Psoriasis and Psoriatic Arthritis Educational Initiatives: An Update from the 2014 GRAPPA Annual Meeting

Kristina Callis Duffin and Philip J. Mease

ABSTRACT. At the 2014 annual meeting of the Group for Research and Assessment of Psoriasis and Psoriatic Arthritis (GRAPPA), members were updated on Internet-based and continuing education programs in psoriasis and psoriatic arthritis (PsA). The psoriasis and PsA GRAPPA video project, started in 2010, now comprises a set of 15 online videos that provide standardized psoriatic disease endpoint training and proficiency testing for clinicians and researchers. The GRAPPA Global Education Project, started in 2012, comprises several continuing medical education (CME) and non-CME initiatives to educate dermatologists, rheumatologists, and trainees about PsA and psoriasis. (J Rheumatol 2015;42:1056-8; doi:10.3899/jrheum.150133)

Key Indexing Terms:
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GRAPPA Video Project

The video project is a set of online educational modules that provide standardized training for psoriasis and psoriatic arthritis (PsA) disease severity measures used in clinical trials. The Group for Research and Assessment of Psoriasis and Psoriatic Arthritis (GRAPPA) dermatologists, rheumatologists, and pharmaceutical industry partners have long recognized a significant need for standardized and accessible training covering psoriasis and PsA trial endpoints. Development and production of these modules has been described[1,2,3,4].

Currently, there are 15 available dermatology educational modules, including 11 psoriasis modules and 4 PsA modules that cover multiple measures used to assess peripheral and axial disease[4] (See Appendix 1). Each module includes video in which an expert in the field provides instruction supplemented with graphics and photographs. The dermatology videos provide numerous photographic examples of psoriatic plaque features such as erythema, induration, and scale, and most include a certification portion to assess proficiency in scoring sample patients. The rheumatology modules include video footage demonstrating various musculoskeletal examination techniques on volunteer patients.

The first and most widely accessed module reviews the Psoriasis Area and Severity Index (PASI)[5] and body surface area (BSA)[6]. As of June 2014, more than 2000 individuals from > 45 countries had viewed the 16.5-min instructional video and completed the certification portion. An equivalency study has been published that compares PASI assessments performed by patients and PASI-naive physicians to those of PASI-experienced dermatologists before and after viewing the training video[7].

GRAPPA has joined with ePharmaSolutions (Philadelphia, Pennsylvania, USA) to host the modules and provide customized, password-protected workspaces for investigators with trial-specific training needs mandated by pharmaceutical industry sponsors. All GRAPPA members have access to the modules, and certificates of completion are kept on the site for verification by sponsors. Many videos have been customized to meet industry partners' specific training needs.

In 2014, 2 new modules were added: a stand-alone BSA assessment of psoriasis, and the Spondyloarthritis Research Consortium of Canada[8] assessment of enthesitis.

GRAPPA Global Education Project

GRAPPA continues to offer numerous continuing medical education (CME) and non-CME initiatives to educate clinicians about PsA and psoriasis.

In 2014, GRAPPA, along with pharmaceutical company partners, conducted several 1- and 2-day international symposia, with 100–300 attendees each, to educate dermatologists and rheumatologists about psoriasis and PsA. Formats included plenary sessions, discipline-specific sessions, and smaller breakout discussions that allowed more personal interaction. Teaching was done by international and regional dermatologists and rheumatologists who are disease authorities. Topics included disease epidemiology, classification, clinical features, pathophysiology and genetics, screening and assessment, comorbidities and associated conditions, and disease and therapy management. Breakout sessions were focused on physical examination of joints, entheses, dactylitis, spondylitis, skin and nail disease, ultra-

From the University of Utah, Salt Lake City, Utah; and Rheumatology Research, Swedish Medical Center; University of Washington School of Medicine, Seattle, Washington, USA.

K. Callis Duffin, MD, University of Utah; P.J. Mease, MD, Rheumatology Research, Swedish Medical Center; Clinical Professor, University of Washington School of Medicine.

Address correspondence to Dr. K. Callis Duffin, University of Utah, 4A330 Dermatology, 30 North 1900 East, Salt Lake City, Utah 84132, USA. E-mail: Kristina.callis@hsc.utah.edu

sound examination of joints and entheses, case-based discussion of difficult cases, and management controversies. The symposia have provided an opportunity for cross-disciplinary exchange of ideas and perspective, enrichment of personal relationships, and networking for research opportunities. At future symposia, GRAPPA may partner with national/regional dermatology and rheumatology societies, in addition to pharmaceutical companies for financial support. Balanced, evidence-based, and comprehensive content has been approved by a symposium steering committee. In 2014, international symposia were conducted in Tel Aviv, Israel; Tokyo, Japan; and Salvador Bahia, Brazil.

