supporting possible prescribing patterns for DM subtypes or suggesting MTX is less tumorigenic.

REFERENCE:

JAMA Dermatol. Published online May 1, 2024. doi:10.1001/jamadermatol.2024.0785

FDA ALERTS HEALTH CARE PROFESSIONALS OF PREGNANCY PROBLEMS ASSOCIATED WITH THIOPURINES, SUCH AS AZATHIOPRINE

In April 2024, FDA has alerted health care professionals of the rare risk of intrahepatic cholestasis of pregnancy (ICP) associated with the use of thiopurines (azathioprine, 6-mercaptopurine, and 6-thioguanine).

Thiopurines are immunosuppressants with a known risk of hepatotoxicity. Cases of ICP have been reported among pregnant patients using azathioprine or 6-mercaptopurine. Thiopurines are not FDA-approved to treat inflammatory bowel disease or SLE; however, the published treatment guidelines indicate that azathioprine or 6-mercaptopurine may be appropriate to continue on an individualized basis for management of some immunologic conditions during pregnancy.

Postmarketing cases of ICP have been reported in women treated with drugs in the thiopurine class during pregnancy. ICP symptoms and elevated bile acid levels improved following azathioprine discontinuation; hence, pregnant patients should discontinue use of thiopurines if they develop ICP.

FDA is now requiring manufacturers to update labeling to include additional warning information on the risk of ICP associated with thiopurines

TAPERING DMARDS AMONG PATIENTS WITH RHEUMATOID ARTHRITIS IN REMISSION?

In this randomized, open labelled trial, tapering of DMARDS was examined among RA patients in remission. Although, maintenance of remission was seen in some, many DMARD tapering patients did flare and were unable to maintain flare-free survival compared to those on stable conventional synthetic DMARDS (csDMARDs).

In this 3-year non-inferiority study of csDMARD tapering, 160 adults in remission were randomized to either 1) continue stable csDMARD; 2) reduce to half-dose csDMARDs, or 3) half-dose csDMARDs for 1 year followed by csDMARD withdrawal. The primary endpoint was disease flare over 3 years. The non-inferiority margin of 20%.

A total of 160 RA patients were randomized to stable csDMARDs (n=80), half-dose csDMARDs (n=42), or half-dose csDMARDs tapering to withdrawal (n=38). 155 patients were included in the per-protocol analysis and 139 completed 3-years follow-up without major protocol violation.

At the end of the 3-year study, flare-free results were seen in: 80% stable-dose group; 57% half-dose group; 38% half-dose tapering to withdrawal group. The results with the tapering regimens were beyond the non-inferiority margins for both the half-dose (23%) and withdrawal (40%) groups. Adverse events were similar between groups.

These data demonstrate there is a significant risk of flare when embarking upon a csDMARD tapering strategy and informs the prescriber as to the potential risk and benefits of different treatment strategies in RA management.

REFERENCES:

The Lancet Rheumatology. Published: April 04, 2024 DOI: [https://doi.org/10.1016/S2665-9913\(24\)00021-3](https://doi.org/10.1016/S2665-9913(24)00021-3)

HYPERPIGMENTATION RELATED TO HCQ USE IS COMMON AND DAILY SUN EXPOSURE TIME PROVIDES A PROTECTIVE EFFECT

In this cross sectional study, authors aimed to describe the clinical features of patients with HCQ-induced pigmentation and tried to analyse the potential risk factors associated with this. Patients who had received HCQ treatment for ≥ 6 months were included. Univariate and multivariate analyses were employed to calculate the statistical association between HCQ-induced pigmentation and multiple variables/confounders.

Of 316 patients, 83 (26.3%) patients presented hyperpigmentation during HCQ treatment. hyperpigmentation was presented after a median duration of HCQ

treatment of 12 months (interquartile range, 6.0–30.0 months) with a median cumulative dose of 108 g of HCQ (interquartile range, 36–288 g). The most frequently affected sites of pigmentation were the face (60.2%), lower limbs (36.1%) and hands (20.5%)

Multivariate analysis revealed an independent correlation between HCQ-induced pigmentation and daily sun exposure exceeding 1 h (or: 0.431; 95% ci: 0.208–0.892; p = 0.023).

To conclude, about one quarter of patients develop HCQ-induced hyperpigmentation, with an incidence rate of 26.3%. Importantly, daily sun exposure time exhibited a protective effect against HCQ-induced pigmentation.

REFERENCE:

Hydroxychloroquine-induced pigmentation in rheumatic diseases: prevalence, clinical features and influencing factors. *Rheumatology*, 2024; keae217

TREATMENT EFFICACY AND SAFETY OF ADALIMUMAB VERSUS TOCILIZUMAB IN PATIENTS WITH ACTIVE AND SEVERE TAKAYASU ARTERITIS: AN OPEN-LABEL STUDY

There has been ongoing debate regarding superiority or equal effectiveness of anti TNF agents with Tocilizumab among patients with TNFi.

In this randomized, controlled, open-label study, authors aimed to compare the efficacy and safety of adalimumab (ADA) vs tocilizumab (TCZ) in patients with Takayasu arteritis (TAK). For this study, forty patients with active and severe TAK were enrolled. They were treated with ADA (n=21) combined with glucocorticoids (GCs) and MTX or TCZ (n=19) combined with GCs and MTX. The planned follow-up duration was 12 months. The primary end point was the efficacy rate (ER) at 6 months. The secondary end points included ER at 9 and 12 months, relapse rate, GC tapering, adverse effects, and life quality changes during treatment.

Intention-to-treat (ITT) assessment was made, and authors describe that the ER at 6 months was higher in the ADA group (85.71% vs 52.63%, P=0.02). A similar direction of effect was noted in the per-protocol set (89.47% vs 62.50%, P=0.06). The percentages of patients who achieved a GC dose of ≤10 mg/day at 6 months were similar between the ADA and TCZ groups (47.37% vs 43.75%, P=0.83). The ERs at 9 and 12 months were similar between the two groups (P>0.05). During the first 12 months of treatment, the relapse rate and adverse event incidence were comparable between the two groups (ADA vs TCZ: 9.52% vs 10.53%, P=0.96; 38.10% vs 47.37%, P=0.55, respectively). To conclude, authors describe that ADA combined with GCs and MTX may be more efficacious than TCZ combined with GCs and MTX among patients with active and severe TAK.

REFERENCE:

Rheumatology, Volume 63, Issue 5, May 2024, Pages 1359–1367, <https://doi.org/10.1093/rheumatology/kead387>

TOFACITINIB THERAPY IN REFRACTORY INFLAMMATORY MYOSITIS: A RETROSPECTIVE COHORT STUDY OF 41 PATIENTS

Authors in this study tried to evaluate the efficacy and safety of tofacitinib in treatment-refractory inflammatory myositis in a routine real-world single-centre clinical setting. All patients with refractory inflammatory myositis treated with tofacitinib from a single urban centre in Vancouver, British Columbia, Canada, were included from June 2016 to December 2022. The medical records of these patients were retrospectively reviewed. Diagnoses of total 41 patients recruited include: 23 with classic DM, 12 with amyopathic DM (ADM) and six with PM phenotype.

