

07.00 – 08.45

Room 4

Industry supported symposium: A.Menarini Farmaceutica Internazionale SRL

Closing The Quality of Care Gap: Audit as a tool for optimal treatment, timely identification and referral of refractory gout patients

Aim:	Gout affects 1.4% of the UK population. Managing chronic hyperuricaemia with urate deposition by treating sUA levels to target is widely acknowledged as best practice. Using audit as a strategy for effectively managing and treating gout patients and identifying refractory patients, who may not be treated appropriately in primary care, will be the focus of this session.
Outcome 2:	Understanding of the importance of monitoring and treating to target, and the early identification of refractory gout patients: closing the quality of care gap between primary and secondary care using audit
Outcome 1:	Emphasising medical best practice for treating chronic hyperuricaemia with urate deposition: encouraging sharing of expertise with GPs, resulting in a solid patient portfolio
Outcome 3:	Awareness of potential long-term effects of poor symptom control through presentation of published data around comorbidities

07.30

Chair's welcome

Dr Richard Rees, Consultant Rheumatologist, London

07.40

Overcoming current challenges in the management of gout in primary and secondary care through audit

Dr David Turner, General Practitioner, Isle of Wight

08.00

Enhancing patient portfolios in secondary care through primary care outreach

Dr Ildiko Telegdy, Consultant Rheumatologist, Isle of Wight

08.20


Questions from the floor as well as pre-registered questions

Dr Richard Rees, Consultant Rheumatologist

08.40

Summary and close

Dr Richard Rees, Consultant Rheumatologist



‘A focus on Psoriatic Arthritis – a collaborative view’

Please join us on the 30th April 2014 to see the BAFTA and Emmy-nominated journalist, producer and presenter **Michael Mosley**, Chair an extremely thought-provoking and interactive symposium.

We aim to explore and demonstrate how joint clinic working can have a positive effect on patient outcomes through a range of stimulating presentations and case studies from expert speakers including:

Rheumatologists:

Dr Richard Haigh, Royal Devon and Exeter Hospital Foundation Trust
Professor Dennis McGonagle, Chapel Allerton Hospital
Dr Ira Pande, Nottingham University Hospital

Dermatologists:

Dr Mark Goodfield, Chapel Allerton Hospital
Dr Ruth Murphy, Nottingham University Hospital

Wednesday 30th April 2014

07:30 – 09:00

Hall 3B

Breakfast served from 07:30 – 08:00



This symposium is organised and supported by Janssen and is intended for Health Care Professionals only

07.30 – 09.00

Room 3B

Industry supported symposium: Janssen

A focus on Psoriatic Arthritis: a collaborative view

Chair: Michael Mosley, British journalist, medical doctor, producer and TV presenter

Aim: To explore and demonstrate how joint clinic working can have a positive impact on patient outcomes through a range of stimulating case study presentations from expert clinicians, and a Payor panel discussion

Outcome 1: Demonstrate the advantages of joint clinic working on patient outcomes through a variety of real-life patient case studies

Outcome 2: Encourage delegates to discuss patient cases with their dermatologists to facilitate earlier detection of psoriatic arthritis

Outcome 3: Provide delegates with the opportunity to discuss service re-design with a service commissioner

Faculty: **Rheumatologists:** Dr Richard Haigh, Royal Devon and Exeter Hospital Foundation Trust; Professor Dennis McGonagle, Chapel Allerton Hospital and Dr Ira Pande, Nottingham University Hospital

Dermatologists: Dr Mark Goodfield, Chapel Allerton Hospital and Dr Ruth Murphy, Nottingham University Hospital

Payor: Tim Jones, Commissioner, NHS England, East of England

09.00 – 10.30	Fibromyalgia: improving outcomes for patients
Hall 1C	Chairs: Prof Gary Macfarlane, University of Aberdeen, Aberdeen and Dr Euthalia Roussou, King George Hospital, Ilford
Aim:	The session will explore improving outcomes for fibromyalgia patients
Outcome 1:	Delegates will be aware of new epidemiological evidence which is informing new trials of management in patients with fibromyalgia
Outcome 2:	Delegates will learn of scientific studies (particularly imaging) which is improving our understanding of mechanisms
Outcome 3:	Delegates will understand the current evidence from systematic reviews of pharmacological and non-pharmacological management of fibromyalgia
09.00	Epidemiological studies informing new trials of managing patients with fibromyalgia Dr Gareth Jones, University of Aberdeen, Aberdeen
09.30	Understanding mechanisms in the development of fibromyalgia Prof Anthony Jones, University of Manchester, Manchester
10.00	Managing fibromyalgia: what works and what doesn't Dr Winfried Hauser, Klinikum Saarbrücken, Saarbrücken, Germany
09.00 – 10.30	Management of difficult lupus
Room 11	Chair: Prof David D'Cruz, King's College London, London
Aim:	To address specific areas of uncertainty in the care of complex lupus patients
Outcome 1:	Understand the management options for treatment resistant lupus nephritis
Outcome 2:	Discuss the diagnosis and management of uncommon lung manifestations such as shrinking lung syndrome and progressive interstitial lung disease
Outcome 3:	Discuss the differential diagnosis and management of lupus related demyelinating disorders, seizures and cognitive dysfunction
09.00	Management of cardiovascular risk Prof Ian Bruce, University of Manchester, Manchester
09.30	Lung disease: shrinking lung syndrome, progressive interstitial lung disease Prof Athol Wells, Imperial College London, London
10.00	Neuro-Psychiatric complications of systemic lupus erythematosus Prof Dr Tom Huizinga, Leiden University Medical Centre, Leiden, the Netherlands
09.00 – 10.30	Essentials in rheumatology: disease management
Hall 1A	Chairs: Prof John Axford, St George's Hospital, London and Dr Charles Mackworth-Young, Charing Cross Hospital, London
Aim:	A comprehensive update covering everything you need to know about changes in rheumatology
Outcome 1:	To prepare rheumatologists for revalidation and provide a valuable educational opportunity for trainees
Outcome 2:	Delegates will have been brought up-to-date on disease management
09.00	Adolescent rheumatology comes of age Dr Jon Ioannou, University College London, London
09.30	Sjögren's syndrome Dr Elizabeth Price, Great Western Hospital, Swindon
10.00	Paget's disease and other metabolic bone disorders Prof John Tobias, University of Bristol, Bristol

09.00 – 10.30

Room 12

Should we continue to ignore rheumatic disease related fatigue?

