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Theodoros Dimitroulas

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In this December’s issue, the readers of MJR will find interesting papers including reviews, original articles and case reports, as well as a number of externally reviewed research protocols approved for funding by the Greek Rheumatology Association (ERE).

In their editorial, Gasparyan and Kitas1 address open access publishing and necessary steps to ensure its quality, highlighting important tools and effective strategies. Next, enteric microbiota is considered as one of the important triggers of autoimmune activation in rheumatic diseases. Bogdanos and Sakkas2 discuss the potential involvement of Enterococcus gallinarum, a Gram-positive gut pathobiont, in the pathogenesis of autoimmunity with a special focus on the co-existence of systemic lupus erythematosus and autoimmune hepatitis. Based on preliminary data from animal models and humans, the authors hypothesize that Enterococcus gallinarum, may represent a mechanism which mediates immune dysregulation particularly in the gut-liver axis in lupus patients with further evidence required from liver biopsies to check for bacterium translocation.

Dr Argyropoulou and Prof Tzioufas4 – one of the leading international experts in Sjögren’s Syndrome – provide an excellent update of the disease for consultants and rheumatology registrars covering the pathophysiological, clinical and therapeutic aspects of the disease with important implications for daily clinical practice.

The important role of exercise as medicine in several aspects of the management of rheumatoid arthritis such as control of inflammation, improvement of functional status and reduction of cardiovascular risk has been established over the last few years despite the lack of specific recommendations – at least for the time being - by EULAR or ACR. Weijers et al.5 provide data from two Dutch rheumatoid arthritis cohorts, demonstrating that the level of physical activity between 2013 and 2016 appears to have increased, with patients spending more minutes per week in exercise activities. The authors also discuss methods of motivating patients to increase physical activity, such as tailored exercise programs with a focus on setting personal goals different for each individual. It would be interesting to find out whether similar trends have occurred in other countries and whether the magnitude of the increase is sufficient to confer health benefits.

Better understanding of the autoinflammatory diseases has resulted in earlier diagnosis and improved treatment strategies. In this issue, Alzyoud et al.7 present their experience from Jordan in children diagnosed with familiar Mediterranean fever. Given that the disease is far more common in the Middle East, such reports contribute to the dissemination of medical information and give the opportunity to learn from each other’s experience across different countries.

Functional disability driven by knee osteoarthritis is a major issue for society and health systems. In that respect, Gorial et al.6 have investigated the association between functional status and demographic and clinical parameters in Iraqi patients. In line with previous reports, they demonstrated a close relationship between the functional burden of the disease with age and severity of osteoarthritis, and they confirm an unfavorable impact of low educational level in the course of the disease. Systemic lupus erythematosus remains a challenge in rheumatology practice, and the management of the dis-
ease becomes more complex in case of uncommon and/or under-recognized side effects of immunosuppressive treatment. As the routine administration of mycophenolate mofetil is expanding across the whole spectrum of disease manifestations, unknown side effects are emerging; their knowledge is highly relevant for clinicians. For example, new-onset acne in lupus patients receiving mycophenolate mofetil may be related with the treatment, as suggested by the small case-series study by Perricone et al. In addition to describing the cases, the authors also suggest treatment options that may prove useful in routine clinical practice.

In this issue, Antonopoulos et al. describe an interesting case of cutaneous dermatomyositis refractory to therapy with conventional and biologic disease modifying drugs, which finally improved with intravenous immunoglobulin. Such cases underline the complexity of patients with inflammatory myopathies and emphasize the necessity for off-label treatment approaches in specific patients.

REFERENCES


