



PSORIASIS

SCREENING OF PSORIATIC ARTHRITIS, BY THE DERMATOLOGIST: A SYSTEMATIC REVIEW OF THE METHODOLOGICAL QUALITY OF PATIENT REPORTED QUESTIONNAIRES.

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Introduction: Psoriatic arthritis (PsA) is a chronic inflammatory arthropathy where dermatologists represent the first medical consultant. Several clinical instruments for the screening of PsA have been developed, few validated, and today there's no consensus about which tool should a dermatologist use.

Objective: Our aim is to critically appraise and compare the methodological quality, and diagnostic accuracy of all clinical instruments for the screening of PsA in patients with psoriasis.

Materials and Methods: A systematic review was conducted, including studies with at least one measurement property reported and an indicator of diagnostic accuracy. Electronic databases including Medline and EMBASE were searched (from 1970 to February 2018), via Ovid and PubMed. The methodological quality of the studies was assessed using the COSMIN 4-point checklist.

Results: We identified 7 clinical instruments in 9 articles (PASE, TOPAS, PEST GEPARD, PASQ, EARP and PURE-4). PASE validation study was recognized as the PROM with the best methodological quality, stable (Pearson correlation coefficient 0.35-0.80) and with an excellent internal consistency (Cronbach's $\alpha = 0.90$); followed by EARP with a good internal consistency (Cronbach's $\alpha = 0.83$) but with no stability proven. PURE-4 is the newest (2018) and shortest questionnaire (4 items, cut off point of ≥ 1) but with a low methodological quality. EARP has the highest sensitivity (91%) while TOPAS1 has the highest specificity (93.1).

Conclusion: PASE and EARP are the most recommended clinical instruments for the screening of PsA by the dermatologist, according to the quality of their measurement





properties and its interpretability. However, further validation studies are required to confirm these findings in different scenarios.

