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IN BRIEF

SPONDYLOARTHROPATHIES

Abatacept treatment for PsA

The efficacy of abatacept, a drug that blocks T cell co-stimulation, has been investigated in a randomized, double-blind, placebo-controlled, phase III trial involving patients with psoriatic arthritis (PsA). The investigators randomly assigned patients with PsA to receive either 125 mg of abatacept weekly or placebo for 24 weeks. The ACR20 response rate at 24 weeks was higher in the abatacept group compared with the placebo group (39.4% **versus** 22.3%, respectively), whereas there was no difference between the groups in the incidence of adverse events. Treatment with abatacept resulted in a modest improvement of skin lesions.

ORIGINAL ARTICLE Mease, P. J. *et al.* Efficacy and safety of abatacept, a T-cell modulator, in a randomised, double-blind, placebo-controlled, phase III study in psoriatic arthritis. *Ann. Rheum. Dis.* http://dx.doi.org/10.1136/annrheumdis-2016-210724 (2017)

AUTOINFLAMMATION

Canakinumab effective in HIDS treatment

In an open-label study involving nine patients with hyper-IgD and periodic fever syndrome (HIDS), the anti-IL-1β monoclonal antibody canakinumab treatment significantly reduced the frequency of attacks compared with the historical period during which patients received no drug treatment other than NSAIDs and/or steroids (median number of attacks per patient of 0 **versus** 5, respectively). A total of 14 serious adverse events were observed in four patients with HIDS during canakinumab treatment.

ORIGINAL ARTICLE Arostegui, J. I. *et al.* Open-label, phase II study to assess efficacy and safety of canakinumab treatment in active hyperimmunoglobulinemia D with periodic fever syndrome. *Arthritis Rheumatol.* http://dx.doi.org/10.1002/art.40146 (2017)

CONNECTIVE TISSUE DISEASES

Mycobacterial infection and Sjögren syndrome

In a Taiwanese population-based study involving 5,751 patients with newly diagnosed Sjögren syndrome and 86,265 individuals without Sjögren syndrome, a history of nontuberculous mycobacterial infection (NTM), but not tuberculosis infection, was associated with an increased risk of Sjögren syndrome. In subgroup analyses, the association remained statistically significant among patients aged 40–65 years, as well as in female patients and those without bronchiectasis. The authors speculated that shared immunological pathways between the two conditions could explain this association.

ORIGINAL ARTICLE Chao, W.-C. *et al.* Association between a history of mycobacterial infection and the risk of newly diagnosed Sjögren's syndrome: a nationwide, population-based case-control study. *PLoS ONE* http://dx.doi.org/10.1371/journal.pone.0176549 (2017)

RISK FACTORS

Susceptibility allele identified in RHD

A genome-wide association study in 2,852 individuals from eight Oceanian countries — where rheumatic heart disease (RHD) is highly prevalent — identified a genetic polymorphism in the immunoglobulin heavy chain (IGH) locus that is associated with increased RHD susceptibility. This finding was consistent across distinct ancestral groups such as Melanesians, Polynesians and South Asians. The investigators found that each copy of the *IGHV4-61*02* allele conferred a 1.4-fold increased risk of RHD.

ORIGINAL ARTICLE Parks, T. *et al.* Association between a common immunoglobulin heavy chain allele and rheumatic heart disease risk in Oceania. *Nat. Commun.* http://dx.doi.org/10.1038/ncomms14946 (2017)

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