Chairs: Dr Caroline Flurey, University of the West of England, Bristol and Dr Kanta Kumar, University of Birmingham, Birmingham

Aim: To highlight the importance of rheumatic fatigue and to outline the current understanding of its mechanisms

Outcome 1: Delegates will have an increased awareness of the prevalence, impact and determinants of rheumatic fatigue

Outcome 2: Delegates will have a better understanding of the putative biological mechanisms of rheumatic fatigue

Outcome 3: Delegates will be familiar with current management options for rheumatic fatigue

09.00 **The epidemiology of rheumatic fatigue**

Dr Neil Basu, University of Aberdeen, Aberdeen

09.30 **Investigating the biological mechanisms of rheumatic fatigue**

Prof Wan-Fai Ng, Newcastle University, Newcastle-upon-Tyne

10.00 **Managing fatigue in rheumatic diseases**

Prof Sarah Hewlett, University of the West of England, Bristol

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09.00 – 10.30

Hall 1B

Tropical rheumatology 1: unusual infections in musculoskeletal diseases

Chair: Dr Elaine Smith, Gloucestershire Hospitals NHS, Gloucester

Aim: To improve the understanding in the presentation of unusual infections in musculoskeletal diseases

Outcome: Delegates will have learnt how to interpret pyrexia of unknown origin (PUO), how streptococcal infections are changing in their presentation and key points about leprosy

09.00 **Chronic bacterial and fungal arthritides**

Prof Mohammed Tikly, University of the Witwatersrand, Johannesburg, South Africa

09.30 **The changing face of streptococcal disease: an MSK perspective (rheumatic fever, necrotising fasciitis, joint sepsis)**

Prof Neil French, University of Liverpool, Liverpool

10.00 **Recognising leprosy: pointers for the busy rheumatologist**

Prof Diana Lockwood, London School of Hygiene & Tropical Medicine, London

09.00 – 10.30

Room 3A

Rheumatoid arthritis oral abstracts

Chairs: Prof Christopher Buckley, University of Birmingham, Birmingham and Prof Costantino Pitzalis, Barts and the London School of Medicine, London

09.00 **Smoking affects immune response to citrullinated autoantigens before clinical onset of rheumatoid arthritis in a Southern European cohort**

Dr Alison Cartwright, University of Oxford, Oxford



09.15 **Hypoxic regulation of epigenetic modifications during disease progression in rheumatoid arthritis**

Miss Kate Heron, University of Birmingham, Birmingham

09.30 **Assessing and addressing lifestyle cardiovascular risk in rheumatoid arthritis: a rural community hospital health promotion project**

Mrs Anne Thomas, Dolgellau Hospital, Gwynedd

10.00 **The influence of anti-TNF or rituximab on cancer incidence in patients with rheumatoid arthritis who have had a prior malignancy**

Dr Lucia Silva-Fernandez, University of Manchester, Manchester

10.15 **Can early, clinically significant radiographic progression in the first year of disease predict orthopaedic surgery in patients with rheumatoid arthritis?**

Mr Lewis Carpenter, University of Hertfordshire, Hatfield

09.00 – 10.30

Room 4

Spondyloarthritis special interest group

Chairs: Prof Dennis McGonagle, University of Leeds, Leeds and Dr Raj Sengupta, Royal National Hospital for Rheumatic Diseases, Bath

- Aim:** To update delegates in the pathogenesis of spondyloarthritis and the ongoing development of the BRITSpA spondyloarthritis group
- Outcome 1:** Delegates will understand the latest concepts regarding the pathogenesis of spondyloarthritis
- Outcome 2:** Delegates will be updated on the activities of the BRITSpA group and will learn how they can become involved
- Outcome 3:** Delegates will understand the impact of smoking on the development and prognosis in spondyloarthritis

09.00

Environmental factors in spondyloarthritis pathogenesis

Dr Peggy Jacques, University Hospital Gent, Gent, Belgium

09.30

Update on BRITSpA

Dr Helena Marzo Ortega, University of Leeds, Leeds

10.00

The effects of smoking on spondyloarthritis

Dr David Hutchinson, Royal Cornwall Hospitals, Truro

10.30 – 11.30

Exhibition | Tea and coffee

Exhibition hall



Please see exhibition floor plan on page 89 for catering points.

10.30 – 11.30

Exhibition hall

Poster viewing categories

125–157 BHPR audit and clinical evaluation

158–169 BHPR research: qualitative

170–180 BHPR research: quantitative

181–182 Muscle disorders

183–185 Orthopaedics and rehabilitation

186–191 Osteoarthritis: clinical features

192 Osteoarthritis: pathogenesis and animal models

193–197 Osteoarthritis: treatment

198–201 Osteoporosis and metabolic bone disease

202–206 Sjögren's syndrome and other connective tissue disorders

207–230 Spondyloarthropathies (including psoriatic arthritis)

231 Soft tissue and regional musculoskeletal disease fibromyalgia

Day two of our ever popular poster tours. Small groups are led by experts around carefully selected posters for a Q&A with the poster presenters. Each expert will lead delegates through a group of approximately 10 posters, allowing presenters to share their research in an interactive format.