The patients failed an average of four to five non-steroidal immunosuppressants before initiation of tofacitinib. In the classic DM and ADM group, tofacitinib offered clinically and statistically significant cutaneous improvement. In all myositis patients including the PM phenotype, no significant muscle strength improvement to tofacitinib was observed. 53.7% of the patients discontinued tofacitinib due to lack of benefit or death. Only 19 patients remained on tofacitinib at the conclusion of this study. Tofacitinib demonstrated clinically and statistically significant improvement in cutaneous disease activity.

To conclude, Tofacitinib appears to be highly effective for only cutaneous manifestations in classic DM and ADM; however, minimal benefit in muscle strength in the DM or PM phenotype were observed.

REFERENCE:

Rheumatology, Volume 63, Issue 5, May 2024, Pages 1432–1436, <https://doi.org/10.1093/rheumatology/kead404>

DEPARTMENTAL ACTIVITIES OF ARTHRITIS CARE FOUNDATION, LAHORE

Courtesy : Prof. Muhammad Ahmed Saeed

FCPS RHEUMATOLOGY CLINICAL MOCK EXAM (2024)

We recently hosted the FCPS Rheumatology Clinical Mock Exam (2024) where talented doctors from across the region gathered to hone their skills and share knowledge. It was an inspiring day filled with learning, collaboration, and dedication to advancing arthritis care. A big thank you to all the participants for their commitment to excellence and continuous improvement in patient care. Together, we're making strides toward better health outcomes for those affected by arthritis.

FACULTY:

Prof. Nighat Mir Ahmad, Prof. Sumaira Farman Raja, Prof. Muhammad Ahmed Saeed, Dr. Saira Elaine Anwer Khan, Dr. M. Rafaqat Hameed, Dr. Shabnum Batool, Dr. Yasir Imran, Dr. Bilal Azeem Butt, Dr. Saba Sajad, Dr. Amina Ahmad, Dr. Muhammad Faiq, Dr. Mar-yam Amer

Venue:

Arthritis Care Foundation, Lahore.

AFTARI DINNER

We extend our heartfelt gratitude for gracing Arthritis Care Foundation's Aftari dinner (2024) with your presence. Your support is invaluable to us, and your participation truly made the event memorable.

Thank you for standing with us in our mission to provide care, support, and resources to those affected by arthritis. Together, we are making a difference in the lives of individuals and families dealing with this condition.

We look forward to your continued support and involvement in our future endeavors. With sincere appreciation,

Prof. Nighat Mir Ahmad
Prof. Sumaira Farman Raja
Prof. Muhammad Ahmed Saeed
Dr. Saira Elaine Anwer Khan



GLOBAL RHEUMATOLOGY EDUCATIONAL INITIATIVE

3rd Annual Meeting 2023 Wednesday 11th, October 2023 at Fatima Jinnah Medical University

GUEST FACULTY:

Dr. Laura Lewandowsky Assistant Clinical Investigator Head, Lupus Genomics and Global Health Disparities Unit (USA)

Dr. Sarfaraz A. Hasni Staff Clinician Chief, Lupus Clinical Trials Unit Director, Lupus Clinical Research Program (USA)

VICE CHANCELLOR:

Prof. Khalid Masud Gondal (TI & Presidential Pride of Performance) Fatima Jinnah Medical University

ACF FACULTY:

Prof. Nighat Mir Ahmad
Prof. Sumaira Farman Raja
Prof. Muhammad Ahmed Saeed



GLOBAL RHEUMATOLOGY EDUCATIONAL INITIATIVE

3rd Annual Meeting 2023 Tuesday 10th, October 2023 at National Hospital and Medical Center.

GUEST FACULTY:

Dr. Laura Lewandowsky Assistant Clinical Investigator

Head, Lupus Genomics and Global Health Disparities Unit (USA)

Dr. Sarfaraz A. Hasni Staff Clinician Chief, Lupus Clinical Trials Unit Director, Lupus Clinical Research Program (USA)

CHAIRPERSON:

Prof. Shahida Khawaja CEO, National Hospital Postgraduate Training Institute & Medical Center

ACF FACULTY:

Prof. Nighat Mir Ahmad
Prof. Sumaira Farman Raja
Prof. Muhammad Ahmed Saeed
Dr. Muhammad Rafaqat Hameed
Dr. Anna Ahmad



GLOBAL RHEUMATOLOGY EDUCATIONAL INITIATIVE

3rd Annual Meeting 2023 Tuesday 10th October 2023 at King Edward Medical University Lahore

GUEST FACULTY:

Dr. Laura Lewandowsky Assistant Clinical Investigator Head, Lupus Genomics and Global Health Disparities Unit (USA)

Dr. Sarfaraz A. Hasni Staff Clinician Chief, Lupus Clinical Trials Unit Director, Lupus Clinical Research Program (USA)

Prof. Dr. Mahmood Ayyaz Vice Chancellor, King Edward Medical University Lahore

Prof. Dr. Muhammad Imran Chair & Dean Faculty of Medicine & Allied, King Edward Medical University Lahore

Prof. Nighat Mir Ahmad Chair & Founder Trustee, Arthritis Care Foundation

Prof. Sumaira Farman Raja Founder Trustee & Co-Chairperson, Arthritis Care Foundation

Prof. Muhammad Ahmed Saeed Co-Chair, and Founding Board Member, Arthritis Care Foundation



GLOBAL RHEUMATOLOGY EDUCATIONAL INITIATIVE

3rd Annual Meeting 2023 Monday 9th, October 2023 at Arthritis Care Foundation

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ACF FACULTY:

Prof. Nighat Mir Ahmad
Prof. Sumaira Farman Raja
Prof. Muhammad Ahmed Saeed
Dr. M. Rafaqat Hameed
Dr. Saira Elaine Anwer Khan
Dr. Mohammad Faiq



WORLD ARTHRITIS DAY 12TH OCTOBER - 2023

Arthritis is not just a condition; it's a battle. Let's fight it with awareness, understanding, and empathy.



LUPUS AWARENESS SEMINAR (2023)

At Central Park Medical College & Teaching Hospital



LUPUS AWARENESS WALK (2023)

at Central Park Medical College & Teaching Hospital



PUBLIC AWARENESS SESSION WITH A.S.I.F

ACF organized a public awareness session in collaboration with ASIF (Ankylosing Spondylitis International Federation) in 2023, express news and Novartis Pharma last Saturday to commemorate 'world Ankylosing Spondylitis day'. This affects young people and presents with back pain and can lead to lifelong suffering due to disability and loss of function.



ACF LUPUS SUPPORT GROUP SESSION (2023)

Venue: Emerald Hall, PC Hotel, Lahore

The session has featured a lineup of expert speakers who have shared their insights and best practices on how to manage lupus symptoms, including pain, fatigue, and inflammation. We have also discussed strategies for living well with lupus, including tips for maintaining a healthy lifestyle, managing stress, and building resilience.



LUPUS AWARENESS SEMINAR (2023)

Arranged by Arthritis Care Foundation & Mir Khalil ur Rehman Memorial Society, Jang Group of Newspapers and Endorsed by Pakistan Society for Rheumatology.



