



PSORIASIS

DURABLE EFFICACY OF TONSILLECTOMY IN PATIENTS WITH SAPHO SYNDROME

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Background: Limited evidence supports the long-term efficacy of tonsillectomy in patients with SAPHO (synovitis, acne, pustulosis, hyperostosis and osteitis) syndrome.

Objective: To evaluate the disease condition of SAPHO patients at 24 months and more post-tonsillectomy.

Materials and Methods: A retrospective analysis of the cases of 17 Japanese patients with SAPHO syndrome who were resistant to initial systemic treatments and underwent a tonsillectomy at Sapporo Medical University Hospital in 2006–2016.

The patients' disease condition at 1, 6, 12 and ≥ 24 months post-tonsillectomy were assessed by the visual analog scale (VAS) score for osteoarthropathic pain, the disease duration, the area of palmoplantar lesions, and the Palmoplantar Pustular Psoriasis Area Severity Index (ppPASI).

Results: In the minimum follow-up of 25 months (range 25–126 months, median 34 months) post-tonsillectomy in the 17 patients, the median ppPASI and VAS scores decreased from 12 (6–18) to 1 (0–2) and from 80 (60–100) to 20 (0–50), respectively. Among the 11 patients whose VAS scores at 1-month post-tonsillectomy were evaluable, the six patients with a $>70\%$ improvement in their VAS score maintained the same good condition after 24 months and beyond, whereas four of the five patients with a VAS score $<70\%$ did not show remarkable improvement after that timepoint. The improvement in VAS score was not associated with the disease duration or the patients' pre-tonsillectomy ppPASI values.

Conclusions: Tonsillectomy might be an alternative treatment option for patients with SAPHO syndrome who are resistant to systemic therapies. Durable efficacy against pain can be predicted by evaluating a patient's improvement at 1-month post-tonsillectomy.

