

SJSC: Professional Education Day

By Arthur Bookman, MD, FRCPC

On April 29th a Professional Education Day was held on Sjogren's syndrome at the Hilton Meadowvale Hotel and Conference Centre in Mississauga.

Dr. Rookaya Mather, an ophthalmologist from Western University, discussed the diagnosis and management of xerophthalmia. Dr. Mather made the point that treatment is aimed at maintaining the integrity of the tear film and ocular surface through tear replacement, enhancing tear retention and maximizing meibomian gland function. She addressed four levels of tear dysfunction, from mild to severe, and gave strategies for each. She noted the advent of Lifitegrast, a potential new agent that would prevent T-cell activation on the ocular surface. She also addressed the improvement in artificial tears with the advent of hyaluronic-acid-based preparations.

Dr. Robert Fox was a guest speaker from the Scripps Memorial Hospital in La Jolla. He took an overview approach to future directions for investigations and management of Sjogren's. He addressed the fact that the spectrum of the disease may not be fully appreciated, as many older patients with systemic lupus erythematosus may actually have Sjogren's syndrome. He discussed the fact that many clinical trials are underway, but they do not address the key features of distress in Sjogren's, namely dryness, pain and fatigue. He felt that interferon activation might underlie the fatigue. He also made the point that whereas SLE is largely an "immune complex" disorder, Sjogren's is mainly a "lymphocyte aggressive" disorder. He demonstrated how bits of cellular debris could mimic viral RNA and link to Ro antigen to induce anti-Ro antibodies.

Dr. Leslie Laing, on staff at the University of Toronto School of Medicine, discussed the major issues with dental deterioration seen in Sjogren's syndrome. She addressed the fact that implant survival was as high as 97% in patients with Sjogren's, but about 14% had unsatisfactory results. Bone and gingival resorption about the transplant posts were the main issues.



In my own presentation, I addressed the controversial outcomes of clinical trials to date, and the development of the EULAR Sjogren's Syndrome Disease Activity Index (ESSDAI) and the EULAR Sjogren's Syndrome Patient Reported Index (ESSPRI) to gauge the extra-glandular activity of the disease. New clinical trials underway were described, along with their clinical targets.

Dr. Julius Birnbaum is the only certified internist, neurologist and rheumatologist in the United States. He was a guest speaker from Johns Hopkins Hospital in Baltimore. He covered the neurological manifestations in Sjogren's syndrome, his special area of interest and research. Most interestingly, he described the pathology and clinical manifestations of small fiber neuropathy. The pathological illustrations were quite convincing, but more importantly, he described two subtypes: 1) Length dependent with peripheral pain and sensory loss; and 2) Non-length-dependent, which is a "ganglionopathy" involving the dorsal root ganglia. The diagnosis is best made with skin biopsy, and the prevalence is around 9.7%. Devic's disease as a cause of spinal cord demyelination in Sjogren's was also discussed.

Finally, Dr. Christina McCord, an oral pathologist at Western University, reviewed the mucosal pathology seen with Sjogren's syndrome, including the many forms of candidiasis. She discussed the reasons for salivary gland swelling and methods for management. She reviewed the difficulty with dentures, and the trauma they produce. Topical modalities for management were reviewed. Dr. McCord also addressed the indications and methodology for minor salivary gland biopsy.

The Professional Education Day had more than 90 registrants, and the feedback indicated that the information

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Hamilton Hackathon

By Manisha Mulgund, MD, FRCPC

Hacking Health Hamilton Hackathon was a sponsored event held at McMaster Innovation Park during the last weekend of February 2016. The event aimed to link technology creators, business developers, established resources in hospitals and healthcare professionals together to create novel, human-centric solutions to problems plaguing healthcare in our society. It was indeed interactive and started with individuals presenting their ideas in one-minute presentations on Friday evening. Over the next two days, everyone was encouraged to join a project they found interesting and to build on it to do a three-minute presentation on Sunday, in the hopes of getting funding or support to move further with it. Over the weekend, we had access to mentors and the opportunity to meet others with innovative ideas.

My project idea was to improve patient engagement and education using an app. Another student partnered with me to bring the app idea to life for the presentation. The app was called “Rheumbuddy” and was meant for patients with rheumatoid arthritis (RA) who would have access to education about the causes, symptoms, management, and treatment options in RA. There would be videos for exercises, patient stories, and other educational videos to make it interactive. It was indeed rewarding to be able to conceive the idea and see it partially done. Of course, taking these ideas to completion is another ball game.

Some of the ideas that won funding and entrepreneurial support included replacing physician pagers in hospitals



with an app to sign off documents and to be more reachable and efficient; patient-centred research to rate success of apps used for weight loss and smoking and alcohol cessation so that healthcare professionals can assist patients in choosing the right apps; and simplifying technology so that people in retirement or nursing homes can see videos and pictures of their loved ones on their televisions at the touch of a button. High school students from Hamilton won the People’s Choice Award with their concept of a medication reminder app for a patient,

which is also connected to another user such as the patient’s family member, so that they can rest assured that the patient has actually taken his or her meds to improve adherence.

Overall, the Hacking Health Hamilton Hackathon was a fun, engaging weekend with many interesting ideas that will indeed help solve problems in healthcare. The only word of caution is that there needs to be clarity on the intellectual rights to property if these ideas are taken to the next level. I am sure that with increasing success of such meet-ups, the organizers will establish some ground rules on these issues.

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provided was outstanding. The organizers (Toronto Western Hospital Division of Rheumatology and the Sjogren’s Society of Canada) were inundated with requests for a repeat performance, and discussions are underway to consider another CME event in western Canada.

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