**ABSTRACTS | Patient-Targeted Research**

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Using electronic health records to evaluate factors associated with treatment escalation in psoriasis

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**Objective.** It was previously demonstrated that cutaneous vasculitis, including IgA vasculitis and cutaneous arthritis (CA), is associated with the presence of IgM antibodies (Abs) against the phospholipid/prothrombin complex (PL/PT). Recently, novel enzyme-linked immunosorbent assay (ELISA) Abs have become commercially available.

**Methods.** The prevalence of serum IgM and IgG plasminogen activator type 2 (AP2) Abs in both cutaneous and systemic vasculitis was determined using these kits. In addition, to examine whether Ap2 Abs were involved in the pathogenesis of cutaneous vasculitis, 205 patients with active lupus patients were treated with the commercially available assay.

**Results.** In IgM+ patients with systemic vasculitis, serum IgM and IgG+ patients demonstrated disease activity and showed a significant increase in AP2 Abs levels. Furthermore, baseline AP2 Abs levels were increased in patients with systemic vasculitis skin with skin involvement and healthy controls. There was no significant difference in the serum levels of IgM and IgG+ Abs between the patients and healthy controls.

**Conclusion.** The use of electronic health records to evaluate factors associated with treatment escalation in psoriasis is feasible and may help to identify patients who are at risk for treatment escalation.psi

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**Anti-phospholipid/serine/prothrombin complex antibodies in patients with cutaneous vasculitis:** Possible involvement in the pathogenesis


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