# Procida Update of Psoriatic Disease

Presented here are the Proceedings of the "Procida Update of Psoriatic Disease," a conference held at the Orphans' Conservatory of Terra Murata on the island of Procida in the Gulf of Naples, May 22-24, 2008; and following on a similar conference in Naples in December 2006, which was published in 2007 as a supplement to *Reumatismo*<sup>1</sup>. The Procida conference reported here focused primarily on basic science, imaging, and the clinical and therapeutic aspects of psoriatic disease, thus closely mirroring the 2006 conference plan. Moreover, this supplement provides a further update on imaging, presented at another conference on this theme held in Naples in 2007. The important advances that have emerged since 2006 form a major part of the presentations.

Underpinning the present conference, and like the 2006 meeting, was use of "psoriatic disease," a term introduced in a *Journal* editorial<sup>2</sup>, and which has served to delineate a new approach to understanding the etiology, manifestations, and therapeutic implications of the skin and joint manifestations of psoriasis. This approach has also provided a much needed additional collaboration between rheumatologists and dermatologists. Further, valuable liaisons have been generated between these specialists and workers in related disciplines of imaging, molecular biology, and therapeutics, among others, to throw further light on this fascinating and ever challenging disease complex.

Recent developments in technology and science have enabled remarkably rapid advances in the psoriatic field that were not achieved or envisaged in preceding decades. For example, molecular biology and more sophisticated imaging techniques have allowed new dimensions and facets to be understood, with particular emphasis on the "microcosmic," compared with the "macrocosmic" level of only a few years ago.

Thus, for example, the importance of the enthesis is now more fully appreciated, and molecular science has thrown further light on therapeutic possibilities for the immediate future through the rapidly advancing field of "biologics." Advances in genetics have also allowed further consolidation of the "spondarthritis concept": Now more firmly understood is that psoriatic disease represents an important family of conditions contained within, and related to, a wider matrix of spondylitis related disorders, with primary ankylosing spondylitis providing the nidus of this nexus. From these advances we also know

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that this matrix is linked by myriad shared genes through multifactorial (genetic plus environmental) influences.

Further, a more advanced level has been reached through the fruits of the "new genetics," inspired additionally by international collaboration on the human genome project, now largely complete, but with more work needed to unravel subtype complexities.

Thus, molecular genetics has allowed a useful parallel advance in the understanding of etiopathogenesis and therapeutic possibilities concerning psoriatic and other spondyloarthritic disorders. Moreover, on the therapeutic front, the eventual hope will be for cure rather than palliation, and ultimately, the more difficult goal of disease prevention.

The significance of these therapeutic aims has additional influence on the field of psoriasis, since the parent of the psoriatic disease complex, psoriasis of the integument (skin/nail psoriasis), is relatively common. To provide perspective here, in terms of local geography, consider that its average prevalence of 3% to 4% roughly equates to 40,000 psoriatics in the city of Naples (population c. 1,000,000), and more than the combined populations of the islands of Procida, Ischia, and Capri.

The conference articles presented here begin with a contribution by Prof. Dafna Gladman, University of Toronto: an historical account of psoriatic arthritis from early work at Leeds to the most recent developments.

Topics presented over the 2 day conference include basic sciences of skin, enthesis, and synovium; clinical aspects of psoriasis, psoriatic arthritis, and psoriatic comorbidities; imaging of psoriatic arthritis from ultrasound and magnetic resonance image studies; and 2 sessions covering therapy of psoriasis and psoriatic arthritis – from traditional treatments to recent thoughts on biological therapies ("biologics").

Each session generated lively discussion, and the cross fertilization from this exchange will, we hope, encourage plans for a fourth international update in this rapidly evolving field within the next 2 years.

On behalf of the editorial team, I acknowledge the academic support provided by the Chancellor of the University Federico II, Naples, and by the Dean of the Faculty of Medicine. We also wish to thank the bodies providing financial contributions towards the conference and this publication, as well as the chairpersons, speakers, delegates, and hosts of the Island of Procida who,

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collaboratively, have enabled the useful entente cordiale that has led to a successful and productive conference.

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#### REFERENCE

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- 2. Scarpa R, Ayala F, Caporaso N, Olivieri I. Psoriasis, psoriatic arthritis, or psoriatic disease? J Rheumatol 2006;33:210-2.

