



社團法人中華民國風濕病醫學會

Taiwan Rheumatology Association

中華民國風濕病醫學會第 34 週年年會

2016 Annual Meeting

34th Annual Meeting of Taiwan Rheumatology Association.

日 期：2016 年 10 月 21、22、23 日 (星期五、六、日)

地 點：新竹喜來登飯店(新竹縣竹北市光明六路東一段 265 號)

2016 社團法人中華民國風濕病醫學會會員大會暨學術研討會

會員注意事項

1. 今年年會地點於新竹喜來登大飯店 3 樓宴會廳。
2. 社團法人中華民國風濕病醫學會會員(以下簡稱本會會員)欲住宿者，請與惠康旅行社 Sophie 張小姐連絡，洽詢住宿及費用相關事宜，行動電話：0927-115512 / (07)332-1383。
3. 報到時間：10 月 22 日 (星期六) 08:10~18:00
10 月 23 日 (星期日) 08:10~15:00
4. 報名方式：現場報名，為鼓勵會員參與，本會會員免收參加費，非本會會員須繳交參加費 NT\$5,000 元。
5. 為了鼓勵會員積極參加，特別舉辦多次摸彩，分別為 10 月 22 日早上 08:15 及 10 月 23 日下午 16:10，兩次摸彩可重複，但須本人在場即有效。
6. 今年年會繼續教育學分可以以身份證條碼或健保卡登錄，請會員攜帶身份證或健保卡。非會員仍比照往年簽名於紙本。
7. 壁報論文注意事項：
 - (1)壁報規格：寬 90 cm × 高 150 cm。
 - (2) 10 月 22 日 (星期六) 上午 9:00 開放海報張貼。
 - (3) 10 月 23 日 (星期日) 下午 15:00 後才可撤下壁報。
 - (4)海報論文作者應在 Poster Round 時間內在其海報論文前現場備詢。
 - (5)Poster Round 時段
10 月 22 日(六)上午 10:10-10:30
由黃文男醫師帶領，請有興趣者於規定時間至 P001 集合 (P001~P010)
由陳堃宏醫師帶領，請有興趣者於規定時間至 P011 集合 (P011~P019)
10 月 22 日(六)下午 16:20-16:30
由蘇昱日醫師帶領，請有興趣者於規定時間至 P020 集合 (P020~P024)
10 月 23 日(日)上午 10:20-10:30
由呂聆音醫師帶領，請有興趣者於規定時間至 P025 集合 (P025~P035)
10 月 23 日(日)下午 14:50-15:10
由黃光永醫師帶領，請有興趣者於規定時間至 P036 集合 (P036~P045)
由郭昶甫醫師帶領，請有興趣者於規定時間至 P046 集合 (P046~P054)

8. lunch symposium：10 月 22~23 日(六~日)於 3 樓宴會廳，需事先上網登記(請至學會網站→會議及活動登入帳號登記)。
9. 大會晚宴：10 月 22 日(星期六)晚上 19:00 於 3 樓宴會廳，需事先上網登記(請至學會網站→會議及活動登入帳號登記)。
10. 10 月 23 日(日)下午 1 點~2 點舉行會員大會暨第 14 屆理監事會選舉。
11. 通關護照蓋滿全部廠商攤位，可獲得紀念品乙份，請憑『通關護照』於 10 月 23 日下午 2 點過後至報到處領取。
12. 欲參加 105 年 10 月 22 日中華民國醫用超音波學會舉辦免疫風濕科之課程，本會提供往返之交通接駁車供會員方便參與，若有意前往之會員，請於 9 月 1 日(四)前上網登記：<http://goo.gl/forms/pzb3P9scHmasi6u92>

		發車時間	集合地點
去程	新竹喜來登飯店→台北國際會議中心	10 月 22 日(六)中午 12:15	新竹喜來登飯店門口
回程	台北國際會議中心→新竹喜來登飯店	10 月 22 日(六)下午 16:50	台北國際會議中心門口