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Continued on page 7

Continued from page 6

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Sumera Ghani, Muhammad Ahmed Saeed, Tashia Malik, Zia ud Din, Sumaira Farman Raja, Nigat Mir Ahmad
Department of Rheumatology, National Hospital & Medical Centre Lahore Pakistan, *Department of Rheumatology, Lady Reading Hospital, Faisalabad Pakistan

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Rahuel Younus¹, Muhammad A. Saeed², Muhammad Arshad³, Samaira Farman⁴, Nighat M. Ahmad^{1,5}
1. Rheumatology, National Hospital and Medical Centre, Lahore, PAK; 2. Rheumatology, Central Park Medical College, Lahore, PAK; 3. Rheumatology, University of Health Sciences, Lahore, PAK

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European Review for Medical and Pharmacological Sciences | 2023; 27; 8628-8638

Screening of IL-22 first and second introns and FOXP3 second exon for SNPs and mutations with potential role in the susceptibility of SLE in selected population

N. HUSSAIN¹, S. ANEELA¹, N. AOSA¹, A. SAEED², T. AZIZ², A. MAJID³, S.A. ABDULHAKHEEM⁴, N.S. AL-ABBAS⁵, N.A. SHAER⁶, A.A. BARQAWI⁷, S. ALGHAMDI⁸, A. SHAKOORI⁹, S.A. ALSHAREEF¹⁰

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⁸Department of Biology, College of Science and Arts at Khulisi, University of Jeddah, Jeddah, Saudi Arabia

LUPUS : CONFRONTING THE WICKED ENEMY (A MINI SYMPOSIUM)

DOW UNIVERSITY HOSPITAL, KARACHI

Courtesy : Dr. Tabе Rasool

On May 31st, 2023, Dow University Hospital proudly hosted a symposium dedicated to advancing knowledge and treatment in the field of Lupus. The event brought together esteemed medical professionals, researchers, and advocates, underscoring the collective commitment to combating this complex autoimmune disease.

The remarkable success of this highly academic program is attributed to the relentless dedication and untiring efforts of Dr. Tabе Rasool, the Chief Organizer, Head of Department Rheumatology alongside his passionate team, including Dr. Afshan Siddiqui, Assistant Professor of Medicine, and Dr. Salma Salman, Senior Registrar in Medicine at Dow University hospital.

Under the patronage of Professor Iftekhar Ahmed, Dean of the Faculty of Medicine, the symposium featured insightful sessions led by leading experts in the field of Rheumatology. Dr. Mehfooz Alam, Senior Rheumatologist, initiated discussions on the challenges of diagnosing Lupus in clinical settings. This was followed by Dr. Tabе Rasool, Head of the Department of Rheumatology at Dow University Hospital, who explored the interpretation of various antibodies in Lupus and their association with disease subsets. Dr. Tahira Parveen, Head of Rheumatology at Liaquat National Hospital, shed light on the complexities of Lupus and anti-phospholipid Syndrome (APS) in pregnancy, addressing critical concerns for patients and healthcare providers alike. The symposium also hosted guests from various disciplines including recipient of the prestigious Sitara-e-Imtiaz — Prof. Khalid Mehmood.

The symposium coincided with World Lupus Day, a global observance dedicated to raising awareness about Lupus and advocating for improved diagnosis, treatment, and support for patients worldwide. This alignment emphasized the urgency of addressing the challenges posed by Lupus and the collective responsibility to empower patients and enhance their quality of life.

In closing, the symposium on Lupus at Dow University Hospital served as a beacon of collaboration, knowledge exchange, and innovation in the fight against this debilitating disease. By harnessing the collective expertise and dedication of the medical community, we remain steadfast in our commitment to advancing Lupus research, education, and patient care. Together, let us strive for a future where Lupus no longer poses a threat to health and well-being, but instead, serves as a testament to the resilience and determination of the human spirit.



MIDDLE EAST RHEUMATOLOGY CONFERENCE—2024

Courtesy : Dr. Syeda Rida-e-Zehra

04 case report abstracts were presented as E-Posters by Dr. Syeda Rida-e-Zehra, Trainee Fellow Rheumatology from Liaquat National Hospital, Karachi at the Middle East Rheumatology Conference 2024 that was held at Jumeirah Emirates Tower, Dubai from 19—21 April, 2024.



EULAR 2024—ANNUAL EUROPEAN CONGRESS OF RHEUMATOLOGY

Courtesy : Dr. Syeda Rida-e-Zehra

01 case report accepted for presentation at the Annual European Congress of Rheumatology, submitted by Dr. Syeda Rida-e-Zehra, Trainee Fellow Rheumatology from Liaquat National Hospital, Karachi.

APLAR 2024—26TH ASIA-PACIFIC LEAGUE OF ASSOCIATIONS FOR RHEUMATOLOGY CONGRESS

Courtesy : Dr. Syeda Rida-e-Zehra

01 case report accepted for presentation at the 26th Asia-Pacific League of Associations for Rheumatology Congress, submitted by Dr. Syeda Rida-e-Zehra, Trainee Fellow Rheumatology from Liaquat National Hospital, Karachi.

A TO Z OF IMMUNOLOGY IN RHEUMATOLOGY: RHEUMATOID FACTOR

SANDWELL AND WEST BIRMINGHAM HOSPITAL CCG, UK

Courtesy: Dr. Tajvur P. Saber

I would like to introduce a series looking at the most common rheumatological laboratory tests to help clarify some myths and misconceptions. Since rheumatoid arthritis is the most prototypical autoimmune rheumatic disease, we will start with the test done most commonly.

RHEUMATOID FACTOR

A rheumatoid factor is an autoantibody that may be IgM, IgG, IgA and even IgE. It is an antibody against epitopes (the antigenic determinants) on the FC portion of IgG.

Reminder of Immunoglobulin structure: Immunoglobulins are Y shaped glycoproteins created or secreted by plasma B Cells. They help neutralise or stop pathogens, or help the immune response. There is a heavy chain, in the centre that makes the Y shape, and two light chains on the upper prongs of the Y. The upper section is called the FAB part and the lower stem part is the FC region that interacts with the FC receptors on cell surfaces and some proteins of the complement system. The FC section is of 5 types, alpha IgA, delta IgD, epsilon IgE, gamma IgG and mu IgM. The FC region allows antibodies to activate the immune system when they interact with each other.

WHEN TO DO IT

With there being a focus on a window of opportunity in RA where treatment can absolutely halt the disease, it is important to suspect, investigate and treat it soon. If a patient has tender joints and especially morning stiffness that lasts more than 30 or even 60 minutes this is possibly rheumatoid arthritis. The swelling can occur a little later. There is usually bilateral symmetrical small joint arthritis. If a large number of joints are involved then it can involve small and large joints. It is probably not needed if only 2 or more large joints are involved such as knee joints. This is more likely to represent osteoarthritis, especially if the patient is above 35 years of age or overweight.

PREVALENCE

This is present in 2-10% of the normal population In rheumatoid arthritis in 70-80% of patients.

