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INTRODUCTION:

Primary Sjögren's Syndrome (pSS) is a multisystemic, autoimmune disease, characterized mainly by the hypofunction of the salivary and lacrimal glands, however the clinical spectrum of this disease extends from SICCA symptoms to the presence of extra-glandular manifestations. The recent 2016 ACR-EULAR classification criteria was designed to be applied not only in patients with dryness symptoms, but also in those with clinical manifestations included in the ESSDAI (EULAR primary Sjögren's syndrome disease activity) domains, which would allow to classify those patients who debuted with extra-glandular manifestations

OBJECTIVES:

To evaluate the performance of the 2016 ACR-EULAR classification criteria in adult population with diagnosis of pSS of different centers in Argentina.

METHODS:

A multi-center study of 5 national centers was carried out. We included patients older than 18 years of age, who presented clinical and/or analytical manifestations suggestive of pSS. To discriminate between cases and controls, the opinion of experts from different centers, blind to the previous diagnosis of the patients, (with a degree of agreement $\geq 70\%$) was used as gold standard. Sensitivity, specificity, positive predictive value (PPV), negative predictive value (NPV) and positive likelihood ratio (LR +) were evaluated

RESULTS:

A total of 226 patients were included, 97.3% were women, with an average age of 55 years (SD ± 12), and a mean duration of symptoms of 7.9 years (SD ± 6.8). 178 patients (78.7%) had a diagnosis of pSS according to expert opinion, of which 171/178 (96.1%) had xerophthalmia, 172/178 (96.6%) xerostomia, 162/178 (91%) positivity at least one domain of the ESSDAI and 3/178 (1.7%) did not present xerostomia or xerophthalmia at the time of diagnosis. A sensitivity of 94.9% (95% IC: 92.1 - 97.8%), a specificity of 95.8% (95% IC: 93.2 - 98.4%), a PPV of 98.8% (95% IC: 97.4 - 100%), a NPV of 83.6% (95% IC: 78.8 - 88.4%) and an LR + of 22.7 (95% IC: 13.6 - 62.7) was observed.

CONCLUSIONS:

The recent classificatory criteria showed a performance comparable to the precedents 2002 American-European and 2012 ACR classification criteria, with the advantage that the new ones allow to classify those patients who debuted with extra-glandular manifestations.

TABLE 3. PERFORMANCE OF THE CLASSIFICATION CRITERIA

	VALUE	IC 95%
SENSITIVITY (%)	94,9	92,1 - 97,8
SPECIFICITY (%)	95,8	93,2 - 98,4
POSITIVE PREDICTIVE VALUE (%)	98,8	97,4 - 100
NEGATIVE PREDICTIVE VALUE (%)	83,6	78,8 - 88,4
REASON FOR POSITIVE VEROSIMILITY	22,7	13,6 - 62,7