

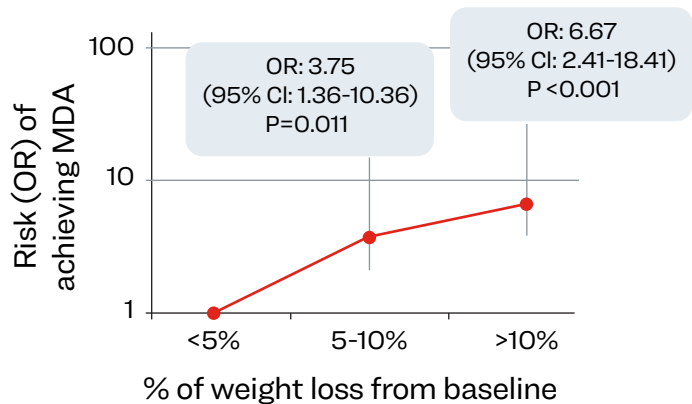
Weight Reduction Improves PsA Outcomes

Diet-Based Weight Loss as a Predictor of MDA¹

5%

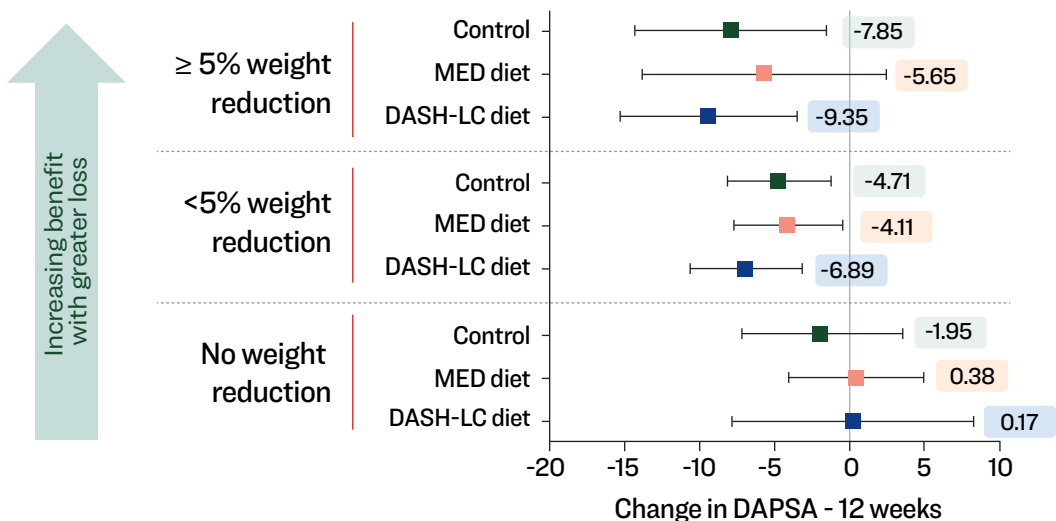
Losing ≥5% body weight increases the likelihood of achieving MDA in patients with PsA with overweight/obesity initiating TNFi therapy.

Greater weight loss (5–10% and >10%) further improves the odds of reaching MDA compared with <5% loss.



Diet-Based Weight Loss Improves Clinical and Metabolic Outcomes²

Change in DAPSA score from baseline at Week 12, by degree of weight loss



Note: Multicentre randomized controlled trial. Control is a standard-of-care receiving general, non-personalized dietary advice; MED diet is a Mediterranean diet focused on healthy food composition; DASH-LC diet is a low-calorie Dietary Approaches to Stopping Hypertension diet targeting weight reduction.

Greater weight loss is associated with larger improvements in PsA disease activity, independent of diet strategy.²

Bariatric Surgery and PsA Outcomes³



The incidence and prognosis of new onset PsO and PsA in all patients undergoing bariatric surgery was examined (N=13,435)³



After gastric bypass, there was a decreased risk of PsA³
(adjusted HR: 0.29; 95% CI, 0.12-0.71; p=0.01)



This was not observed following gastric banding³
(adjusted HR: 0.53; 95% CI, 0.08-3.56, p=0.52)

Bariatric surgery may improve rheumatic outcomes, but controlled trials with long follow-up are needed⁴

BMI=body mass index; CI=confidence interval; DAPSA=disease activity in psoriatic arthritis; HR=hazard ratio; IQR=interquartile range; MDA=minimal disease activity; n=number of responders; OR=odds ratio; PsA=psoriatic arthritis; PsO=psoriasis; TNFi=tumor necrosis factor inhibitor.

1. Di Minno MND, et al. *Ann Rheum Dis*. 2014;73(6):1157-1162. 2. Eder L, et al. *Arthritis Rheumatol*. 2025;77(suppl 9):Abstract 2690. Presented at ACR Convergence 2025. 3. Egeberg A, et al. *JAMA Surg*. 2017;152(4):344-349. 4. Lespessailles E, et al. *Arthritis Res Ther*. 2019;21(1):83.