Sign up for the poster tours at the poster desk in the **exhibition hall**. Tours are limited to 15 participants

10.30 – 11.30

Exhibition hall



British Health Professionals in Rheumatology poster tour

Poster tour leader: Dr Sarah Ryan, Haywood Hospital, Stoke-on-Trent

142 Clinician satisfaction may be improved by patient information leaflets sent in advance of appointments

Dr Katrin Becker, Great Western Hospital, Swindon

143 North west regional audit: management of polymyalgia rheumatica

Dr Madhura Castelino, University of Manchester, Manchester

146 Annual review for inflammatory arthritis patients: a nice extra but a challenge to implement

Mrs Patricia Cornell, Poole Hospital, Poole

158 Social interactions at the onset of rheumatoid arthritis and their influence on help seeking behaviour: a qualitative exploration

Ms Rumandeep Tiwana, Staffordshire University Centre for Ageing and Mental Health, Stoke-on-Trent

167 The potential use of physical activity to help manage fatigue in rheumatoid arthritis: lessons from other long term conditions

Ms Victoria Salmon, University of the West of England, Bristol

169 Is there evidence to support multidisciplinary healthcare working in rheumatology? A systematic review of the literature

Dr Lindsey Cherry, University of Southampton, Southampton

174 Effectiveness of patient-centred education in improving self-efficacy and health status in people with rheumatoid arthritis

Mrs Bernadette Hardware, Barnsley Hospital, Barnsley

180 Musculoskeletal pain sleep quality and restricted social activity

Miss Shula Baker, Keele University, Keele

10.30 – 11.30

Exhibition hall



Spondyloarthropathies poster tour

Poster tour leader: Dr Andrew Keat, Northwick Park Hospital, Harrow

208 Plasma microparticle levels are not raised in patients with ankylosing spondylitis

Mr Nicholas Bradley, University of Liverpool, Liverpool

214 Efficacy of apremilast an oral phosphodiesterase 4 Inhibitor on physical function and pain in patients with psoriatic arthritis and current skin involvement: results of PALACE 3 a Phase 3 randomised controlled trial

Dr Christopher Edwards, University Hospital Southampton, Southampton

215 Sustained clinical remission in patients with non-radiographic axial spondyloarthritis after two years of adalimumab treatment

Dr Aileen Pangan, AbbVie Inc., Chicago, United States

216 The work-related costs of ankylosing spondylitis in a UK cohort

Dr Stefan Siebert, University of Glasgow, Glasgow

221 Switching TNFi therapy in psoriatic arthritis

Miss Laura Blackler, Guy's and St Thomas' NHS Foundation Trust, London

223 Delay to diagnosis in axial spondyloarthritis: are we improving?

Dr Mark Sykes, Norfolk and Norwich University Hospitals, Norwich

224 The natural history of ankylosing spondylitis: results from the Scotland and Ireland registry for ankylosing spondylitis

Mrs Linda Dean, University of Aberdeen, Aberdeen

228 Effects of smoking in patients with ankylosing spondylitis and nonradiographic axial spondyloarthritis receiving TNF inhibitors

Prof Lale Ocal, Istanbul University, Istanbul, Turkey

10.30 – 11.00

Innovation theatre: Celgene

Exhibition hall



Establishing a joint relationship: a practical guide to rheumatology/dermatology clinics, adding value to the NHS and to patient care

Speakers: Drs Hector Chinoy and Richard Warren, Departments of Rheumatology and Dermatology respectively, Salford Royal Foundation Hospital, Manchester

11.30 – 13.00

Controversies in osteoarthritis therapeutics

Room 3B

Chairs: Prof Nigel Arden, Oxford University, Oxford and Dr Fraser Birrell, Newcastle University, Newcastle-upon-Tyne

Aim: To update delegates regarding the latest evidence concerning key controversies in the pharmacological management of osteoarthritis

Outcome 1: Delegates will be aware of the relative effectiveness and safety of paracetamol and non-steroidal anti-inflammatory drugs (NSAIDs) (topical and oral) in the treatment of osteoarthritis, including recent evidence of the gastrointestinal toxicity of paracetamol

Outcome 2: Delegates will learn about the evidence for the effectiveness of intra-articular steroid injections to treat osteoarthritis and what is known about predictors of response

Outcome 3: Delegates will understand the evidence supporting the use of disease-modifying anti-rheumatic drugs (DMARDs) to treat osteoarthritis

11.30 **Intra-articular steroid injections: do they work and who will respond?**

Prof Terence O'Neill, University of Manchester, Manchester

12.00 **Effectiveness and safety of paracetamol and NSAIDs: which drug should I recommend?**

Prof David Felson, University of Manchester, Manchester

12.30 **DMARDs in osteoarthritis: what is the evidence?**

Prof Philip Conaghan, University of Leeds, Leeds

11.30 – 13.00

What is new in spondyloarthritis pathogenesis and treatment?

Room 11

Chair: Prof Neil McHugh, Royal National Hospital for Rheumatic Diseases, Bath

Aim: To examine the evidence for new treatment approaches in spondyloarthropathy

Outcome 1: Delegates will understand the role of IL-17 in spondyloarthropathy

Outcome 2: Delegates will understand the limitations of current outcome measures in psoriatic arthritis and how they relate to treat to target strategies

Outcome 3: Delegates will be able to relate prognosis and progression in ankylosing spondylitis to new biologic treatment strategies

11.30 **What is the role of type 17 immune responses in spondyloarthritis pathogenesis and do they define new treatment targets?**

Prof Paul Bowness, University of Oxford, Oxford

12.00 **Therapy of psoriatic arthritis (PsA) (what is new and how can we treat to target?)**

Dr Philip Helliwell, University of Leeds, Leeds

12.30 **New biologic treatments for ankylosing spondylitis**

Prof Joachim Sieper, Charité – Universitätsmedizin, Berlin, Germany

11.30 – 13.00

Hall 1A

Essentials in rheumatology: symptom diagnosis and management and improving patient management