- Other autoimmune disorders, including:
 - Sjögren syndrome 75-95%
 - Lupus 15-30%
 - Scleroderma 20-30%
 - Mixed connective tissue disease 50-60%
 - Juvenile idiopathic arthritis (JIA) in children and teens
 - Sarcoidosis
 - Chronic infections associated with hypergammaglobulinaemia, including:
 - Hepatitis C (liver)
 - Tuberculosis (mostly affects the lungs)
 - Endocarditis (heart)
 - Syphilis
 - Leprosy
 - AIDs
 - Infectious mononucleosis
 - Parasitic infections
 - Certain types of cancer, including leukemia and myeloma
 - Pulmonary fibrosis
- High levels (> 400 IU/ml) are most common in
- Rheumatoid Arthritis and/or Sjögrens syndrome especially associated with vasculitis or cryoglobulinaemia.
 - In bacterial endocarditis where they fall after effective treatment.

GENDER

Checked in both males and females but rheumatoid arthritis is more common in women 2:1

AGE BRACKET

Can be checked in children and young people where it can help identify JIA of rheumatoid type and in adults

When does it become positive: We know from lab samples stored in US Army recruits who later developed RA that the rheumatoid factor can become positive often 10 years before diagnosis.

When to repeat: if positive at baseline then there is not need to repeat it. There are studies that show that the levels usually remain constant but it has been seen that treating rheumatoid arthritis over a long time, can cause the level to drop to an extent, but this is of no diagnostic or prognostic value. If it is negative at baseline, it may be repeated annually, if rheumatoid arthritis is strongly suspected.

LEVEL

The level of rheumatoid factor may be important. If 0-30 iu/ml is negative, 30-50 iu/ml is borderline and a level above 50 iu/ml is positive. Strong positive means the level is at least 3 times above the positive level. A strong positive level may suggest aggressive RA which will require escalation of therapy and a higher risk of erosive, disabling disease.

If a laboratory only reports it as positive or negative that is less likely to be helpful than one which gives a level.

COST

The average cost from a better laboratory is 1000 to 1500 Rs at the time of writing this article.

Pakistan considerations: if a patient has advanced rheumatoid like disease, it may be worthwhile to see if still active and treat the condition, rather than doing further tests. A rheumatoid factor done at a small unofficial independent lab can be very unreliable and fluctuate between positive and negative.

FURTHER TESTS

To clarify if a patient has RA one can do additional tests of which Anti CCP antibody, also called ACPA is more reliable and specific, can be done.

When rheumatoid factor or CCP antibodies are positive the disease is called seropositive and otherwise seronegative. Some further antibodies are being tested in rheumatoid arthritis such as anti-vimentin antibodies.

To assess disease activity and safety before and following prescribing it is typical to assess a full blood count, liver function, renal function, ESR and if cost is not an issue CRP as well.

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PALESTINIAN RESILIENCE: NAVIGATING RHEUMATOID ARTHRITIS AMIDST CONFLICT

SANDWELL AND WEST BIRMINGHAM HOSPITAL CCG, UK & ARAB AMERICAN UNIVERSITY, JENIN, PALESTINE

Courtesy: Dr. Tajvur P. Saber

AUTHORS

Abdalrahman Kamal Abdalrahman Mari, Arab American University, Jenin, Palestine
Tajvur Saber, Sandwell and West Birmingham Hospital, Birmingham, UK.

BACKGROUND

I would like to introduce a series of articles, case studies from Palestine, this is the first of such cases. Dr Mari is a fourth year medical student at Arab American University of Jenin, in the West Bank, Palestine.

ABSTRACT

Rheumatoid arthritis (RA) is the leading inflammatory autoimmune rheumatological health disorders prevalent worldwide and a major cause of disability in working age. Therefore, despite the fight against RA being a battle in any part of the world, executing this, in a nation with the political situation sensitive and encumbered as Palestine, complicates the fight further. The road to healthcare is hindered by movement restrictions, and limitations in access to good healthcare facilities. We present the case of Ms FAM, whose journey exemplifies the intersection of health, politics, and human resilience.

INTRODUCTION

As a chronic autoimmune inflammatory disease that primarily affects the joints, whether diagnosed through laboratory tests, or symptoms like pain or stiffness in the joints, rheumatoid arthritis is much more than the narratives captured in texts or instructions. For Ms FAM, who resides in the Palestine, RA means more than painful joints – it becomes a struggle against not just the factors that lead to RA, but against the entire system of oppression inequality at many levels not least of all including apartheid.

PATIENT PROFILE:

Name: FAM

Age: 47

Location: Palestine

THE JOURNEY

In 2000, the 24 year old lady's wrists ached, her fingers stiffened. She attributed it to farm work—early mornings and the cold weather. The pain intensified, swelling followed. But seeking medical help was a luxury in a land where checkpoints and political instability dictated movement.

About 23 years ago, in the fragile healthcare system our patient, reached a doctor in her city, Jenin. She was diagnosed and treated for osteoporosis, but her wrists still throbbed. Then came the Al-Aqsa Intifada—the uprising that ignited in September 2000. For our protagonist, it wasn't just a political event; it was a tempest that swept away what little normalcy was present, leaving chaos in its wake. Checkpoints, curfews, and scarce resources increased. Herbal remedies replaced prescriptions—a desperate act in the face of conflict.

Later another doctor suspected RA. She was prescribed Prednisolone, that brought relief, but its side effects—weight gain, facial swelling—were harsh. Bone deformities loomed.

As political instability continued in Palestine and forced FAM to make impossible choices. Her wrists, now limited, fingers losing shape, Prednisolone (5 mg/day) became her fragile bridge to functionality. In the shadow of conflict, FAM clung to her steroids, the only means of survival. Freedom of movement remained elusive, a cruel irony in a land yearning for peace.

CURRENT CHALLENGES

During Ramadan 2023—a sacred month—a flare struck the lady. FAM, now 47 years old, was limited to the only medicines, praying for relief. Her family—pillars of strength—held her up. But when medication ceased, due to lack of access, her abilities progressed.

Visible symptoms told her story: deformed hands—a testament to resilience, a butterfly rash on her face—a silent plea for understanding.

CONCLUSION

This story isn't just a medical record; it's a cry for justice.

FAM's struggle isn't unique—millions suffer. But her context—the checkpoints, the siege—makes it extraordinary.

Fatima's wrists bear witness to Palestine's pain. As researchers, we wield pens, not swords. Let us write her story—of suffering, resilience, and hope. Let us advocate for change, for a world where healthcare transcends borders, politics, and conflict.

EDUCATIONAL IMPACT

'See this face, these hands? They're not just symptoms—they're lives.'

Note: This case report is dedicated to the countless patients who navigate life's minefields, their joints echoing the struggle of a nation.

DEPARTMENTAL ACTIVITIES OF RHEUMATOLOGY DEPARTMENT

LIAQUAT NATIONAL HOSPITAL, KARACHI

Courtesy : Dr. Syeda Rida-e-Zehra

LUPUS AWARENESS WALK: NOT ALL WOUNDS ARE VISIBLE

The department of rheumatology organized walk to spread awareness about the disease “Systemic Lupus Erythematosus (SLE)” on Wednesday, 17 May 2023 at Liaquat National Hospital. Its an autoimmune systemic disease and very few common people and some medical specialist know about it. For the same reason, SLE is misdiagnosed or mistreated in the earlier days of its manifestation and sometimes, the patient has to bear irreversible damage to the organ or even life. This disease is more common in young females and initial presentation can be non-specific for e.g., fever, easy fatigue, weight loss, joint pain, non-specific rashes etc. These symptoms are also present in other diseases and lead to delay in correct diagnosis and management.