<<感謝瑞士商艾伯維藥品有限公司/衛采製藥股份有限公司贊助提供>>

主持人注意事項

1. 請準時開始準時結束。
2. 主持人請於節目開始前 10 分鐘到現場。
3. 請每時段之座長事先準備介紹及討論（我們將寄上摘要內容）。
4. 提醒會議進行時請會員將手機轉為震動。

演講者注意事項

1. 本會提供單槍投影機、Notebook。演講者請使用 PowerPoint 檔案。
2. 演講內容請先於演講前 1 小時至報到處之試片處儲存於大會電腦。恕無法接受自備手提電腦轉接。
3. 簡報內容請以 Microsoft PowerPoint 2003 版本儲存。勿使用 2007 版本以免發生播放困難。
4. 口頭論文報告演講時間以6分鐘為限，時間結束前2分鐘按一次鈴，時間到按兩次鈴結束報告，再進行綜合討論。

Preliminary Program-2016 TRA Annual Meeting

10月21日(星期五)					
時間	10:00-12:00	12:00-13:00	13:00-19:00	19:00-21:00	
地點	3F 百合廳				
	Review course 主持人：陳得源理事長	Meet the Master 周昌德教授、蔡嘉哲教授 主持人：陳得源理事長	物理治療研習會		
第十三屆第十四次理監事聯席會議					

10月22日(星期六)								
時間	08:15-08:30	08:30-09:10	09:20-10:00	10:10-10:30	10:30-11:10	11:20-12:00	12:00-12:40	12:50-13:30
宴會廳II	摸彩、Welcome Remarks (陳得源理事長、陳相成會長)	Industrial satellite symposium I Connective Tissue Disease associated Pulmonary Arterial Hypertension - What should we do in new ERA ? 林口長庚醫院心臟內一科賀萬靖醫師/台中榮民總醫院趙敏免疫風濕科謝祖怡醫師 主持人：藍忠亮副院長	Plenary Lecture Prof. William E.Kraus,M.D. The Optimal Exercise for Cardiovascular Prevention in Rheumatic Disease: Dose and Intensity 主持人：鄭添財主任	Coffee Break	Keynote speech Virginia Byers Kraus, MD, PhD Evidence for Endogenous Cartilage Repair 主持人：陳相成主任	oral presentation	Industrial satellite symposium II The Effectiveness of Tocilizumab by New Criteria in RA Patients TSUTOMU TAKEUCHI, M.D., Ph.D. 主持人：蔡世滋教授	Industrial satellite symposium III Targeting unmet needs of autoantibody-driven inflammatory diseases: focus on seropositive rheumatoid arthritis Prof. Gregg Silverman 主持人：劉明輝教授
梅花廳						oral presentation		
桐花廳								
百合廳								
海報區				Poster Tour				
時間	13:40-14:20	14:20-15:40	15:40-16:20	16:20-16:30	16:30-17:10	17:20-18:00	18:00-18:40	19:00~
宴會廳II	Scientific Lecture 高雄醫學大學附設中和紀念醫院 顏正賢教授 我的醫學研究生涯~被Etiopathogenesis of Rheumatoid Arthritis 主持人：蔡嘉哲教授	oral presentation	Scientific Lecture Prof. Shoze Izui,MD,PhD Autoantibody Pathogenicity: Lessons from Monoclonal Antibodies 主持人：鄭賀雄副院長	Coffee Break	Industrial satellite symposium IV The early phases of gout: The updates of diagnosis and treatment Prof. Juan Garcia Puig 主持人：余光輝教授	Industrial satellite symposium V The transformation of RA treatment: The role of emerging therapies in the modern treatment paradigm Dr. Michel Zummer 主持人：羅淑芬教授		晚宴
梅花廳	病友教育講座 14:00-16:30 主持人：賴寧生院長、蔡世滋教授、林孝義主任、陳相成主任						Industrial satellite symposium VI Clinical manifestations in a uveitis patients with and without rheumatic disease in a Chinese population in Taiwan 林口長庚 黃奕修醫師 主持人：蔡長祐主任	
桐花廳								
百合廳								