Chairs: Prof John Axford, St George's Hospital, London and Dr Charles Mackworth-Young, Charing Cross Hospital, London

- Aim: A comprehensive update covering everything you need to know about changes in rheumatology
- Outcome 1: To prepare rheumatologists for revalidation and provide a valuable educational opportunity for trainees
- Outcome 2: Delegates will have been brought up-to-date on disease management

11.30 The myths and mysteries of invasive treatment for spinal pain and nerve root pain

Mr Damian Fahy, Fortius Clinic London, London

12.00 Rheumatic skin disorders

Prof Louise Barnes, St. James's Hospital, Dublin, Ireland

12.30 What constitutes quality of care in rheumatology?

Prof Alan Silman, Arthritis Research UK

11.30 – 13.00

Room 4A

British Health Professionals in Rheumatology oral abstracts

Chair: Dr Michael Backhouse, University of Leeds, Leeds



11.30

The impact of a community-based intervention for people with arthritis on quality of life and health service utilisation

Mrs Chandrika Gordhan, University of Birmingham, Birmingham

11.45

Does inflammatory arthritis really improve during pregnancy? A systematic review and meta-analysis

Dr Hannah Jethwa, Royal Free Hospital, London

12.00

Patients' experiences of stiffness in rheumatoid arthritis are more than just duration and severity

Miss Serena Halls, University of the West of England, Bristol

12.15

Population survey of prevalence, impact and care of foot symptoms in people with rheumatoid arthritis

Mrs Oonagh Wilson, University of the West of England, Bristol

12.30

The effectiveness and efficacy of splints for thumb base osteoarthritis: a pilot randomised controlled trial

Dr Jo Adams, University of Southampton, Southampton

12.45

A nurse-led clinic for ankylosing spondylitis improves detection of patients eligible for anti-TNF treatment

Mrs Alison Booth, Royal Derby Hospital, Derby

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 in Rheumatology

11.30 – 13.00

Hall 1B

Tropical rheumatology 2: interactive short cases with keypad voting

Chair: Prof Ade Adebajo, University of Sheffield, Sheffield

Aim: To challenge the understanding of the presentation of infection underlying musculoskeletal diseases

Outcome: Delegates will have a better understanding of a wide spectrum of different musculoskeletal diseases and their interaction with infections


 Interactive
 keypad session

Musculoskeletal symptoms and signs may be prominent in the clinical presentation of many infections. This interactive session will include several cases of imported infections to challenge the diagnostic and clinical management skills of the audience, who will participate throughout using interactive voting keypads. Each case will conclude with a summary of key learning points for the audience to take into their everyday practice.

Dr Nick Beeching, Royal Liverpool and Broadgreen University Hospital NHS Trust, Liverpool

11.30 – 13.00

Hall 1C

Inflammatory arthritis and comorbidities oral abstracts

Chairs: Dr Nicola Goodson, University Hospital Aintree, Liverpool and Dr George Kitas, Dudley Group NHS Foundation Trust, Dudley

- 11.30 **An open label pilot multi-centre step-down randomised controlled trial to examine whether etanercept 25mg once weekly is effective in maintaining a clinical response in patients with ankylosing spondylitis who have responded to 50mg once weekly**
Dr Karl Gaffney, Norfolk & Norwich University Hospital NHS Foundation Trust, Norwich
- 11.45 **Anti-TNF therapy leads to an increase in circulating TH17 cells in patients with different types of inflammatory arthritis and is associated with ultrasonographic improvement of synovitis**
Dr Dobrina Hull, Oxford University, Oxford
- 12.00 **Efficacy pharmacokinetics and safety of different doses of methotrexate in combination with adalimumab: results from the concerto trial**
Dr Hartmut Kupper, AbbVie GmbH & Co KG, Ludwigshafen, Germany
- 12.15 **Excess mortality in rheumatoid arthritis: gains in life expectancy over twenty-five years**
Dr Sam Norton, Institute of Psychiatry, King's College London, London
- 12.30 **Patients receiving anti-tumor necrosis factor therapies experience clinically important improvements in rheumatoid arthritis related fatigue: results from the British Society for Rheumatology biologics register**
Miss Katie Druce, University of Aberdeen, Aberdeen
- 12.45 **Rheumatoid arthritis related interstitial lung disease: association between biologic therapy and survival**
Dr Clive Kelly, Queen Elizabeth Hospital, Gateshead

11.30 – 13.00


Room 4B

Sjögren's syndrome special interest group

Chairs: Prof Simon Bowman, University Hospitals Birmingham, Birmingham and Dr Elizabeth Price, Great Western Hospital, Swindon

- Aim: To update members on ongoing research in Sjögren's syndrome and introduce the new quality standards and guidelines for the management of Sjögren's syndrome
- Outcome 1: Members will be updated on the ongoing TRACTISS (Trial of Anti-B-Cells Therapy in Patients with Sjögren's Syndrome) trial and the place of biologic therapies in Sjögren's syndrome
- Outcome 2: Members will be updated on the outcomes of the UK Primary Sjögren's Syndrome Registry Project and research facilitated as a direct result of this
- Outcome 3: Members will be introduced to the new quality standards and guidelines for management of Sjögren's syndrome
- 11.30 **TRACTISS trial update and studies of biologic therapies in Sjögren's syndrome**
Prof Simon Bowman, University Hospitals Birmingham, Birmingham
- 11.45 **The UK Primary Sjögren's Syndrome Registry Project - update on results and studies**
Prof Wan-Fai Ng, Newcastle University, Newcastle-upon-Tyne
- 12.00 **Case and scope of quality standards of care for primary Sjögren's syndrome**
Prof Wan-Fai Ng, Newcastle University, Newcastle-upon-Tyne
- 12.10 **Proposed care pathways for primary Sjögren's syndrome**
Dr Nurhan Sutcliffe, Barts and the London School of Medicine and Dentistry, London
- 12.30 **Description of the quality standards of care for PSS patients**
Prof Bhaskar Dasgupta, Southend University Hospital, Southend-on-Sea
- 12.50 **Key service outcomes**
Dr Elizabeth Price, Great Western Hospital, Swindon