## **GUEST EDITOR'S NOTES**

## VERNA WRIGHT, MD, FRCP

Verna Wright was born in 1928. Although Devonian by birth, he was reared and schooled in Bedford, and, as a state scholar, qualified in medicine at Liverpool University in 1953, after changing course from veterinary medicine.

He first developed an interest in psoriatic arthritis at Stoke Mandeville Hospital under Dr. A.G.S. Hill, and extended this interest after moving to Leeds in 1956. Apart from a year at Johns Hopkins Hospital, Baltimore, he spent the rest of his career at Leeds. The University appointed him to a personal chair at the relatively early age of 42 in 1970.

Verna Wright's interests in rheumatology were wide, and though perhaps best known for his work in the spondarthritis field, he was also pivotal in advancing knowledge in biomechanics, therapeutics, rehabilitation, communication, and other aspects of rheumatology, such as the importance of allied health professionals.

Wright rapidly became an international name in rheumatology, and his internationalism was also reflected in his approach to appointing research colleagues, many of whom he attracted from abroad, notably postgraduates from Italy, Egypt, and Japan, and from many other countries. Several returned home with Leeds ideas and reached distinction, such as R. Scarpa, who became Professor of Rheumatology at Naples.

He was a voracious reader, and a meticulous note taker throughout his career – his personal journals covering medical meetings over decades ran to several volumes. And he was responsible for ten books on various rheumatological themes, and produced a formidable list of scientific papers and chapters.

His work was widely recognized by awards, honorary membership of foreign rheumatology societies, and by presidencies of British organizations associated with his specialty, including the Heberden Society.

Verna Wright was a devoted follower of his faith and a keen supporter of the interdenominational Christian youth movement, and he found the time to preach an average of 6 sermons a week.



Inaugural Verna Wright Procida Prize 2008. On the Friday evening of the Conference, May 23, 2008, during the Gala Dinner, John Moll was awarded the inaugural Verna Wright Procida Prize 2008 for his work in the spondyloarthritis field. On behalf of the Scientific Committee of the Prize, Prof. Dafna Gladman, MD, FRCPC, as President of GRAPPA, presented the award. Left to right: Fabio Ayala, Dafna Gladman, Raffaele Scarpa, John Moll.

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With his wife Esther, he was a dedicated family man, and of their 9 children, several entered the professions.

He died in 1998 after a long illness borne with great fortitude.

## JOHN M.H. MOLL, BSc, DM, PhD, FRCP

John Moll was born in Leeds, UK, in 1939 and educated at Leeds Grammar School. With a state scholarship he went to Leeds University, and after successes in the preclinical course (top of year prizes and a research based Hons BSc in anatomy) he was recommended for transfer to Oxford, where he qualified as BM BCh in 1962. In later years he proceeded to DM, the title of his doctorate being "A Family Study of Psoriatic Arthritis."

His early career included jobs at the Radcliffe Infirmary, Oxford, and a spell as a ship's doctor as Assistant Surgeon with the British Merchant Navy. He declined promotion to full Surgeon in order to pursue his career plan as a hospital physician in his native Yorkshire. After further junior hospital appointments in Leeds and Oxford he and his family settled in Sheffield, where he became a consultant and honorary lecturer in rheumatology, and later head of the Sheffield Centre for Rheumatic Diseases.

Moll was awarded the Frink-NASS Award 1987 and the inaugural Verna Wright Procida Prize in 2008 for his work in the spondyloarthritis field.

John Moll's other spheres of interest were medical journalism and pen drawing, and for the latter he was awarded the Sheffield University Centenary Design Prize in 1978. Within the former, he founded and edited 3 peer reviewed periodicals: Journal of Orthopaedic Rheumatology (initially co-edited with Prof. Clem Sledge of Harvard); Rheumatology Review (co-edited with Prof. Roger Sturrock of Glasgow); and the Journal of Medical Biography (published by the Royal Society of Medicine, London).

In addition, he published 13 books, including 2 on medical history (The Heberden Society, 1987, and the Presidents of the Royal Society of Medicine, 1996). His first book, co-authored with Verna Wright, was Seronegative Polyarthritis, published in 1976.

Moll's appointments within the British medical community included Honorary Heberden Librarian of the British Society for Rheumatology, President of the Section of Rheumatology and Rehabilitation of the Royal Society of Medicine, and President of the Aesculapian Society, Sheffield.

Of his 2 sons, the younger is a senior officer and instructor with the South Yorks Fire and Rescue Service. and the elder a consultant anaesthetist, continuing into the third generation the family tradition of medicine.

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