Since 2012, GRAPPA has joined with the Spondyloarthritis Research and Therapy Network (SPARTAN) to conduct CME programs in cities across the United States. Formats and content are similar to the international symposia, only focused on PsA and axial spondyloarthritis, and may also include lectures on pediatrics and magnetic resonance imaging taught by rheumatology experts in PsA and SpA. Typically, 30–40 rheumatologists attend each of these programs, which are similarly funded by pharmaceutical sponsors. Half-day CME programs, with distilled content and without breakout sessions, are also offered for state rheumatology society meetings and in other settings where a shortened format is more appropriate. In 2014, these programs were conducted in Sacramento, Cleveland, Birmingham, New Orleans, Washington DC, and Chicago.

Beginning in late 2014, a partnership between GRAPPA and the National Psoriasis Foundation was to focus on CME education for US dermatologists and rheumatologists, with format and content similar to the GRAPPA/SPARTAN programs described above. Initially, this program will be offered in New York, Los Angeles, and Philadelphia. A parallel initiative by GRAPPA members is planned for cities in Europe. Pharmaceutical companies will again provide unrestricted grant funding for these programs.

GRAPPA remains committed to trainee education. In addition to the opportunities described above, which are open to rheumatology fellows and dermatology residents, GRAPPA members also teach at events specifically designated for trainees. For several years, GRAPPA annual meetings have included trainee oral and poster abstract sessions. Another trainee session was held in 2014 on World Psoriasis Day in Geneva.

The GRAPPA video and global education projects have been well received and are highly respected, for both their content as well as the quality and dynamism of presentation. GRAPPA will continue to conduct diverse educational programs in the future.

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APPENDIX 1. GRAPPA video project: Module descriptions. Adapted from Callis Duffin, et al. J Rheumatol 2014;41:1240-3[4].

Module	Description/notes
PASI and BSA	Psoriasis Area and Severity Index and Body Surface Area[5,9] Background and rationale for PASI, with photographic examples of erythema, induration, and scale, methods of assessing area score, and BSA instruction (handprint = 1%) 16.5 min video Certification module available (3 examples)
6-point sPGA, v. 1	Static Physician Global Assessment, version 1[10,11,12] Erythema, induration, and scale assessed 0–5, then averaged and rounded to nearest whole numbers 1.5 min video Certification module available (3 examples)
6-point sPGA v. 2	Static Physician Global Assessment, version 2 Erythema, induration, scale each scored 0–5 over entire body, averaged and rounded to nearest whole number, using slightly different definitions from the National Psoriasis Foundation description Certification module available (3 examples)
6-point sPGA, v. 3	Static Physician Global Assessment, version 3 Erythema, induration, scale assessed and a single score of 0–5 assigned (no mathematical rounding) Certification module available (3 examples)
5-point sPGA	5-point Static Physician Global Assessment[13] Erythema, induration, and scale assessed individually, then averaged and rounded to nearest whole numbers Certification module available (3 examples)
NAPSI	Nail Psoriasis Severity Index[14] Description of the features of matrix and nail bed psoriasis and how to perform this measure Certification module available (3 example nails)
mNAPSI	Modified Nail Psoriasis Severity Index[15] Description of the rationale and method for performing this measure 3 min 41 s video Certification: Testing available 3 patient examples, no consensus scores available
PSSI	Psoriasis of the Scalp Severity Index[16] Adaptation of PASI for scalp assessment 3 min 23 s video
PPPASI	Palmoplantar Psoriasis Area and Severity Index[17] Adaptation of PASI for scoring palmoplantar pustular or non-pustular psoriasis 7 min 9 s video Certification: 4 patient examples, without consensus scoring
TPSS	Total Plaque Severity Score[18] Assessment tool for target plaques, scores erythema, induration, and scale 0–4, then summed. 6 min 37 s video Certification: 9 target plaques with consensus scores
Body surface area	Describes background and rationale for the handprint method of determining BSA involvement of psoriasis[7]
Dactylitis and enthesitis	Presenters: Philip Helliwell, MD, and Philip Mease, MD, rheumatologists 24 min 58 s video: First 8 min 14 s is dactylitis background and use of dactylometer; remaining portion is enthesitis background, evaluation using Leeds Enthesitis Index, MASES Enthesitis Index, the Enthesitis Skeletal examination, includes coverage of SPARCC Enthesitis Index (18 sites), Major Enthesitis Index, and 4-point Enthesitis Index Certification: testing not available[8,19,20]
Synovitis	Includes joint examination and synovitis introductions, video demonstration of examining joints: TMJ, AC, SC, shoulder, wrist, hand/digits, hip, knee, ankle, foot/digits 37 min 37 s video[20]
Axial Disease Assessment	Includes background and video demonstration of measuring cervical rotation (INSPIRE method with goniometer), chest expansion, occiput-to-wall/tragus-to-wall distance, forward flexion with Schober's test, lateral bending of spine with Domjan and INSPIRE methods, examination of the hip (internal rotation and intramalleolar distance) ~9 min video[21,22]

AC: acromioclavicular; MASES: Maastricht Ankylosing Spondylitis Enthesis Score; SC: sternoclavicular; SPARCC: Spondyloarthritis Research Consortium of Canada; TMJ: temporomandibular joint.