Due to aggressive nature of the disease and an organ or life-threatening course, it is utmost important that the patient should be referred to a trained rheumatologist at earliest possible. The only way to achieve this target is to create awareness in the medical and surgical specialists and common people through various events.

PRE-CONFERENCE WORKSHOP

A pre-conference workshop of the 26th Annual International Pakistan Society for Rheumatology (PSR) Conference was arranged at Liaquat National Hospital “Research Reinvented: the power of Artificial Intelligence with ground breaking AI tools, the possibilities are endless!” which was attended and appreciated



by faculties and trainees.

UNVEILING RHEUMATOLOGY DEPARTMENT'S LATEST ENDEAVOR

This year, 3rd edition of our book “Into the Rivers of Rheumatology” was published comprising distinctive rheumatological cases presenting at our department at LNH.



CME ON OSTEOPOROSIS – FROM FRAGILITY TO STRENGTH

On December 23rd, 2023 the department of Rheumatology organized a CME on Osteoporosis – “From Fragility to Strength” at LNH to foster knowledge and improve practice among GPs and post graduate trainees. A quiz competition was also organized at the CME to encourage learning.



CAREER GUIDANCE IN RHEUMATOLOGY AT THE CAREER FAIR –2024

The department of rheumatology LNH is proud to share that their new fellow trainee Dr. Syeda Rida-e-Zehra was invited as a speaker to give a talk as the pathway to medicine and rheumatology at a career fair for the undergraduate and postgraduate trainees.



It indeed reflects the high standards and expertise cultivated within the training program .

Her insightful presentation was followed by a significant number of candidates visiting the rheumatology booth for career counselling provided by Dr. Tahira Perveen, the head of department of Rheumatology at LNH, Karachi.



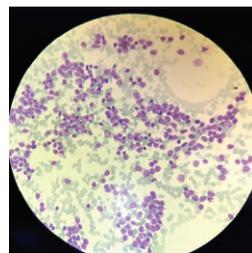
CLUES TO BLUES

LIAQUAT NATIONAL HOSPITAL, KARACHI

Courtesy : Dr. Syeda Rida-e-Zehra

CASE 1: FRACTURED CLUES

16 years old girl, resident of Quetta, attended Rheumatology OPD with severe pain in bilateral legs for 2 days. She denies any history of trauma. On examination young female seated on a wheel chair, in severe distress due to pain. There was no muscle tenderness, however joint examination not facilitated by patient due to apprehension. An urgent X-ray pelvis showed fractures necks of both femurs. Blood works revealed calcium 5.5mg/dL, Hb 5g/dL with MCV 102, raised WBC $27 \times 10^9/L$, and normal platelet count. With adequate nutrition, no symptoms of malabsorption, and no history of febrile illness, the blood count picture warranted further explanation therefore peripheral blood smear was reviewed which revealed 80-90% blast cells!



CASE 2: CLOTTING CLUES

24 years old female was referred by Vascular surgery to Rheumatology for arterial thrombosis of Right leg. She had a recent history of getting acrylic nails done from a salon, few weeks after which she noticed blackening of her big toe. Initially the patient perceived it to be onychomycosis and got the nail removed at a nearby clinic. The discoloration worsened so she ended up at Vascular Surgery practice and underwent right Femoral embolectomy. Rheumatology was requested to work her up for possible autoimmune phenomenon. Review of medical records revealed bicytopenia (low Hb and low platelet count). Peripheral smear showed leukoerythroblastic picture with myelocytes and metamyelocytes. Hematology was taken on board and a bone marrow biopsy was carried out that demonstrated.



DEPARTMENTAL ACTIVITIES OF RHEUMATOLOGY DEPARTMENT FAUJI FOUNDATION HOSPITAL, RAWALPINDI

Courtesy : Dr. Shahida Perveen

JOURNEY THROUGH JIA: AN INSPIRING STORY



In this edition of the newsletter, I'm thrilled to shine a spotlight on an extraordinary individual whose unwavering determination and resilience are an inspiration to us all. Allow me to introduce Dr. Ali Afzal, a remarkable student who, despite being diagnosed with Juvenile Idiopathic Arthritis (JIA) 17 years ago, continues to pursue his dream of becoming a Rheumatologist. Living with JIA presents formidable challenges. Yet, Dr. Ali refuses to let this diagnosis define his journey.

Dr. Ali first crossed paths with me during his inaugural year of medical school, grappling with uncontrolled JIA symptoms. Symptoms curtailed his physical activities, leading to decreased participation in sports and social events, and a sense of social withdrawal. However, he was fortunate to have an unwavering emotional support, encouragement, and understanding from his family, during his darkest moments.

Despite the hurdles posed by JIA, Dr. Ali earned admission to one of the premier medical institutions. Over the course of his medical education, his symptoms significantly improved, paving the way for academic success and rekindling his passion for sports, which he had sorely missed. He developed exceptional coping mechanisms to manage his symptoms effectively, enabling him to excel both in academic and extracurricular pursuits. Throughout his medical journey, Dr. Ali has epitomized dedication and perseverance. Beyond academic excellence, he exemplifies extraordinary compassion towards his peers and patients, always ready to offer a listening ear or a helping hand.

At the age of 27, Ali is happily married and on the cusp of taking his PLAB exams as he sets his sights on rheumatology training in UK. Additionally, he serves as a Research Fellow in the Rheumatology department at Fauji Foundation Hospital, actively contributing to ongoing research efforts.

As Dr. Ali continues his journey, I have unwavering confidence that he will leave an indelible mark on the field. His firsthand experience with JIA will undoubtedly inform his approach to patient care, ensuring that those under his guidance receive not only expert medical treatment but also unparalleled understanding, empathy, and compassion. I wish him all the best in life.

(courtesy Dr Babur Salim)

COMPLETION OF COPCORD PROJECT

Under the leadership of Dr. Saba Samreen, the Department has achieved a significant milestone with the completion of a COPCORD research project. This project focused on conducting epidemiological studies of rheumatic disorders in the Rawalpindi-Islamabad region, involving multiple community visits for interviews. The culmination of this endeavor promises to yield local data regarding the prevalence of rheumatic musculoskeletal disorders and the various factors influencing different aspects of the disorders. Such data will serve as a crucial resource for



informing future advocacy efforts and policy-making decisions in the field of rheumatology, ultimately enhancing the quality of care and support available to individuals affected by these conditions.



RESEARCH GRANTS

1. The Department of Rheumatology at Fauji Foundation Hospital, Rawalpindi has achieved a significant milestone by securing a prestigious research grant from the International League of Associations for Rheumatology (ILAR) for the year 2024. The grant is dedicated to the project titled 'Establishing the registry for rheumatoid arthritis {Pakistan registry of rheumatic diseases-Rheumatoid Arthritis (PRIME-RA)},' with Dr. Shahida Perveen leading as the Principal Investigator. This pioneering project aims to create a comprehensive registry for rheumatoid arthritis in Pakistan, providing valuable insights into its demographics and therapeutic implications. The research is poised to become a cornerstone in fostering future collaborations and advancements in the field of rheumatology, paving the way for enhanced understanding and management of this debilitating condition.



