

Leeds Teaching Hospitals NHS Trust

Project Name: Leeds Axial PsA Service Improvement Project

Project Summary:

The CWP aims to develop a new service model at the CW Partner for identifying and diagnosing axial Psoriatic Arthritis (axial PsA) in early Psoriatic Arthritis (PsA) patients by funding a research fellow to implement an MRI risk stratification and optimisation of medication review as a result of the MRI results.

The objective is to assess axial involvement in patients presenting with very early PsA by introducing routine imaging with magnetic resonance imaging (MRI) of spine/Sacroiliac Joints (SIJs) alongside peripheral joints as part of the diagnostic pathway. This will allow for implementation of an MRI risk stratification assessment from diagnosis which will lead to prompt decision making with the right treatment being selected for each patient from presentation. This initiative would see patients presenting with PsA benefitting for a full “mapping” of extent of disease by assessing skin, joints and axial involvement in one setting, allowing a change in the service offering for patients as a new model of care.

In addition this project will also include a subset of patients with psoriasis enriched with nail disease, as this is one of the biomarkers for subsequent development of PsA. These patients, with and without joint pain are coming through the combined Psoriasis (Pso)/PsA service at Leeds in the triage clinics. The aim is to identify Pso patients earlier who may be transitioning to PsA. Exploring the possibility of a link between nail disease in psoriasis and subclinical evidence of axial involvement will help confirm the validity of clinical nail psoriasis as a biomarker for PsA.

Objectives:

Create a new model of care by identifying the prevalence of axial PsA in early, newly diagnosed PsA patients through MRI.

Determine the utility of nail PsO as a validated clinical biomarker for MRI diagnostic image stratification as part of optimised service pathway to provide evidence for a new service.

Planned Milestones:

Milestone Description		Planned Completion
1	Kick off meeting/	1 month from signing of CWA
2	Recruitment/training of Fellow	1 month from signing of CWA
3	MRI scans early PsA cohort	6 months from 1/3

	20% recruitment	signing of CWA
4	MRI scans early PsA cohort 40% recruitment	10 months for signing from CWA
5	MRI scans early PsA cohort 80% recruitment	15 months from signing of CWA
6	MRI scans early PsA cohort 80% recruitment	19 months from signing CWA
7	MRI scans early PsA cohort 100% recruitment	24 months from signing CWA
8	Write up Business Case for Trust implementation of MRI/US to be included in PsA pt pathway and present to the Trust Board	24 months from signing CWA
9	Creation of abstract for Dermatology and Rheumatology organisations	25 months from signing CWA
10	Creation and submission of the project outcomes summary in line with the ABPI Code of Practice	25 months from signing CWA

Expected Benefits:

Anticipated benefits for patients:

- Identification of prompt diagnosis and specific targeted treatment.
- Prompt treatment will improve quality of life.

Anticipated benefits for the organisation(s):

- Precise treatment stratification with prompter escalation to biologics if required.
- Allows clinicians to treat PsA early with effective treatment and interventions, potentially limiting future societal and healthcare costs down the Patient pathway.
- Improved understanding and awareness of the scope and size of the problem for axial PsA for Dermatology and Rheumatology, GP and CCG colleagues.

- Demonstrates through publication of the results, the Trust's ongoing commitment to providing the best care possible for their patients.
- Identifying phenotypic characteristics associated with axial PsA (such as Nail PsO) could enable effective patient stratification for proposed imaging assessment thus streamlining services.
- Demonstrates pro-active governance in identifying potentially under and over diagnosed PsA patients.
- The new model may act as a vanguard for the diagnosis and treatment of PsA patients previously diagnosed with PsO across Healthcare Systems in the future.
- Limits the risk to the Trust of a 'missed' PsA diagnosis.
- Provide potential case study for NHS Rightcare Pathways, to improve variation and improve population health.

Anticipated benefits for Novartis:

- *Be seen as a partner of choice by the Rheumatology clinical community by working jointly with the NHS to improve PsA patient care, whilst supporting service improvements within the NHS.*
- *Improved use of medicines (including Novartis medicines) in patients in line with NICE, GRAPPA and BSR guidance.*
- *Demonstrable evidence of working with a Trust that improves care to patients through future publication of the results.*
- *Better understanding of overall customers' and patients' needs.*
- *Optimal use of medicines (including Novartis medicines) in appropriate patients.*
- *Improved patient management and treatment initiation (including Novartis treatments).*
- *Opportunity to implement a scalable MRI project across other NHS sites. To collaborate with the NHS Trust to improve their service and patient management, to become a preferred partner of the NHS.*

Start Date & Duration: January 2024 for 25 months

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