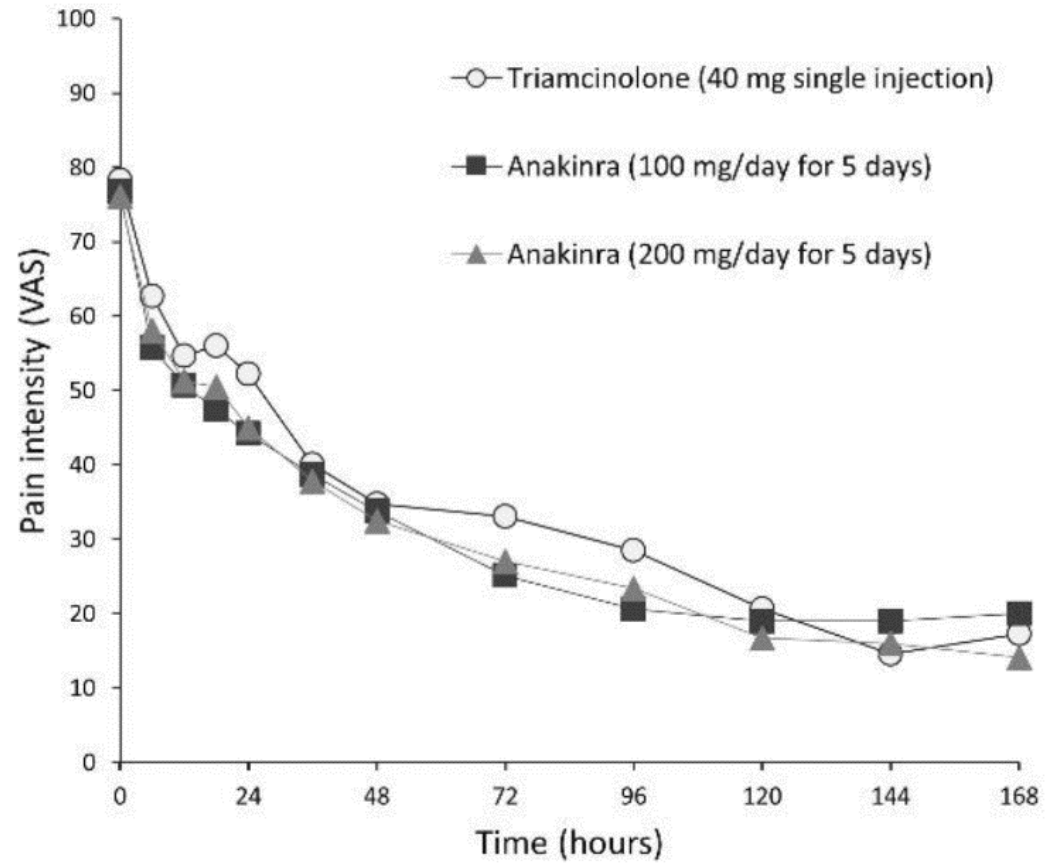


# THU0409 (2020)

A RANDOMIZED, PHASE 2 STUDY EVALUATING THE EFFICACY AND SAFETY OF ANAKINRA IN DIFFICULT-TO-TREAT ACUTE GOUTY ARTHRITIS: THE **ANAGO STUDY**  
**K. Saag**<sup>1</sup>, A. So<sup>2</sup>, P. Khanna<sup>3</sup>, R. Keenan<sup>4</sup>, S. Ohlman<sup>5</sup>, T. Kullenberg<sup>5</sup>, L. Osterling Koskinen<sup>5</sup>, M. H. Pillinger<sup>6</sup>, R. Terkeltaub<sup>7</sup>

**Patient-assessed pain intensity (VAS) in index joint at each time point after treatment**  
(mixed model repeated measures analysis, intention-to-treat population)

