

## IN BRIEF

**CLINICAL TRIALS****Dietary interventions lower serum uric acid levels**

In a substudy of the Dietary Approaches to Stop Hypertension (DASH) trial involving 103 patients with prehypertension or stage 1 hypertension, serum uric acid (SUA) levels were reduced to a greater extent by the blood-pressure-lowering DASH diet than by a control diet (-0.35 mg/dl; 95% CI -0.65 to -0.05,  $P = 0.02$ ). The effect size of the DASH diet was greatest and approached that of urate-lowering drug therapy in those with hyperuricaemia ( $n = 8$ ; -1.3 mg/dl; 95% CI -2.50 to -0.08). The substudy also found that compared with a low level of dietary sodium intake, medium and high sodium intake significantly reduced SUA levels regardless of whether patients consumed the DASH diet or the control diet.

**ORIGINAL ARTICLE** Juraschek, S. P. *et al.* Effects of the Dietary Approaches to Stop Hypertension (DASH) diet and sodium intake on serum uric acid. *Arth. Rheumatol.* <http://dx.doi.org/10.1002/art.39813> (2016)

**SYSTEMIC LUPUS ERYTHEMATOSUS****Circulating RNA correlates with disease activity**

In patients with systemic lupus erythematosus (SLE), many autoantibodies are complexed with short non-coding RNAs such as U1 and Y1. Quantification of these autoantibody-RNA complexes revealed that circulating levels of U1 and Y1 were significantly higher in patients with SLE ( $n = 228$ ) than in healthy controls ( $n = 20$ ). Notably, levels of U1 and Y1 correlated with disease activity (SLEDAI score) and with the expression of interferon-inducible genes in the patients with SLE.

**ORIGINAL ARTICLE** Doedens, J. R. *et al.* Blood-borne RNA correlates with disease activity and IFN-stimulated gene expression in systemic lupus erythematosus. *J. Immunol.* <http://dx.doi.org/10.4049/jimmunol.1601142> (2016)

**GUIDELINES****New management recommendations for JDM**

A European initiative has published the first evidence-informed consensus-based guidelines that aim to standardize the diagnosis and treatment of juvenile dermatomyositis (JDM) across the continent and thus improve patient outcomes. The committee of 19 paediatric rheumatologists and 2 experts in paediatric exercise physiology and physical therapy reached >80% agreement on 7 overarching principles and 52 recommendations that cover disease assessment, patient monitoring, and treatment of early and refractory disease.

**ORIGINAL ARTICLE** Enders, F. B. *et al.* Consensus-based recommendations for the management of juvenile dermatomyositis. *Ann. Rheum. Dis.* <http://dx.doi.org/10.1136/annrheumdis-2016-209247> (2016)

**FIBROMYALGIA****CBT reduces pain-associated fMRI signals**

Cognitive behavioural therapy (CBT) improves pain outcomes in patients with fibromyalgia, but the underlying neural mechanisms are unclear. New data show that pain-associated catastrophizing correlated with resting-state functional MRI (fMRI) activity indicating connectivity between pain-processing brain regions in 16 high-catastrophizing patients with fibromyalgia, who were then randomly allocated to receive CBT or education-based treatment for 4 weeks. Catastrophizing was reduced to a significantly greater degree in the CBT group than in the control group post-treatment and at 6-month follow-up. Notably, the CBT-associated clinical improvement correlated with post-treatment reduction of pain-associated fMRI activity.

**ORIGINAL ARTICLE** Lazaridou, A. *et al.* Effects of cognitive behavioral therapy (CBT) on brain connectivity supporting catastrophizing in fibromyalgia. *Clin. J. Pain* <http://dx.doi.org/10.1097/AJP.0000000000000422> (2016)