

Malignancies in SpA w/wo PsO and the effect of DMARDs

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Abstract

Objectives: To determine the risk of six types of malignancies in patients with spondyloarthritis (SpA), with and without psoriasis (PsO) and on disease-modifying anti-rheumatic drugs (DMARDs) when compared with those with non-specific back pain (NSBP).

Methodology

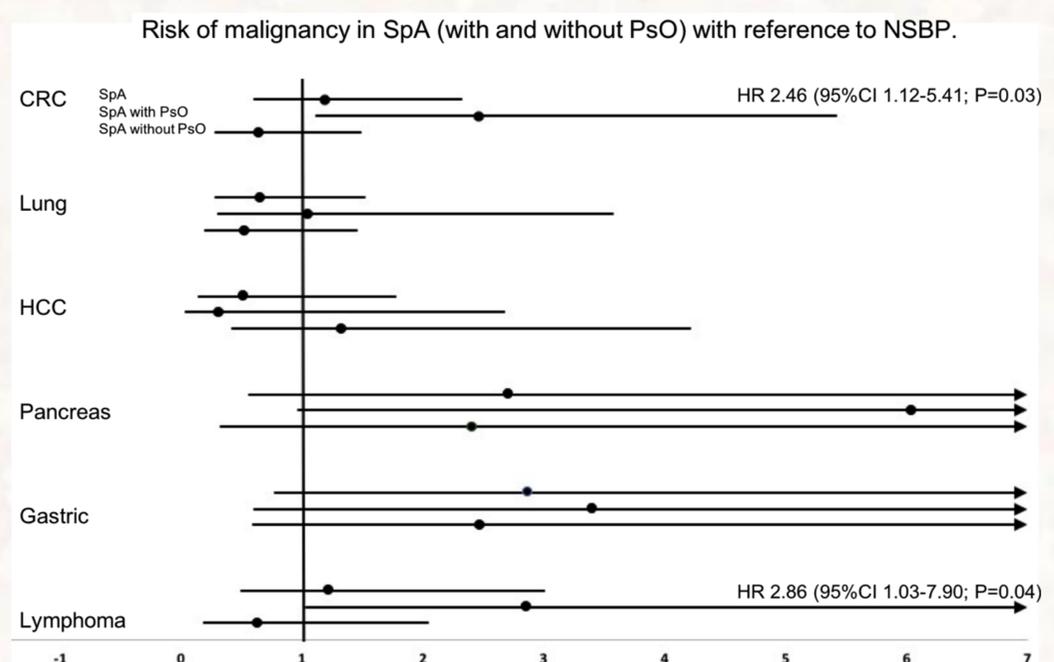
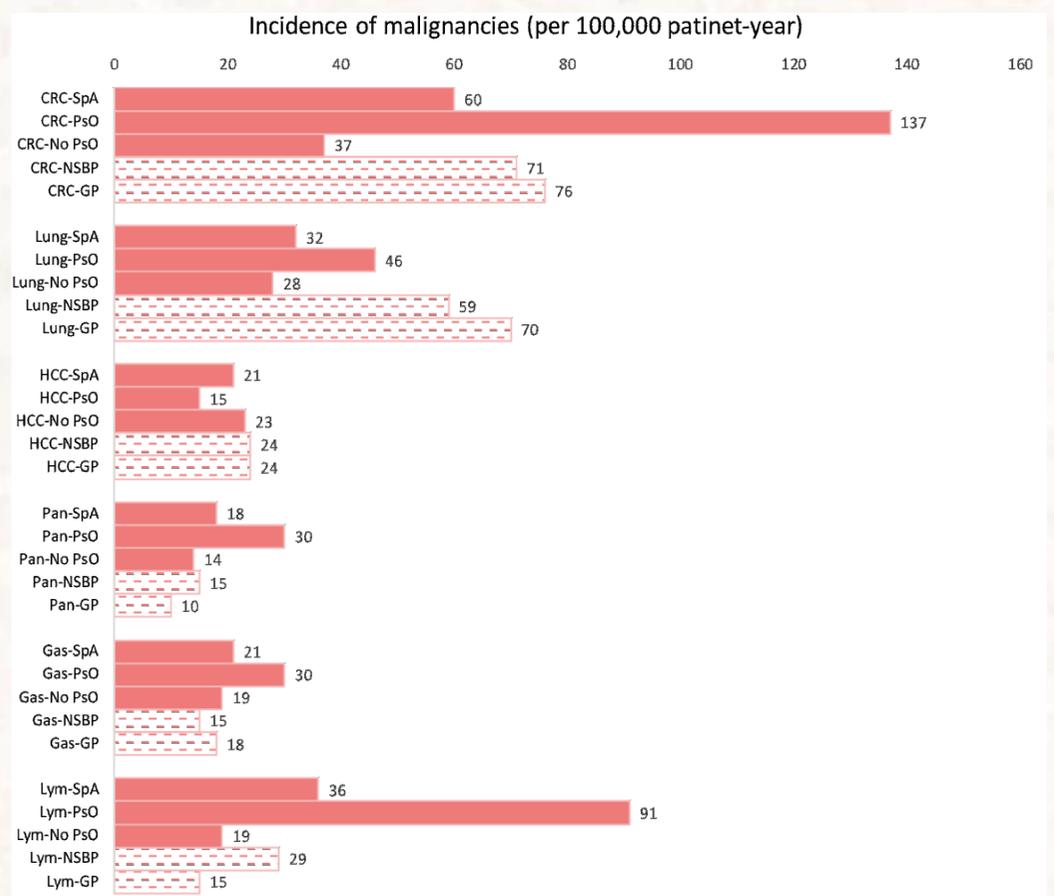
Medical records were retrieved.

Clinical data; follow-up duration; comorbidities; dates and types of cancer diagnosed; types and duration of DMARDs used were collected.

Propensity score adjustment and Cox regression analysis were used.

Results

Characteristic	SpA (n=3020)	NSBP (n=2527)	p-value
Age (years)	49.6±14.5	62.1±15.0	<0.001
Duration of follow up (years)	9.6±6.0	13.5±6.0	<0.001
Male gender	2026/3020 (68.2%)	914/2527 (36.2%)	<0.001
Chinese ethnicity	2987/3020 (98.9%)	2487/2527 (98.4%)	0.11
Smoking status	888/2977 (29.8%)	460/2424 (19.0%)	<0.001
Alcohol use	245/2977 (8.2%)	155/2424 (6.4%)	0.01
Diabetes Mellitus	273/3020 (9.0%)	394/2527 (15.6%)	<0.001
Positive hepatitis B surface antigen	204/2412 (8.5%)	95/549 (17.3%)	<0.001
Chronic lung disease	97/3020 (3.2%)	130/2527 (5.1%)	<0.001
Cirrhosis	13/3020 (0.4%)	12/2527 (0.5%)	0.81
Colorectal carcinoma	17/3020 (0.6%)	24/2527 (0.9%)	0.09
Carcinoma of lung	9/3020 (0.3%)	20/2527 (0.8%)	0.01
Hepatocellular carcinoma	6/3020 (0.2%)	8/2527 (0.3%)	0.38
Carcinoma of pancreas	5/3020 (0.2%)	3/2527 (0.1%)	0.65
Carcinoma of stomach	6/3020 (0.2%)	5/2527 (0.2%)	1.00
Lymphomas	10/3020 (0.3%)	10/2527 (0.4%)	0.69



Conclusion

SpA with PsO was associated with increased risk of colorectal carcinoma and lymphoma. Use of DMARDs in SpA was not associated with malignancy.

Risk-benefit analysis should be considered to aid decisions in the management of patients with SpA.

