

Highlights from ACR Convergence 2021

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I did not leave my heart in San Francisco, where the American College of Rheumatology (ACR) 2021 was originally scheduled to occur, as the pandemic forced a pivot for a second year to the all-virtual format known as ACR Convergence. Programming was extended from November 1st-10th, including a Global Rheumatology Summit, Basic and Clinical Research Conference and the ACR Review Course, as well as a jam-packed meeting. From mid-December to mid-February, there will also be post-conference weekly sessions on Fridays with poster tours and debriefs highlighting the more common rheumatic diseases.

The platform was robust, including pre-recorded lectures on VIMEO with live Q&A sessions thereafter. Study Groups and Community Hubs on every conceivable rheumatology topic were sprinkled through the conference. Community Hubs included Meet-the-Expert sessions, as well as abstract presenter lightning rounds and difficult case discussions. Multiple streams catered to areas such as pediatric rheumatology, the business of rheumatology, interprofessional care and early career issues. It was possible to attend from 7:30 am to 7:00 pm every day, though not recommended either physically or mentally.

Almost every poster and abstract presentation could be downloaded in PDF format, and short audio synopses of the posters were virtually universal. The ORAL-Surveillance study was featured in at least four presentations (0831, 1684, 1940, 1941) and the FDA Update session, though the full study remains unpublished. Late breaker posters focused of course on COVID-19, as well as cardiovascular issues with hydroxychloroquine, gout, and new therapies such as avacopan for antineutrophil cytoplasmic antibodies (ANCA) vasculitis, pirfenidone for rheumatoid arthritis-associated interstitial lung disease (RA-ILD) and sequential biologics for systemic lupus erythematosus (SLE) (BLISS BELIEVE study). A positive phase 2 trial of secukinumab in giant cell arteritis (GCA) (LB19) also caught my interest. Other key studies with interesting acronyms were presented, including VITAL, KEEPSAKE, STOP-JIA, and GLORIA. Social media and interactivity were prominent, with #ACR21 Tweet Ups, polls, and lots of activity in the chat and Q&A functions of most presentations.

There were 2,500 speakers and presenters involved, which may be a new record. More than 2,000 abstracts were presented. Official attendance was 14,000 people

from 110 countries. Canadians were prominent as usual, many moderating key sessions, as well as presenting original research based on Canadian cohorts and registries. I attended the adult Thieves Market session (9T115), where two of the four presenters were Canadian rheumatology fellows: Jehanya Jegatheeswaran from Queen's (A Bone to Pick) and Maria Powell from the University of Calgary (The Disease that Cried Wolf). All the cases were fascinating, with a key take-home message that infectious diseases can masquerade as rheumatic conditions (SLE is not the only disease with protean manifestations). As the winning presenter noted, "TB can cause anything except pregnancy".

We were also well-represented in the ACR and Association of Rheumatology Professionals (ARP) awards, which included ACR Masters John Hanly (also a plenary session presenter on functional connectivity in neuro-SLE) and Rayfel Schneider, ACR Distinguished Clinical Investigator awardee Brian Feldman, and ARP award winners Debbie Feldman (Addie Thomas Service Award), Catherine Backman (Lifetime Achievement Award) and Monique Gignac (Ann Kunkel Award). Many of them are individually featured in this issue's Awards and Accolades section.

Issues around equity, diversity and inclusion were prominently featured, as they will be at the upcoming CRA ASM 2022 as well. The ACR Rheumatology Image Bank solicited new slides featuring cutaneous manifestations of diseases in patients with various skin colours, for example.

The opening keynote speaker, Dr. Seema Yasmin, spoke informally as part of a conversation with ACR President Dr. David Karp. Dr. Yasmin is both a physician epidemiologist and a journalist, having trained at the Dalla Lana school at the University of Toronto, and now based at Stanford. She spoke on vaccines and medical myths, amongst other topics. I plan to read her latest book, "Viral BS: Medical Myths and Why We Fall for Them," when I have the opportunity.

The Great Debate featured Dr. Michelle Petri and Dr. Brad Kovin debating the merits of belimumab versus voclosporin, the latter developed by a Canadian company, for the treatment of lupus nephritis. Dr. Petri was the winner with 70% of the votes.

There were excellent named lectureships, including the Gluck lecture on "The Role of Bone in OA" by Dr. Marc Hochberg, the Arend lecture by Dr. Gary Firestein on "The Disease Formerly Known as RA," the Klemperer lecture by Dr. Peter Gregersen on "Forty Years of Working on a Changing Research Landscape from RA to Endometriosis", and the Dubois lecture by Dr. Aimee Hersh on "Defining

Research Priorities in Pediatric Lupus". Who knew that tumour necrosis factors (TNFs), IL-1 and IL-6 were involved in the pathogenesis of endometriosis? That was only one of the fascinating facts I picked up.

The Year in Review was traditional in format, with basic science and clinical segments. The Closing Session was different, with a moderator and four discussants chatting without slides. The participants highlighted new information presented on polymyalgia rheumatica (PMR)/giant cell arteritis (GCA), multisystem inflammatory syndrome in children (MIS-C) related to COVID-19 infection in pediatric patients, rehabilitation and employment in the rheumatic diseases, environment-genetic interactions affecting disease pathogenesis, the microbiome, dietary supplements such as fish oil, Vitamin D, and omega-3s, geriatric rheumatology, and the impact of climate change and pollution on autoimmunity.

Other highlights: The ACR Knowledge Bowl, the ACR's counterpart to *RheumJeopardy*, was won by the Gulls of Galveston, based in Texas. More information was presented from the Accelerating Medicines Partnership (AMP) which is working to develop novel therapies in rheumatology. Dr. Kenneth Saag was formally installed as the 85th ACR President.

The plan is for ACR 2022 to be live in Philadelphia, but a hybrid meeting with a virtual component remains quite likely.

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If You Ask for Innovation It Will Come

By Trish Barbato
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In the last issue, I talked about how arthritis needs innovation. Well, it turns out there are a lot of innovators who want to help people living with arthritis.

Whether it's researchers, entrepreneurs or clinicians, the number of creative minds working on solutions that could make life better for people living with arthritis is inspiring.

Our new **Ignite Research Grants** program attracted almost 50 applications in its first year, and we are delighted to have been able to fund nine of them. The projects range from investigating if tiny particles in the blood could predict response to methotrexate, to studying bone marrow lesions in people with osteoarthritis to better understand the disease — and all could yield tremendous results.

Similarly, in December, we were overwhelmed by the number and quality of submissions to both our **Social Impact Program** and our **Arthritis Ideator Program**. The submissions came from across the country and ranged from apps to assistive devices to screening programs.

To support this work, we recruited more than 30 "Innovation Ambassadors." Our Ambassadors, who live with arthritis, have been testing products and technology, meeting entrepreneurs and lending their voice to the assessment of submissions. The Arthritis Ideator Program will



culminate with four finalists — including a People's Choice Award — being selected for funding at our exciting Arthritis Ideation Awards event on April 21, 2022. Join us for this energizing presentation of innovation. We're uncovering and fueling ideas that will change the future! More information is available at www.arthritis.ca/innovation.