2. The Rheumatology department at Fauji Foundation Hospital (FFH) Rawalpindi, in collaboration with Foundation University of Health Sciences (FUSH), Islamabad, is spearheading a groundbreaking research project titled 'Serum Asprosin Levels in Rheumatoid Arthritis.' This collaborative effort has been facilitated by a grant of PKR 197,000/- through the Foundation University, Islamabad's internal funding program. Asprosin, a multifunctional adipokine, has been linked to various health conditions including obesity, insulin resistance, coronary artery disease, and inflammation. The primary objective of the study is to elucidate the relationship between serum Asprosin levels and the disease activity of rheumatoid arthritis (RA). By exploring this novel avenue, our study has the potential to not only enhance diagnostic and therapeutic approaches for RA but also to pave the way for future research endeavors in this field.

3. Dr. Shahida Perveen from Fauji Foundation hospital, Rawalpindi received a travel grant to present abstracts at the 25th Annual Congress of APLAR, held in Chiang Mai, Thailand in December 2023. As an early career rheumatologist, participating in such a prestigious event not only allowed her to share her research findings but also provided an invaluable opportunity for learning from global experts in the field. These experiences are crucial for the growth and development of young professionals like Dr. Perveen, as they offer exposure to diverse perspectives, cutting-edge research, and best practices in rheumatology.



APLAR YOUNG RHEUMATOLOGIST (AYR) AMBASSADOR

Dr. Saba Samreen's selection as an APLAR Young Rheumatologist (AYR) ambassador from Pakistan marks a significant achievement. As an AYR ambassador, Dr. Saba will serve as a representative of Pakistan within the APLAR community, fostering collaboration, knowledge exchange, and professional development opportunities for young rheumatologists across the region. Her appointment not only underscores her individual accomplishments but also reflects positively on the caliber of rheumatology professionals in Pakistan.



INVITED SPEAKER AT APLAR

Dr. Babur Salim has been invited as a speaker at APLAR 2024 in Singapore. Dr. Salim's inclusion in this esteemed event highlights his profound insights and significant advancements in the understanding and management of rheumatic diseases. His participation as a speaker not only affirms his standing as a leader in the field but also underscores the department's commitment to fostering excellence in rheumatology research and practice.



PARTICIPATION IN 25TH APLAR CONGRESS, 2023



The Rheumatology Department, FFH, Rawalpindi showcased its remarkable contributions at APLAR 2023, with a significant presence marked by six accepted poster presentations. These presentations, a testament to the department's ongoing research endeavors, covered a spectrum of topics crucial to the



field. Moreover, consultants from the department played pivotal roles in various APLAR activities and special interest groups, emphasizing their expertise and dedication to advancing rheumatology knowledge and care.

MSK ULTRASOUND WORKSHOP AT HAYATABAD MEDICAL COMPLEX, PESHAWAR

The Rheumatology department FFH, Rawalpindi, organized an MSK ultrasound workshop for rheumatologists at Hyatabad Medical Complex, Peshawar, on March 2nd, 2024. This pioneering initiative marked the inaugural MSK course in KPK and was conducted in collaboration with PGMI Peshawar, Dr. Zia-ud-din, and Dr. Alam Zeb. Rheumatologists from across the province participated in the workshop, which aimed to impart fundamental knowledge



about MSK ultrasound and provide hands-on experience to the attendees. Through interactive sessions and practical demonstrations, participants gained insight into the application of MSK ultrasound in diagnosing and managing musculoskeletal conditions, enhancing their clinical skills and expertise in the field.

ARRANGEMENT OF MOCK EXAMINATION FOR FCPS RHEUMATOLOGY CANDIDATES

The Rheumatology department at FFH, Rawalpindi organized a MOCK exam for FCPS rheumatology candidates from the 7th-10th February, 2024. This aimed to provide candidates with a simulated exam experience, mirroring the format and rigor of the actual CPSP examination. By offering a structured environment for candidates to test their knowledge, clinical reasoning, and examination skills, the MOCK exam played a crucial role in preparing them for the challenges they may encounter during the official exam. Candidates were able to assess their readiness and identify areas for further improvement under the guidance of experienced faculty members. This initiative underscores our department's commitment to supporting the professional development and of aspiring rheumatologists, they are equipped with higher quality care and contribute effectively to the field of rheumatology.



ANNUAL INTERNATIONAL CONFERENCE OF PSR, 2024

27th annual conference of PSR, 2024 is being hosted by Rheumatology department, FFH, Rawalpindi. As we prepare for the conference, to be held at the PC Hotel Bhurban on September 20th-21st, 2024, amidst the serene beauty of Murree, Pakistan, we anticipate a truly transformative experience for healthcare professionals. Against the breathtaking backdrop of majestic mountains and verdant landscapes, this prestigious event offers a unique platform for collaboration, learning, and networking in an environment conducive to intellectual exchange.

Attendees can anticipate a comprehensive program featuring keynote speeches, panel discussions, and workshops led by esteemed experts across various medical disciplines. Additionally, we are thrilled to offer pre-conference workshops (19th September 2024) tailored to provide immersive learning experience on key topics in rheumatology, with hands-on training and skill development. Don't miss this enriching opportunity in one of Pakistan's most scenic locales.

Save the dates and join us for a vibrant exchange of knowledge and ideas. Abstract submissions are open until July 31st, 2024. Submit your abstracts and secure your spot at this esteemed event!

As a special incentive for international delegates, 20 participants with accepted posters will receive a 100% waiver of registration, entitling them to access the scientific program, exhibition hall, welcome and Gala night voucher, conference bags/material, as well as meals throughout the event.

Convener: Dr. Babur Salim

Patron: Prof. Dr. Amjad Nasim

Co-Conveners:

Dr. Haris Gul, Dr. Saba Samreen, Dr. Shahida Perveen

Website: <https://www.pakrheumatology.org.pk/>

Email address:

infoprs2024@gmail.com

psrabstracts2k24@gmail.com

27th Annual International Conference
OF PAKISTAN SOCIETY FOR RHEUMATOLOGY (PSR)
20th - 21st September
Pearl Continental Hotel, Bhurban | 2024
THEME: INTERACTIVE RHEUMATOLOGY

PAKISTAN SOCIETY FOR RHEUMATOLOGY

27th ANNUAL PSR CONFERENCE 2024

PAKISTAN SOCIETY FOR RHEUMATOLOGY IS ONCE AGAIN BACK WITH THE MOST AWAITED EVENT
THEME: INTERACTIVE RHEUMATOLOGY
DATE: 20TH - 21ST SEPTEMBER, 2024
VENUE: PEARL CONTINENTAL HOTEL BHURBAN

CONFERENCE SECRETARIAT
PSR WEBSITE: www.pakrheumatology.org.pk
EMAIL: infoprs2024@gmail.com
CONTACT: +92-318-5910102

