

23rd Asia-Pacific

DERMATOLOGY CONFERENCE

October 26-28, 2017 Osaka, Japan

Anti-TNF-alpha treatment of psoriasis: Analysis of infectious complications in Middle-European population

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Anti-TNF-alpha treatment is indicated for the moderate to severe chronic plaque psoriasis. Apart from its therapeutical benefits, there are adverse effects to be considered, mainly infectious complications. TNF-alpha cytokine plays important role in formation and maintenance of granuloma; therefore, its inhibitors pose a risk for granulomatous infections and reactivation of latent tuberculosis. The author analyzed the group of 190 patients from Slovakia treated with TNF inhibitors as compared to other biologics. To assess the latent form of tuberculosis, IGRA (interferon-gamma release assay) test was performed before biologic treatment and once a year after it is beginning-according to guidelines and TBNET consensus. 3% of patients had permanently positive IGRA test and in 28% of patients treated by TNF inhibitors, conversion of IGRA test appeared with negative test before treatment and positive test after administration of biologics. No active tuberculosis was detected. The average time of IGRA conversion was 3 years after beginning of treatment. The only statistically significant predictor was age and increase in one year was associated with 5.8% increase of risk of IGRA conversion. Regarding other infectious complications, the most common infections in patients treated with biologics were respiratory and HPV infections.

Biography

Tatiana Pecova has completed her PhD in Jessenius Faculty of Medicine, Comenius University in Slovakia, where she works as a Resident and part-time Assistant Lecturer. She has published 23 papers, including international and current content magazines and was awarded with two honorary scholarships (PSO-2016 and EADV-2017 Michael Hornstein Memorial Scholarship). Her current research focuses on biologic treatment of psoriasis and STIs.

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