WHAT'S THE CRAF DOING FOR YOU?

Rally for Rheumatology

his September, rheumatologists across Canada launched a new tradition rooted in collective action and a shared commitment to the future of patient care. The inaugural "Rally for Rheumatology", led by the Canadian Rheumatology Association Foundation (CRAF), invited rheumatologists to match patient donations during Arthritis Awareness Month, doubling their impact in support of research, education, and patient care.

By encouraging rheumatologists to match patient donations, and doubling their collective impact, the campaign sparked national conversation around the importance of sustained investment in rheumatology research and education to improve patient care. "Rally for Rheumatology" saw participation from rheumatologists across Canada, generating momentum across provinces and practices. The funds raised will support CRAF's core mission: funding Canadian-led research, supporting education, and strengthening care for people living with rheumatic diseases.

CRAF's Executive Director, Dr. Ahmad Zbib, emphasized the impact of this early momentum and the deeper purpose behind the campaign: "We've made great progress with treatments for many rheumatic diseases, but we still don't have cures. For some conditions, good treatment options are still out of reach. That's why research is so important, as it gives us the chance to change outcomes. Our goal is to build a strong endowment so we can keep supporting research now and into the future."



He also expressed deep gratitude to everyone who took part in the rally: "We're truly thankful to the rheumatologists and patients who stepped up this year. We're excited about what the campaign can help to accomplish in the years ahead."

Dr. Trudy Taylor, CRA President and a participating rheumatologist in Halifax, reflected, "This campaign provided a new opportunity to work together with patients for the future of rheumatology care, and together we can make a real impact."

With plans already underway for 2026, "Rally for Rheumatology" is set to become a new anchor in CRAF's efforts to engage the profession and the public in shaping what comes next.

NOTE: To build off of the momentum and success the campaign has achieved to date, the CRAF extended the deadline to participate until December 31, 2025! Join the Rally and visit *crafoundation*. *akaraisin.com/ui/rallyforrheum2025*.



NEWS FROM CIORA

Multicriteria Decision Analysis with 1000Minds for Developing Scleroderma Renal Crisis Classification Criteria

The Scleroderma Clinical Trials Consortium Scleroderma Renal Crisis Working Group was created to develop and validate classification criteria for scleroderma renal crisis (SRC). In accordance with recommendations for rheumatic disease classification criteria development, we designed a multi-phase expert- and data-driven study. In phase 1, we performed a scoping review to generate items to define SRC.¹ In phase 2, we undertook item reduction using consensus techniques (3-round online Delphi exercise and Nominal group discussion) to generate a core set of items to define SRC.²

e secured CIORA funding in 2023 to conduct phase 3 of the study (Principal Investigators: Marie Hudson, Sindhu Johnson and Christopher Denton). The aim was to refine and weight the core set items. Thirty-one case vignettes reflecting the broad range of SRC were submitted by 8 experts from around the world. A first-ranking exercise was performed by an independent panel of 14 experts (see photo below) to capture individual preferences for item importance. The same experts then met in person for a 1.5-day meeting. Items were discussed individually, and a framework and glossary were finalized. Experts discussed the need for 1) entry criteria; 2) exclusion criteria; and 3) sufficient (or absolute) criteria for inclusion. A multi-criteria decision analysis (MCDA) exercise was then conducted to determine the relative weighting of each item using 1000Minds software. The panel was presented with paired scenarios comparing items and asking them to select the option they believed had a higher probability of being classified as SRC. The distribution of choices on each scenario was presented to the group. Where there was no agreement, the reasons for disagreement were discussed. Consensus was considered achieved when all experts indicated agreement or could accept the majority decision. Through iterative discrete pair-wise choices, the decision analytic software was able to assign relative weights to the items.

Finally, the results of the first-ranking and MCDA exercises were analyzed to produce a continuous measure of



the relative probability that a case could be characterized as SRC, and a provisional threshold score above which a case could be definitely classified as SRC.

We have now undertaken the 4th and final phase of the project. We are collecting a large international cohort of SRC cases and controls to 1) refine the weights and threshold score in a new derivation cohort, and 2) test the sensitivity and specificity of the final criteria in an independent validation cohort. We expect to produce the first expert- and data-driven classification criteria for SRC. This work will provide a robust framework for future projects to tackle substantial unmet clinical needs for SRC.

References:

- Hoa S, Stern EP, Denton CP, Hudson M, Scleroderma Clinical Trials Consortium Scleroderma Renal Crisis Working Group Investigators of the Scleroderma Clinical Trials Consortium Scleroderma Renal Crisis Working G. Towards developing criteria for scleroderma renal crisis: A scoping review. Autoimmun Rev. 2017;16(4):407-15.
- Butler EA, Baron M, Fogo AB, Frech T, Ghossein C, Hachulla E, et al. Generation of a core set of items to develop classification criteria for Scleroderma renal crisis using consensus methodology. Arthritis Rheumatol. 2019;71(6):964-71.



Members of the MCDA panel: Dr. Robyn Domsic (USA), Dr. Laura Ross (Australia), Dr. Virginia Steen (USA), Dr. Benjamin Chaigne (France), Dr. Tracy Frech (USA), Dr. Andrea Low (Singapore), Melanie Baniña (study coordinator), Dr. Edward Stern (UK), Alison Hendry (moderator), Kristina Clark (UK), Falguni Desai (patient partner), Dr. Madelon Vonk (Netherlands), Dr. Tatiana Rodriguez (Mexico), Dr. Marie Hudson (Canada), Dr. Patricia Carreira (Spain) and Dr. Lee Shapiro (USA). Absent: Swati Mehta (USA).