11.30 – 13.00	Musculoskeletal pain special interest group
Room 12	Chair Dr Nick Shenker, Cambridge University Hospitals, Cambridge
Aim:	Forum for networking, educating and promoting musculoskeletal pain issues within the rheumatology community
Outcome 1:	To understand national initiatives for raising the profile of musculoskeletal pain in rheumatology, including pain guidelines and pain education day
Outcome 2:	To understand the CRPS (complex regional pain syndrome) Registry; how it was set up and maintained and what it has achieved
Outcome 3:	Open forum to discuss pain research relevant to the rheumatology community
11.30	BSR pain guidelines and recent International pain guidelines Dr Benjamin Ellis, King's College Hospitals, London
12.00	Setting up, maintaining and analysing the CRPS-UK Registry Dr Nick Shenker, Cambridge University Hospitals, Cambridge
12.30	QST network for the UK Prof David Walsh, University of Nottingham, Nottingham

13.00 – 14.30	Exhibition Lunch
Exhibition hall	 Please see exhibition floor plan on page 89 for catering points.

13.00 – 14.15	British Society for Rheumatology Annual General Meeting
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You are invited to the

British Society for Rheumatology Annual General Meeting

Room 3A
Wednesday 30 April at 13.00 – 14.15

 **Lunch will be provided**

Come along and receive progress reports from the President, Rheumatology Editor, the Heberden Librarian and other honorary officers about the business of the Society, which will also include:

- the 2013 Annual Accounts
- Subscriptions for 2015
- BHPR section report and integration update
- Appointments to the BSR's committees

The meeting will also include a thank you and farewell to departing officers. Your participation is valued so we hope to see you all there.

For more information visit our stand or our website:
www.rheumatology.org.uk/membersarea/governance

13.00 – 13.30

Innovation theatre: UCB

Exhibition hall

**Objective Evidence of Inflammation in SpA: MRI Now and the Future**

Speaker: Dr Alex Bennett, Consultant Rheumatologist, Defence Medical Rehabilitation Centre (DMRC), Headley Court

14.00 – 14.30

Innovation theatre: Janssen

Exhibition hall

**Changing Paradigms – IL-23**

Speakers: Dr Jonathan Sherlock, University of Birmingham, Birmingham

14.30 – 16.00

Complex regional pain syndromes update

Room 3B

Chair: Prof Candida McCabe, Royal National Hospitals for Rheumatic Diseases, Bath

Aim:

Educate about complex regional pain syndromes (CRPS) diagnosis and management, recent UK CRPS guidelines and research studies

Outcome 1:

Delegates will understand the mechanisms behind CRPS

Outcome 2:

Delegates will know how to make the diagnosis of CRPS

Outcome 3:

Delegates will know about the treatment of CRPS

14.30

CRPS: definitions, mechanisms, background

Dr Nick Shenker, Cambridge University Hospitals, Cambridge

15.00

CRPS: how to make the diagnosis + cases

Dr Richard Haigh, Royal Devon and Exeter NHS Trust, Exeter

15.30

CRPS: The UK CRPS guidance, and current and future management of CRPS

Dr Andreas Goebel, University of Liverpool and Walton Centre NHS Foundation Trust, Liverpool

14.30 – 16.00

The lung in rheumatoid arthritis

Room 11

Chair: Dr Adam Young, City Hospital, St Albans

Aim:

Delegates will be brought up to date on the lung in rheumatoid arthritis

Outcome 1:

Delegates will understand how to best utilise disease-modifying anti-rheumatic drugs (DMARDs) and biologics in rheumatoid arthritis patients with lung disease

Outcome 2:

Clinicians will receive a summary of the BRILL network findings on interstitial lung disease in rheumatoid arthritis with latest recommendations on diagnosis and management

Outcome 3:

Delegates will learn about the relevance of chronic infections in rheumatoid arthritis and the current evidence base for diagnosis and management

14.30

Drug-induced interstitial lung disease in patients with rheumatoid arthritis

Dr Julie Dawson, St Helens and Knowsley Hospitals, Merseyside

14.50

Interstitial lung disease in rheumatoid arthritis

Dr Clive Kelly, Queen Elizabeth Hospital, Gateshead

15.10

Chronic pulmonary infection in rheumatoid arthritis

Dr David Hutchinson, Royal Cornwall Hospital, Truro

15.30

Systemic sclerosis and the lung

Dr Bridget Griffiths, Freeman Hospital, Newcastle-upon-Tyne

14.30 – 16.00

Hall 1A

Essentials in rheumatology: clinical decision making

Chairs: Prof John Axford, St George's Hospital, London and Dr Charles Mackworth-Young, Charing Cross Hospital, London

- Aim: A comprehensive update covering everything you need to know about changes in rheumatology
 Outcome 1: To prepare rheumatologists for revalidation and provide a valuable educational opportunity for trainees
 Outcome 2: Delegates will have been brought up-to-date on clinical decision making



Interactive keypad session

14.30

15.15

Reactive arthritis and enteropathic arthritis

Dr Andrew Keat, Northwick Park Hospital, Harrow

Early arthritis

Prof Paul Emery, University of Leeds, Leeds

14.30 – 16.00

Hall 1B

Interactive clinical reasoning around recognition of inflammatory back pain

Chair: Mrs Sue Gurden, Aneurin Bevan University Health Board, Newport

- Aim: To update delegates on inflammatory back pain
 Outcome 1: Awareness will be raised of the impact of inflammatory back pain and consequences of diagnostic delay
 Outcome 2: Delegates will have explored the challenges in distinguishing causes for back pain, diagnostic criteria and referral pathways
 Outcome 3: Delegates will have discussed the likely impact of collaborative education initiatives in improving clinical skills in primary care to improve timely and appropriate referral into rheumatology



