

## IN BRIEF

**CONNECTIVE TISSUE DISEASES****T cells in blood mark Sjögren syndrome activity**

Blood T follicular regulatory ( $T_{FR}$ ) cells and T follicular helper ( $T_{FH}$ ) cells could serve as biomarkers of ectopic lymphoid activity in primary Sjögren syndrome (pSS). In 16 patients with pSS, activated  $PD1^+ICOS^+$   $T_{FH}$  cells in blood were associated with disease activity, whereas the ratio of  $T_{FR}$  cells to  $T_{FH}$  cells was indicative of ectopic lymphoid neogenesis in minor salivary glands. The ratio of  $T_{FR}$  cells to  $T_{FH}$  cells in blood also discriminated between patients with pSS and healthy donors.

**ORIGINAL ARTICLE** Fonseca, V. R. *et al.* Blood T follicular regulatory cells/T follicular helper cells ratio marks ectopic lymphoid structure formation and PD-1<sup>+</sup>ICOS<sup>+</sup> T follicular helper cells indicate disease activity in primary Sjögren's syndrome. *Arthritis Rheumatol.* <https://doi.org/10.1002/art.40424> (2018)

**SPONDYLOARTHRITIS****Effects of certolizumab pegol sustained at 4 years**

Long-term MRI outcomes of the phase III RAPID-axSpA study demonstrate that early improvements in spinal and sacroiliac joint inflammation achieved following treatment with certolizumab are maintained to week 204, with similar responses in patients with ankylosing spondylitis and those with non-radiographic axial spondyloarthritis. Assessment of sacroiliac joint radiographs showed limited overall progression over 4 years, with most progression observed during years 0–2 as compared with years 2–4 of the study.

**ORIGINAL ARTICLE** van der Heijde, D. *et al.* Limited radiographic progression and sustained reductions in MRI inflammation in patients with axial spondyloarthritis: 4-year imaging outcomes from the RAPID-axSpA phase III randomised trial. *Ann. Rheum. Dis.* <https://doi.org/10.1136/annrheumdis-2017-212377> (2018)

**ACUTE INFLAMMATORY ARTHRITIS****Methotrexate for chronic chikungunya arthritis?**

Methotrexate could benefit patients with chronic arthritis following chikungunya virus infection, according to the findings of a systematic review. The analysis included four retrospective studies, one prospective study and one non-blinded randomized clinical trial that evaluated methotrexate either as monotherapy or in combination with other treatments, highlighting the need for large-scale, carefully conducted studies, particularly blinded, randomized clinical trials.

**ORIGINAL ARTICLE** Amaral, J. K. *et al.* Treatment of chronic chikungunya arthritis with methotrexate: a systematic review. *Arthritis Care Res.* <https://doi.org/10.1002/acr.23519> (2018)

**RHEUMATOID ARTHRITIS****Long-term mavrilimumab safe and effective**

Long-term (up to 3.3 years) treatment with mavrilimumab, an antibody that targets granulocyte–macrophage colony-stimulating factor receptor- $\alpha$ , was safe and effective in patients with rheumatoid arthritis in two phase IIb studies and a phase II open-label extension study. In total, 442 patients received mavrilimumab in combination with methotrexate. In the extension study, 65.0% and 40.6% of patients achieved DAS28-CRP <3.2 and <2.6, respectively, at week 122. Most treatment-related adverse events were mild or moderate in severity.

**ORIGINAL ARTICLE** Burmester, G. R. *et al.* Mavrilimumab, a fully human granulocyte-macrophage colony-stimulating factor receptor  $\alpha$  monoclonal antibody: long-term safety and efficacy in patients with rheumatoid arthritis. *Arthritis Rheumatol.* <https://doi.org/10.1002/art.40420> (2018)