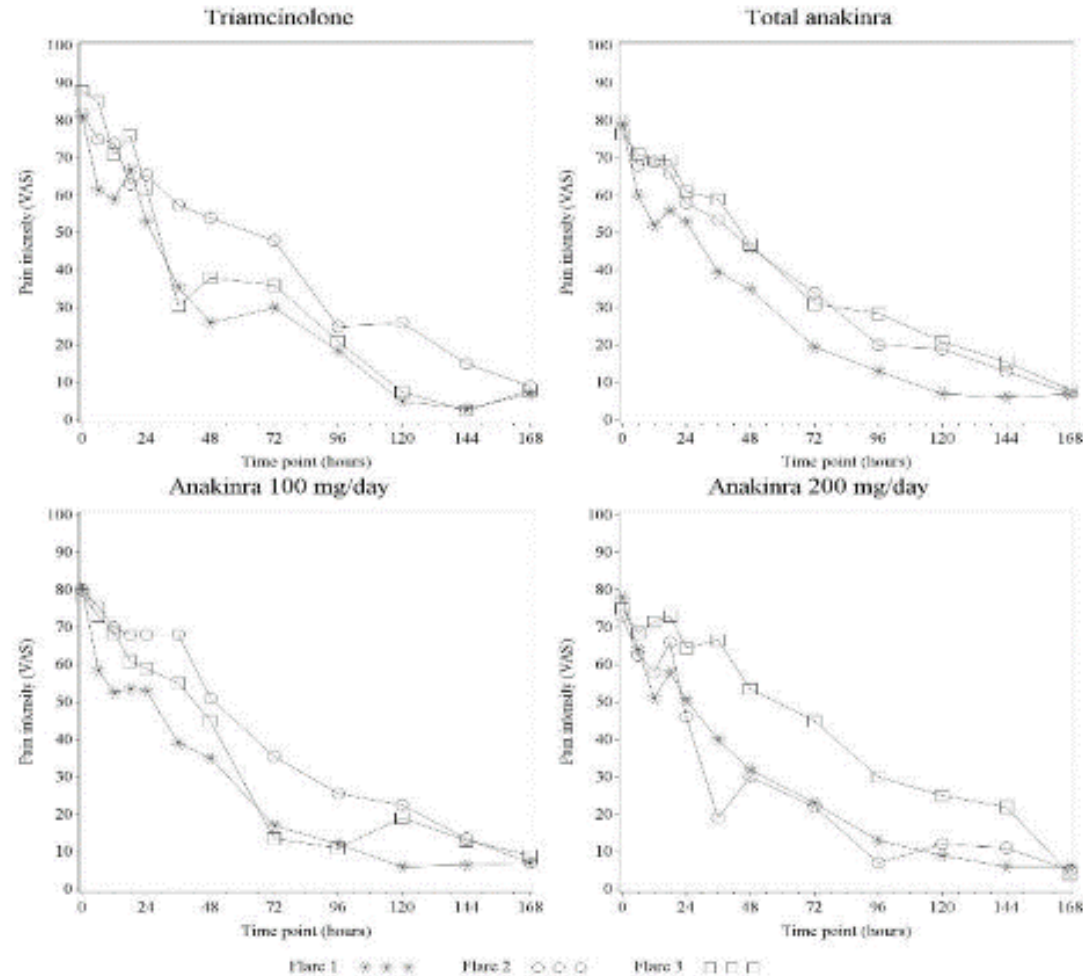


# THU0439 (2020)

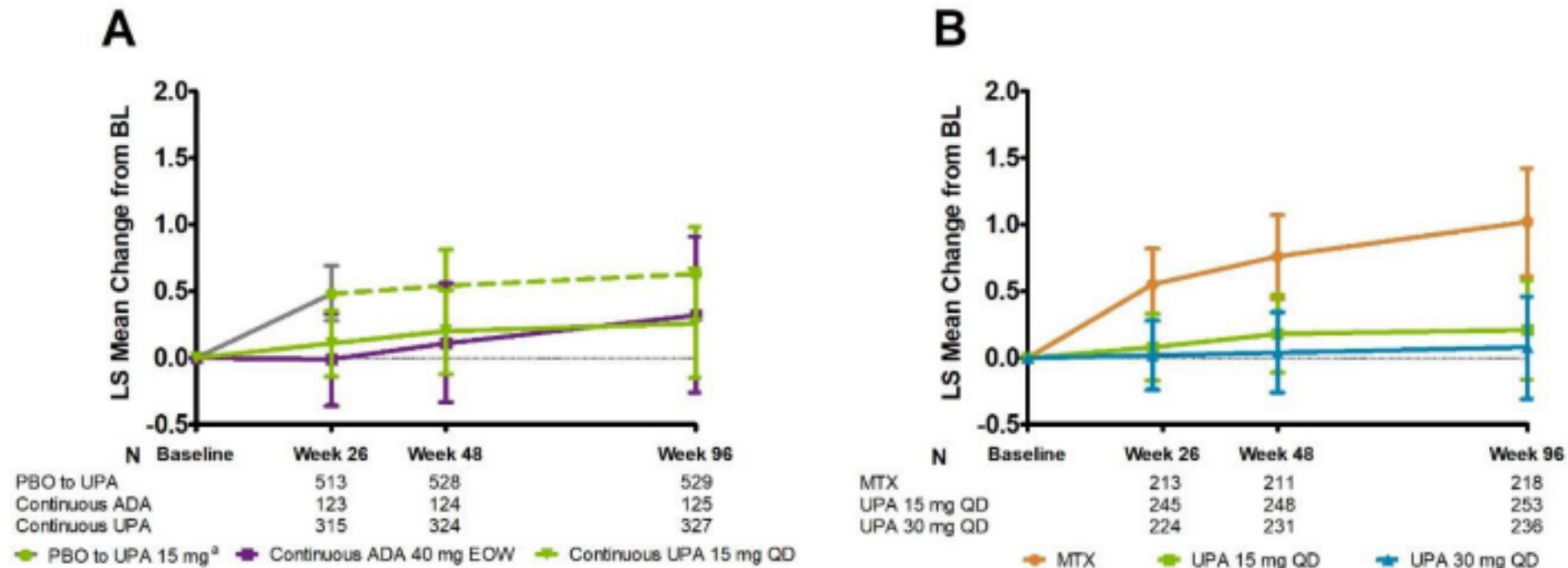
EFFICACY AND SAFETY OF ANAKINRA IN THE TREATMENT OF RECURRENT GOUT FLARES: RESULTS FROM THE EXTENSION PHASE OF THE **ANAGO STUDY**

**K. Saag**<sup>1</sup>, P. Khanna<sup>2</sup>, R. Keenan<sup>3</sup>, S. Ohlman<sup>4</sup>, E. Sparve<sup>4</sup>, D. Lindqvist<sup>4</sup>, A. C. Åkerblad<sup>4</sup>, M. Wikén<sup>4</sup>, A. So<sup>5</sup>, M. H. Pillinger<sup>6</sup>, R. Terkeltaub<sup>7,1</sup>Uni Alabama, Birmingham, United States of America,<sup>2</sup>Uni Michigan, Ann Arbor, United States of America,<sup>3</sup>Duke Uni School Med, Durham, United States of America,<sup>4</sup>Sobi, Stockholm, Sweden,<sup>5</sup>Uni Lausanne, Lausanne, Switzerland,<sup>6</sup>New York Uni School Med, New York, United States of America,<sup>7</sup>Uni California San Diego, La Jolla, United States of America