27th Annual International Conference
OF PAKISTAN SOCIETY FOR RHEUMATOLOGY (PSR)
20th - 21st September
Pearl Continental Hotel, Bhurban | 2024
THEME: INTERACTIVE RHEUMATOLOGY

PAKISTAN SOCIETY FOR RHEUMATOLOGY

LAST DATE for Abstract submission is 31st JULY 2024

FOR INTERNATIONAL DELEGATES:

Registration Fee: 200 US DOLLARS

NOTE:
Registration includes access to scientific program, exhibition hall, meals, conference souvenir, welcome and Gala night dinner.
(Registration does not include accommodation/travelling cost)

SPECIAL BENEFITS:
Registration fee waiver for international delegates with accepted research posters (oral / poster presentation) in PSR.
(This does not include accommodation / travelling cost)

VISIT OUR WEBSITE FOR DETAILS:
WWW.PSR2024.COM

ACHIEVERS IN RHEUMATOLOGY 2023

Courtesy : Dr. Hamza Alam



DR. IRFANUDDIN

Supervisor: **Dr. Babur Salim**
Institute: **Fauji Foundation Hospital, Rawalpindi**
Degree: **FCPS** Passing Year: **2023**



DR. FATIMA KHAN

Supervisor: **Prof. Dr. Wajahat Aziz**
Institute: **PIMS, Islamabad**
Degree: **FCPS** Passing Year: **2023**



DR. SAIRA TAHIR

Supervisor: **Prof. Dr. Wajahat Aziz**
Institute: **SZABMU-PIMS, Islamabad**
Degree: **MD Rheumatology** Passing Year: **2023**



DR. HUMA LIAQUAT

Supervisor: **Dr. Babur Salim**
Institute: **Fauji Foundation Hospital, Rawalpindi**
Degree: **FCPS** Passing Year: **2023**



DR. AVINASH PUNSHI

Supervisor: **Prof. Dr. Wajahat Aziz**
Institute: **PIMS, Islamabad**
Degree: **FCPS** Passing Year: **2023**

DR. OBAID UR REHMAN

Supervisor: **Dr. Shazia Zammurad**
Institute: **PIMS, Islamabad**
Passing Year: **2023** Degree: **FCPS**



DR. SAIMA RIAZ

Supervisor: **Prof. Dr. Tafazul-e-Haq Mahmud**
Institute: **Sheikh Zayed Hospital, Lahore**
Passing Year: **2023** Degree: **FCPS**



DR. FARZANA HASHMI

Supervisor: **Prof. Dr. M. Haroon**
Institute: **Fatima Memorial Hospital, Lahore**
Passing Year: **2023** Degree: **FCPS**



DR. SUMERA GHANI

Supervisor: **Prof. Dr. M. Ahmed Saeed**
Institute: **Training institute -National Hospital and Medical Centre, Lahore**
Passing Year: **2023** Degree: **FCPS**



BRUCELLA SACROILIITIS IN SEROPOSITIVE RHEUMATOID ARTHRITIS PATIENT ON HEMODIALYSIS

Courtesy : Dr. Sarah Azam Shah

ABSTRACT:

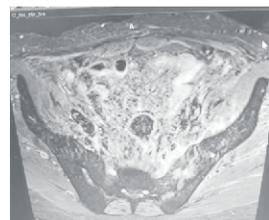
Brucella is a zoonotic granulomatous disease with multiorgan involvement. Though endemic in South Asia including Pakistan, diagnosis is often delayed because of unawareness.

Here we report a case of a 63-year-old male patient known case of end-stage renal disease and hypertension, who presented to rheumatology OPD in June 2022 with complaints of fever and backache. On inquiring it was found that he was treated by cardiology as a case of culture-negative endocarditis two months back. His examination showed a positive FABER test and pain at the left SI joint. He was admitted and advised work up which showed a raised CRP of 200, a White Cell count of 31,800 with 64% neutrophils. His echo was done again to look for any recurrence of vegetation but it was normal. His cultures were sent and came out negative. X-ray SI joints revealed obliteration of the left SI joint after which an MRI of the SI joints was carried out and it further confirmed the suspicion of left-sided infective sacroiliitis. Brucellosis and tuberculosis being endemic were considered as top differentials. The TB Gold test turned out negative but brucella antibody titers were found to be raised at 1:320. To further confirm the diagnosis, a biopsy of SIJ was performed which showed necrotizing granuloma. He was started on treatment for brucellosis with renal adjusted dose of streptomycin, rifampicin and doxycycline. His fever settled on the 5th day of treatment, however, a couple of days later he had an episode of acute coronary syndrome for which he was admitted to CCU and thereafter he left his treatment. This resulted in a recurrence of backache and fever. His brucella antibody titers had again risen to

1:160. He was then switched to renal renal-adjusted dose of amikacin for four weeks, rifampentine once weekly dose for 12 weeks. His sponded well to the also gradually improved. pleted six months of his right.



Healed Vegetation



1. Hyperintense signal in joint space indicating peri articular edema



2. Disrupted & decreased SI joint space

RHEUMATOLOGY SEMINAR—INTERNATIONAL BHURBAN CONFERENCE OF APPLIED SCIENCES AND TECHNOLOGY (IBCAST).

ISLAMABAD MEDICAL COMPLEX

Courtesy : Dr. Asif Bhatti

1ST RHEUMATOLOGY SEMINAR



- One day Rheumatology Seminar with the theme of practice pearls in Rheumatology was held on 24 August 2023.

- This was the one of four

days of international bhurban conference of applied sciences and technology (IBCAST).

- The IBCAST conference explore topics such as Advanced Materials, Aero structures, Biomedical Sciences, Control & Signal Processing, Cyber Security & Assurance Technologies, Fluid Dynamics, Medical Sciences, Underwater Technologies, Wireless Comm. & Radar, Artificial intelligence and Software Technologies.
- A large number of participants including Rheumatologist, Medical specialists, General practitioners, Post graduate residents of medicine and rheumatology, Medical students, Pharmacists and paramedical staff showed the keen interest in the seminar.
- Topics of common interest and importance were included that were discussed by the Senior Rheumatologists of Pakistan.
- In introductory and welcome address, Dr Asif Raza Bhatti, chief organizer of Rheumatology seminar elaborated that rheumatolo-

gists find all the symptoms, full expression of all physical findings, all laboratory abnormalities and catalogue of all radiological features during their clinical practice...

- Dr Babur salim discussed the diagnostic challenges of RA, which was well appreciated by the audience.

- Dr Javaid Mehmood Malik ex-president of PSR highlighted the different aspects of diagnosis and management of Gout, that participants showed keen interest.

- Dr M Haroon head of rheumatology at Fatima memorial hospital LHR taught the participants the approach to a patient with inflammatory backache, that was well appreciated at all levels.

- Dr Tahir Mehmood Hashmi, consultant



Rheumatologist at shifa international hospitals elaborated the journey of nr -SPA to AS.

- Dr Zahid Nabi consultant nephrologist form KRL hospital enlightened the participants on updates of the treatment of lupus nephritis and highlighted the significance of team work of rheumatology, nephrology and histopathology team for the management of



patients with lupus nephritis.