Interactive keypad session

14.30

14.50

Recognition of inflammatory back pain and axial spondyloarthritis

Dr Karl Gaffney, Norfolk and Norwich University Hospitals NHS Foundation Trust, Norwich

Interactive session: facilitation of group discussion and development of clinical reasoning skill exploring methods and attitudes of different professionals to back pain management

Interactive session to develop the clinical reasoning skills in the recognition of inflammatory back pain

Mrs Claire Harris, Northwick Park Hospital, Harrow and Mrs Claire Jeffries, Solent NHS Trust, Portsmouth

The impact of delay in diagnosing ankylosing spondylitis/axial spondyloarthritis

Dr Jane Martindale, Wrightington Wigan and Leigh NHS Foundation Trust, Wigan

Discussion

BHPR
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 in Rheumatology

15.50

14.30 – 16.00

Hall 1C

Tropical rheumatology 3: HIV and problems encountered in developing and tropical countries

Chair: Prof Robert Moots, University of Liverpool, Liverpool

- Aim: To improve knowledge of rheumatological complications of HIV and problems encountered in developing and tropical countries
 Outcome: Delegates will be able to identify key clinical signs and symptoms of common snake bites, HIV infection and rheumatic problems encountered in the subcontinent of India

14.30

15.00

15.30

The challenges of snakebite

Prof David Laloo, Liverpool School of Tropical Medicine, Liverpool

The rheumatic manifestations of HIV infection in the anti-retroviral era

Dr Karen Walker-Bone, Southampton General Hospital, Southampton

Rheumatology in the Indian subcontinent: lessons relevant to the UK

Dr Vinod Ravindran, MES Medical College, Perinthalmanna, India

14.30 – 16.00

Room 4B

ARMA: musculoskeletal clinical networks one year on

Chair: Mr Federico Moscogiuri, Arthritis and Musculoskeletal Alliance (ARMA)

- Aim:** To present the work that ARMA has completed in the first year of the musculoskeletal clinical networks project, in strategic partnership with NHS England's Musculoskeletal National Clinical Director
- Outcome 1:** Delegates will have been presented with the work completed in the first year of the clinical networks project, and will have heard about the different ways in which musculoskeletal clinical leaders have driven high quality care for people with musculoskeletal conditions locally
- Outcome 2:** Delegates will be able to identify the key elements of 'what good looks like' and what makes for a successful musculoskeletal clinical network
- Outcome 3:** Delegates will have discussed ways to develop areas of good practice further

14.30

Musculoskeletal clinical networks: one year on

Prof Peter Kay, National Clinical Director for Musculoskeletal Conditions

14.45

Panel discussion

Ms Debbie Cook, NASS (National Ankylosing Spondylitis Society); Dr Chris Deighton, President of the British Society for Rheumatology and Dr Ian Bernstein, Gordon House Surgery and Ealing Hospital NHS Trust, London

14.30 – 16.00

Room 12

Osteoarthritis special interest group

Chair: Dr Fraser Birrell, Newcastle University, Newcastle-upon-Tyne

- Aim:** An update on progress in the understanding of and treatment for foot osteoarthritis; the Arthritis Research UK (ARUK) Sports Exercise Centre and osteoarthritis and ARUK Clinical Studies Group
- Outcome 1:** To know the occurrence, impact and developments in treatment of foot osteoarthritis
- Outcome 2:** To understand the link between biomechanics and biology in osteoarthritis
- Outcome 3:** To appreciate the links between sport, exercise and osteoarthritis

14.30

Introduction and osteoarthritis special interest group update

Dr Fraser Birrell, Newcastle University, Newcastle-upon-Tyne

14.35

Epidemiology of foot osteoarthritis and qualitative insights

Dr Ed Roddy, Keele University, Keele

14.50

Linking biomechanics to biology

Dr Cathy Holt, Cardiff University, Cardiff

15.05

ROAMing with your feet

Prof David Felson, University of Manchester, Manchester

15.20

Advances in foot orthoses

Dr Jill Halstead-Rastrick, University of Leeds, Leeds

15.35

Sports, exercise and osteoarthritis

Prof Nigel Arden, Oxford University, Oxford

15.50

Clinical Studies Group Update

Prof Philip Conaghan, University of Leeds, Leeds

14.30 – 16.00

Room 4A

BHPR Musculoskeletal special interest group: therapy interventions and exercise for individuals with long term rheumatological conditions

Chair: Jenny Ratcliffe, East Cheshire NHS Trust, Macclesfield

- Aim: To inform delegates on factors and approach that can effect change in long term outcomes for the chronic rheumatology patient
- Outcome 1: Delegates will be aware of how exercise and perceived exertion may inform practice in the treatment of rheumatological conditions
- Outcome 2: Delegates will understand by practical demonstration how to strengthen the atlanto axial segment using manual techniques and biofeedback to manage instability in the rheumatoid arthritis patient and headaches in the hypermobile patient

14.30

Exercise for uncommon rheumatological conditions: polymyositis and dermatomyositis

Dr Mark Clemence, Torbay Hospital, Torquay

15.00

Fibromyalgia, exercise and fatigue: what works?

Dr Joseph McVeigh, University of Ulster, Northern Ireland

15.30

Practical demonstration and discussion on the role and strengthening of the deep neck flexors and occipital muscles for rheumatoid arthritis and hypermobile patients

Jenny Ratcliffe, East Cheshire NHS Trust, Macclesfield

BHPR
British Health Professionals
in Rheumatology

16.00 – 16.30

Exhibition | Tea and coffee

Exhibition hall



Please see exhibition floor plan on page 89 for catering points.