**Figure 1: Median patient-assessed pain intensity (VAS) in index joint at each time point over flares**



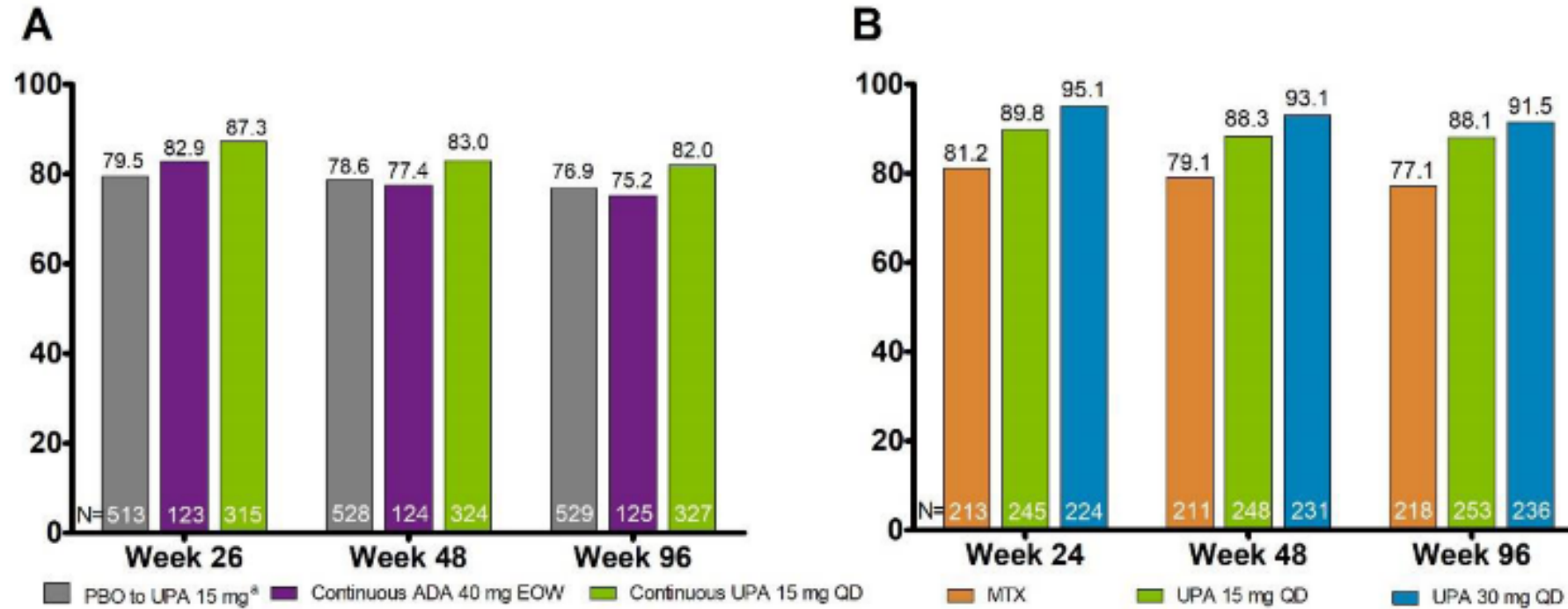
**Figure 1. Mean Change in mTSS from Baseline in SELECT-COMPARE (A) and SELECT-EARLY (B)**



<sup>a</sup>Per study design, all patients in the PBO group who were not previously rescued were switched to UPA 15 mg at wk 26.

Least squares mean estimator is based on an ANCOVA model with treatment and prior bDMARD (SELECT-COMPARE) or geographic region (SELECT-EARLY) as fixed factors and baseline value as a covariate. Error bars represent 95% confidence interval.

**Figure 2. Proportion of Patients with No Radiographic Progression in SELECT-COMPARE (A) and SELECT-EARLY (B)**



# THU0377 (2020)

IMPACT OF FILGOTINIB ON STRUCTURAL LESIONS IN THE SACROILIAC JOINTS AT 12 WEEKS IN PATIENTS WITH ACTIVE AXIAL SPONDYLOARTHRITIS: MAGNETIC RESONANCE IMAGING DATA FROM THE DOUBLE-BLIND, RANDOMIZED TORTUGA TRIAL

W. P. Maksymowych<sup>1</sup>, M. Østergaard<sup>2</sup>, R. B. M. Landewé<sup>3</sup>, W. Barchuk<sup>4</sup>, K. Liu<sup>4</sup>, C. Tasset<sup>5</sup>, L. Gilles<sup>6</sup>, T. Hendriks<sup>7</sup>, R. Besuyen<sup>7</sup>, X. Baraliakos<sup>8</sup>

**Figure 1.** Cumulative probability of change from baseline to Week 12 in total erosion score (a) and total backfill score (b).

