

A systems biology approach to identify novel biomarkers and causative pathways in patients with psoriatic arthritis

Published: 14-05-2014

Last updated: 24-04-2024

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Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Autoimmune disorders
Study type	Observational invasive

Summary

ID

NL-OMON45190

Source

ToetsingOnline

Brief title

From psoriasis to arthritis

Condition

- Autoimmune disorders
- Synovial and bursal disorders
- Epidermal and dermal conditions

Synonym

psoriatic arthritis

Research involving

Human

Sponsors and support

Primary sponsor: UMC Utrecht

Source(s) of monetary or material Support: Pfizer,unrestricted educational grant van Pfizer.

Intervention

Keyword: autophagy, biomarkers, psoriatic arthritis, systems biology

Outcome measures

Primary outcome

Clinical endpoints: Diagnosis (conform CASPAR criteria), disease activity and treatment response (conform the composite scores DAS28, ACR, and CPDAI). For details see section 8.1.1. of the study protocol.

Laboratory endpoints: the transcriptome (RNA sequencing), the epigenome (micro RNA profiling and genome-wide methylation) and the proteome in white blood cells derived from the blood samples collected throughout follow-up. The frequency, phenotype, and function of the white blood cells will be quantified. For details see section 8.2.1. and 8.4.7 of the study protocol.

Secondary outcome

n.a.

Study description

Background summary

Psoriatic arthritis (PsA) is currently underdiagnosed and often resistant to treatment with traditional anti-rheumatic drugs, leading to increased morbidity and mortality. The pathogenesis of PsA is not fully understood but thought to arise from the combination of genetic, epigenetic, and environmental factors.

The so-called *systems biology approach* uses high through-put technologies to help unravel the complex interactions between such factors in order to better understand the specific pathways leading to a state of disease.

Study objective

The primary objective is to identify molecular signatures that can serve as diagnostic and/or severity-of-disease markers for PsA and markers that can predict treatment response in patients with PsA. The secondary objective is to elucidate the underlying pathways in the development of PsA with the aim of uncovering novel therapeutic targets.

Study design

Longitudinal observational study, where blood samples and clinical parameters will be prospectively collected for a maximum duration of five years per patient, and the data will be analysed using the systems biology approach.

Study burden and risks

The burden of participation relies mainly on extra blood draws and filling in the questionnaires. Apart from possible small side effects of additional blood being drawn (small hematoma), no risks are involved.

Study participants with a diagnosis of psoriasis (population 1) will be clinically evaluated by a rheumatologist at baseline for the presence of PsA and will be asked to perform one blood sample at baseline (80 mL blood volume), and be asked to perform PsA-screening questionnaires once per year during follow-up.

Study participants with a diagnosis of PsA (population 2 & 3) will be asked to undergo a minimum of one blood sample per year and maximum of three blood samples per year (80 mL blood volume each time). This blood draw will coincide with a blood draw that is necessary for clinical purposes and will be randomly selected. Participants will receive questionnaires at the same time points of the blood draw.

Study participants with a diagnosis of non-PsA spondyloarthritis (population 4) will have one study blood sample drawn (80 mL bloodvolume) at the same time that standard care bloodwork is performed. Participants will receive questionnaires at the same time points of the blood draw.

The benefit for the psoriasis patient is an early diagnosis of PsA. No other benefits is expected from participation.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

Patients with psoriasis, psoriatic arthritis, ankylosing spondylitis (AS), inflammatory bowel disease associated arthritis, reactive arthritis, or undifferentiated spondyloarthritis.

Exclusion criteria

- age 17 years or younger
- age 76 years or older
- The patient has an alternative inflammatory rheumatological diagnosis (e.g. rheumatoid arthritis, gout, pseudogout).

Study design

Design

Study type: Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Basic science

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 02-10-2014

Enrollment: 900

Type: Actual

Ethics review

Approved WMO

Date: 14-05-2014

Application type: First submission

Review commission: METC Universitair Medisch Centrum Utrecht (Utrecht)

Approved WMO

Date: 01-08-2016

Application type: Amendment

Review commission: METC Universitair Medisch Centrum Utrecht (Utrecht)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL46903.041.13