16.30 – 17:30

Hall 1

Heberden Oration

The tradition of the Heberden Oration dates back to 1938, when distinguished members of the Heberden Society (the predecessor to the British Society of Rheumatology) were invited to present their research as orations.

Chair: Dr Chris Deighton, President of the British Society of Rheumatology

The outcome of rheumatoid arthritis: learning from observation

Prof Deborah Symmons, Arthritis Research UK Centre for Epidemiology, University of Manchester, Manchester

British Society for Rheumatology

Autumn Conference 2014

Case-based discussions

27 – 28 November 2014



This international conference brings together consultants and next generation rheumatologists to share clinical best practice.

This year's four topics are:

- psoriatic arthritis
- rheumatoid arthritis
- vasculitis
- crystal arthritis.

The conference focuses on interactive reports submitted by delegates to provoke lively debate and discussion on the management of complex cases. Feedback from last year's sold-out conference showed that 95% of attendees called the coverage of topics comprehensive, and 93% agreed they would recommend it to a colleague.

Register now at www.autumn-conf.org.uk

For more information,
email events@rheumatology.org.uk
or call 020 7842 0900.

Join world experts in
these topics at the
Hilton
Brighton Metropole
27-28 November 2014



17.30 – 19.15

Room 11

Arena and
Convention
Centre (ACC)
Liverpool

17.30

17.45

17.55

18.55

19.15

Industry supported symposium: AbbVie Ltd**Exploring horizons: today's achievements and tomorrow's ambitions**

Faculty: Prof Paul Emery, Dr Karl Gaffney and Dr Raj Sengupta
Hosted by Prof Lord Winston

Aims and objectives

The meeting aims to look at:

- A decade of innovation in rheumatology and how advances in treatment protocols and the availability of anti-TNFs have led to achievable treatment goals that help optimise patient outcomes

The objectives of this meeting are to:

- Discuss 10 years of innovation in rheumatology and healthcare innovation in the future
- Review revolving treatment goals for rheumatoid arthritis and clinical advances in spondyloarthritis
- Understand the implications of adherence and its role in achieving optimal patient outcomes

Reception – light refreshments**Exploring horizons... Back to the future of rheumatology****Exploring horizons...**

- Advancing treatments goals in rheumatoid arthritis
- Clinical advances in spondyloarthritis (SpA)
- Patient support & adherence

Horizons special... How will healthcare transform in the next decade and beyond?**Meeting summary & close**

Prescribing information will be available at the meeting. This promotional meeting is organised and funded by Abbvie Ltd.
Date of preparation: March 2014; AXHUR140124z(1)



EXPLORING HORIZONS

TODAY'S ACHIEVEMENTS
AND TOMORROW'S AMBITIONS

DATE AND TIME: WEDNESDAY 30 APRIL 2014, 17:45–19:15

VENUE: ROOM 11, ARENA AND CONVENTION CENTRE (ACC) LIVERPOOL

**WITH PROFESSOR PAUL EMERY,
DR KARL GAFFNEY AND DR RAJ SENGUPTA**

HOSTED LIVE IN LIVERPOOL BY PROFESSOR LORD WINSTON

TOPICS FOR DISCUSSION:

- BACK TO THE FUTURE WITH 10 YEARS OF INNOVATION IN RHEUMATOLOGY
- ADVANCING TREATMENT GOALS IN RHEUMATOID ARTHRITIS
- CLINICAL ADVANCES IN SPONDYLOARTHRITIS
- PERSONALISED APPROACHES TO IMPROVING ADHERENCE AND OUTCOMES
- GENETICS AND PERSONALISED HEALTHCARE IN THE NEXT 10 YEARS

LIGHT REFRESHMENTS AVAILABLE FROM 17:30

CPD ACCREDITATION WILL BE SOUGHT FOR THIS SYMPOSIUM

17.30 – 19.30

Room 3A

Industry supported symposium: Roche Products Ltd and Chugai Pharma UK Ltd

Mission Remission: The Lost Patients

Chair: Prof Ernest Choy, Cardiff University School of Medicine, Cardiff, UK

Aim:	To examine the different pathways for achieving remission when combination therapy is not appropriate
Outcome 1:	Delegates will be able to identify treatment pathways for patients with rheumatoid arthritis who cannot or will not continue to take methotrexate
Outcome 2:	Delegates will have a better understanding of the immunological pathways underlying rheumatoid arthritis and how biologic therapies work in this condition
Outcome 3:	Delegates will have a better understanding of the efficacy and safety profiles of biologic therapies when used without concurrent methotrexate
17.30	Catering
18.00	Welcome and introduction Prof Ernest Choy, Cardiff University School of Medicine, Cardiff, UK
18.05	Who are the Lost Patients? Prof Ernest Choy, Cardiff University School of Medicine, Cardiff, UK
18.25	What is the evidence base to inform our decisions when methotrexate is not an option? Dr Andrew Östör, Addenbrooke's Hospital, Cambridge, UK
18.50	Immunology and rheumatoid arthritis: why can treatment outcomes differ? Prof Simon Jones, Cardiff University School of Medicine, Cardiff, UK
19.15	Q&A, summary and close

This symposium is sponsored by Roche Products Ltd and Chugai Pharma UK Ltd. As well as discussing wider aspects of rheumatoid arthritis care, the symposium will contain promotional elements making reference to RoACTEMRA® (tocilizumab). Mission Remission is initiated and funded by Roche Products Ltd and Chugai Pharma UK Ltd.

Date of Preparation: February 2014; RCUKACTE01040a

PRESCRIBING INFORMATION RoActemra® (tocilizumab) in Rheumatoid Arthritis (RA): Please refer to RoActemra SPC for full prescribing information.