- Prof. Dr Wajahat Aziz ex president of PSR elucidated the cutaneous manifestations of lupus in his colorful presentation in an excellent way that became the center of attention of all the participants.

- Osteoporosis – a silent killer – was well elaborated by dr saba samreen assistant professor of rheumatology at fouji foundation hospitals RWP.

- Dr Tahira Parveen head of Rheumatology at Liaqat national hospital Karachi discussed the important topic of – Pregnancy and rheumatic diseases.

- In the end while paying vote of thanks program Coordinator dr Ayesha Waqar Niazi was ambitious to hold rheumatology programs in future as well, in view of keen interest of participants in rheumatology, In the closing ceremony shields were distributed by the chief guest DG medical services IMC NESCOM dr Najam Hussain to the speakers and organizers.

QUIZ

Courtesy : Dr. Sarah Azam Shah

Q: A 16-year-old boy presented to the rheumatology clinic with complaints of swelling of proximal interphalangeal joints particularly the 3rd proximal interphalangeal joints bilaterally. He denied any pain in the affected joints or the presence of early morning stiffness. There is no history of any systemic upsets. An X-ray of the hands was taken and only reported soft tissue swelling around the 3rd PIPs bilaterally. On examination, swelling was noted at the said joints without any tenderness and the range of the movement was also found to be normal. What is the most likely diagnosis for this boy?



Answer on last page

ACADEMIC ACTIVITIES IN RHEUMATOLOGY UNIT FEDERAL GOVERNMENT POLYCLINIC HOSPITAL, ISLAMABAD

Courtesy : Dr. Sarah Azam Shah

Currently there was induction of two FCPS Rheumatology trainees in January 2024, so currently there are Four FCPS Rheumatology residents in the unit.

SUCCESSFUL POST GRADUATE CANDIDATE

Dr Sarah Azam Shah cleared her FCPS Rheumatology in November 2022.



PUBLICATIONS

Khaliq T, Shan S, Shah SA, Saleem S, Adil MH. Carotid Intimomedia Thickness (CIMT) in Patients with Rheumatoid Arthritis; the Need for More Aggressive Cardiovascular Screening in RA. Journal of the College of Physicians and Surgeons-Pakistan: JCPSP. 2023 Apr 1;33(4):427-32.

POSTERS PRESENTED IN APLAR 2022 IN HONG KONG

- Carotid Intimomedia Thickness (CIMT) In Patients with Rheumatoid Arthritis; The Need For More Aggressive Cardiovascular Screening In RA. Poster # 594
- Blurred vision as a presenting symptom of Systemic Lupus Erythematosus Poster # 598.

POSTERS PRESENTED IN APLAR 2023 IN THAILAND

- Novel Hematological Markers Neutrophil to Hemoglobin Lymphocytes Ratio (NHL) and Platelets to Lymphocytes Ratio (PLR) and Its Association with the Disease Activity in Rheumatoid Arthritis. Poster # 549
- Loeffler's Endocarditis, A Cause of Endomyocardial Fibrosis in a Patient of Juvenile Idiopathic Arthritis. Poster # 609

- Risk of Herpes Zoster Infection in Patients with Autoimmune Inflammatory Rheumatic Diseases (AIIRDs) and Its Relation to Different DMARDs. Poster # 550.

- Assessment Regarding Knowledge of Osteoporosis, Its Diagnosis Management and Prevention among Health Care Providers Working In Tertiary Care Hospitals in Islamabad and Rawalpindi. Poster # 605.

INTERNATIONAL COURSES

Dr. Taqdees Khaliq, Dr. Benish Adil and Dr. Sarah Azam Shah successfully completed the 8 weeks APLAR Critical Appraisal Short course from 29th March 2023 till 20th May 2023.

From our department Dr Sarah Azam Shah participated as an active participant and delivered a presentation on the topic of "Critical appraisal of clinical practice guidelines" on 20th May 2023.

SUBMITTED FOR PUBLICATION

Fatigue Assessment Using FACIT-F Scale in All Axial Spondyloarthritis Patients Presenting To A Tertiary Care Hospital And Correlation Of FACIT F Score With BASDAI And BASFI Scores. (FAF-AXSPA).

Novel Hematological Markers Neutrophil To Hemoglobin Lymphocytes Ratio (NHL) And Platelets To Lymphocytes Ratio (PLR) And Its Association With The Disease Activity In Rheumatoid Arthritis.

Systemic Inflammatory Response Index (SII) as a novel biomarker in patients with rheumatoid arthritis.

Risk of herpes zoster infection in patients with rheumatic and musculoskeletal diseases and its relation to different DMARDs.



We are planning to publish the next issue in November 2024, In sha Allah Taala.

Please send us your departmental activities from May 2024 till October 2024, including titles of research papers published in National and International Journals.

The write-ups for the news and happenings in your Rheumatology department should be upto 100 words, each research highlight upto 200 words, summarized latest guidelines for any Rheumatic disease management upto 300 words and case report upto 400 words.

We would also appreciate receiving interesting quiz and images with two liner description.

Send your write-ups latest by **15 October, 2024** at the following addresses:

Tahira.Perveen@lnh.edu.pk
Humza.Masood@lnh.edu.pk
Rida.zehra@lnh.edu.pk

Quiz Answer:
Answer: Pachydermodactyly

**IN CASE OF ANY QUERY, PLEASE CONTACT AT
BELOW MENTIONED EMAILS
TAHIRA.PERVEEN@LNH.EDU.PK
HUMZA.MASOOD@LNH.EDU.PK**

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Rheumatology Department, Fauji Foundation Hospital Rawalpindi: A Brief Overview of the PSR 2024 Host

Established in 2007, the Rheumatology Department at Fauji Foundation Hospital, Rawalpindi has evolved from the modest beginnings into one of Pakistan's leading centers for comprehensive patient care, advanced diagnostic and therapeutic services, and impactful research. Key milestones include FCPS training accreditation in 2009, the introduction of filter clinics and electronic documentation in 2013, pioneering biologic therapies in 2014, and expanding its infrastructure in 2017 with a new OPD, enhanced inpatient facilities, and the relocation of the DEXA scan facility. The department has further advanced its diagnostic capabilities with MSK ultrasound-guided procedures in 2019 and capillaroscopy equipment in 2023.

Beyond its clinical and research achievements, the department is committed to education and community outreach. It has trained over a dozen consultant rheumatologists, now practicing nationwide. Department has published more than six dozen research papers in indexed journals, secured national and international grants such as HEC, COPCORD, APLAR, and ILAR. Department has active participation in different capacities at APLAR, contributing to advancements in rheumatology care on international platforms. The structured FCPS fellowship program, accredited by CPSP, features regular classes, case discussions, and MOCK exams to maintain high educational and training standards. The department also engages in community service through free medical camps for underserved populations, awareness walks, events on awareness and advocacy for rheumatic diseases, and early detection initiatives. Through continuous community engagement, patient feedback, and educational efforts, the department remains a cornerstone of rheumatology care in the region.



MOCK examination conducted for FCPS rheumatology candidates



Resident demonstrating the clinical examination during the class



Prof. Babur Salim representing Pakistan at APLAR Young Rheumatologist Board



Dr Haris Gul at APLAR SIG for scleroderma