Indication: RoActemra, in combination with methotrexate (MTX), is indicated for the treatment of moderate to severe active rheumatoid arthritis (RA) in adult patients who have either responded inadequately to, or who were intolerant to, previous therapy with one or more disease-modifying anti-rheumatic drugs (DMARDs) or tumour necrosis factor (TNF) antagonists. In these patients, RoActemra can be given as monotherapy in case of intolerance to MTX or where continued treatment with MTX is inappropriate. RoActemra has been shown to reduce the rate of progression of joint damage as measured by X-ray and to improve physical function when given in combination with MTX.

Dosage and Administration: Patients should be given the Patient Alert Card. 8mg/kg iv infusion given once every 4 weeks. Doses exceeding 800mg per infusion are not recommended.

Dose adjustments: Dose reduction to 4mg/kg, or interruptions, are recommended in the event of raised liver enzymes, low absolute neutrophil count (ANC) or low platelet count. RoActemra should not be initiated in patients with ANC count below $2 \times 10^9/L$.

Contraindications: Hypersensitivity to any component of the product; active, severe infections.

Precautions: *Infections:* Cases of serious and sometimes fatal infections have been reported; interrupt therapy until controlled. Caution in patients with recurring/chronic infections, or other conditions which may predispose to infection. *Tuberculosis (TB):* Screen for and treat latent TB prior to starting therapy. There is a risk of false negative tuberculin skin and interferon-gamma TB blood test results, especially in

patients who are severely ill or immunocompromised. Patients should be instructed to seek medical advice if signs/symptoms of a tuberculosis infection occur during or after therapy with RoActemra. *Hypersensitivity reactions:* Serious hypersensitivity reactions have been reported and may be more severe and potentially fatal in patients who have experienced hypersensitivity reactions with previous infusions even if they have received premedication with steroids and antihistamines. Appropriate treatment should be available for immediate use if anaphylaxis occurs. If an anaphylactic reaction or other serious hypersensitivity/serious infusion related reaction occurs, permanently discontinue RoActemra. *Hepatic disease/impairment:* Use with caution in patients with active hepatic disease/impairment. *Transaminase elevations:* Not recommended in patients with ALT or AST $>5 \times ULN$; caution in patients with ALT or AST $>1.5 \times ULN$. *Haematological abnormalities:* Caution in patients with platelet count $<100 \times 10^3/\mu L$. Continued treatment not recommended in patients with ANC $<0.5 \times 10^9/L$ or platelet count $<50 \times 10^3/\mu L$. *Lipid parameters:* If elevated, follow local guidelines for managing hyperlipidaemia. *Vaccinations:* Live and live attenuated vaccines should not be given concurrently. *Combined with other biologic treatments:* Not recommended. *Viral reactivation:* Has been reported with biologics. *Diverticulitis:* Caution in patients with a history of intestinal ulceration or diverticulitis. Patients with symptoms of complicated diverticulitis should be evaluated promptly.

Interactions: Patients taking other medicines which are metabolised via CYP450 3A4, 1A2, or 2C9 should be monitored as doses may need to be adjusted.

Pregnancy and Lactation: Women should use contraception during and for 3 months after treatment. A decision on whether to continue/discontinue breastfeeding on RoActemra therapy should take into account relative benefits to mother and child.

Undesirable effects: Prescribers should consult SPC for full details of ADRs. *Very common ADRs ($\geq 1/10$):* URTI, hypercholesterolaemia. *Common ADRs ($\geq 1/100$ to $< 1/10$):* cellulitis, pneumonia, oral herpes simplex, herpes zoster, abdominal pain, mouth ulceration, gastritis, rash, pruritus, urticaria, headache, dizziness, increased hepatic transaminases, increased weight and increased total bilirubin, hypertension, leukopenia, neutropenia, peripheral oedema, hypersensitivity reactions, conjunctivitis, cough, dyspnoea. *Medically significant events:* *Infections:* Opportunistic and serious infections have been reported, some serious infections had a fatal outcome. Impaired lung function may increase the risk of developing infections. There have been post-marketing reports of interstitial lung disease, some of which had a fatal outcome. *GI perforations:* Primarily reported as complications of diverticulitis. *Infusion reactions:* Clinically significant hypersensitivity reactions requiring treatment discontinuation were reported and were generally observed during the 2nd – 5th infusions. Fatal anaphylaxis has been reported. *Other:* Decreased neutrophil count, decreased platelet count, hepatic transaminase elevations, lipid parameter increases, very rare cases of pancytopenia.

Legal Category: POM

Presentations and Basic NHS Costs: 80mg of tocilizumab in 4mL (20mg/mL) 1 vial: £102.40, 200mg of tocilizumab in 10mL (20mg/mL) 1 vial: £256.00, 400mg of tocilizumab in 20mL (20mg/mL) 1 vial: £512.00.

Marketing Authorisation Numbers: EU/1/08/492/01 (80mg), EU/1/08/492/03 (200mg), EU/1/08/492/05 (400mg).

Marketing Authorisation Holder: Roche Registration Limited, 6 Falcon Way, Welwyn Garden City, Herts AL7 1TW. RoActemra is a registered trade mark.

Date of Preparation: July 2013 RCUKMED100022(1)

Reporting suspected adverse reactions after authorisation of the medicinal product is important. It allows continued monitoring of the benefit/risk balance of the medicinal product. Adverse events should be reported.

Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to Roche Products Ltd. Please contact Roche Drug Safety Centre by emailing welwyn.uk_dsc@roche.com or calling +44(0)1707 367554.

Roche Products Ltd / Chugai Pharma UK Ltd present a sponsored symposium

THE LOST PATIENTS

What do clinical experience, the evidence-base and immunology tell us?

MISSION
REMISSION

NOT REACHING REMISSION

INADEQUATE RESPONSE

NON-ADHERENCE

INTOLERANCE



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Date of Preparation: February 2014 • RCUKACTE01040b

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