海報區				Poster Tour			
	中華民國醫用超音波年會舉辦免疫風濕科之課程13:30-16:10 地點：台北國際會議中心 主持人：羅淑芬教授、張棋楨主任、李克仁醫師						
	中華民國醫用超音波年會交通接駁車資訊： 【去程：新竹喜來登飯店>>台北國際會議中心，發車時間10/22中午12：15集合地點：飯店門口】 【回程：台北國際會議中心>>新竹喜來登飯店，發車時間10/22下午16：50 集合地點：台北國際會議中心門口】						

Preliminary Program-2016 TRA Annual Meeting

10月23日(星期日)							
時間	08:20-09:00	09:10-09:50	09:50-10:20	10:20-10:30	10:30-11:10	11:10-12:00	12:10-12:50
宴會廳II	Industrial satellite symposium VII The Optimization of anti-TNF usage in RA management Dr. Jane M Zochling 主持人：張德明院長	Scientific Lecture 成大醫院皮膚科 李玉雲教授 Clinical and pathological spectrum of evanescent and persistent eruptions of adult-onset Still disease 主持人：劉明輝教授	oral presentation	Coffee Break	Plenary Lecture 安徽醫科大學第一附屬醫院 風濕免疫科徐建華教授 骨关节炎影像学改变及药物治疗进展 主持人：周昌德教授	oral presentation	Industrial satellite symposium VIII ASAP 幸福無“懼”：懼直性脊推炎病人自我管理APP 台大醫院謝松洲主任 主持人：蔡文展教授
梅花廳		08:50-12:20 風濕病個案管理師訓練班 主持人：陳得源理事長、陳怡行主任					
桐花廳							
百合廳							
海報區				Poster Tour			
時間	14:10-14:50	14:50-15:10	15:10-15:50	16:00-16:40	16:40-17:00	17:00~	
宴會廳II	Special Lecture 中國醫藥大學附設醫院免疫風濕科 藍忠亮副院長 Connective Tissue Disease Associated with Interstitial Lung Disease: Clinical Features, Biomarkers HRCT lung score, and Treatment outcome 主持人：劉宏文教授	Coffee Break	Special Lecture 台灣風濕病醫學會2016 AAV治療建議 亞東醫院吳建陞主任、台中榮總謝祖怡主任 主持人：陳得源理事長、吳詹永嬌主任	Special Lecture The New Landscape of Rheumatology 中山附醫魏正宗主任、臺北市立聯合醫院仁愛分院梁統華醫師、陳得源理事長 忠亮副院長 主持人：林孝義主任	摸彩	Closing	
梅花廳	oral presentation						
桐花廳							
百合廳							
海報區							

中華民國風濕病醫學會 2016 年會

Review Course

RA、ANCA-Associated Vasculitis、AS 最新診療現況

時間：105 年 10 月 21 日(星期五)10：00~12：00

Time：10:00~12:00 21-Oct-2016

地點：新竹喜來登大飯店三樓百合廳

時間	講題	主講人	主持人
10:00-10:40	RA	三軍總醫院 陳相成醫師	社團法人中華民國 風濕病醫學會 理事長 陳得源
10:40-11:20	ANCA-Associated Vasculitis	台北榮民總醫院 陳瑋昇醫師	
11:20-12:00	AS	台大醫院 李克仁醫師	

中華民國風濕病醫學會 2016 年會

Meet the Master

時間：105 年 10 月 21 日(星期五)12：00~13：00(含午餐)

地點：新竹喜來登大飯店三樓百合廳

主辦單位：社團法人中華民國風濕病醫學會

主講人：周昌德教授、蔡嘉哲教授

主持人：中華民國風濕病醫學會 陳得源 理事長

您...想要了解『**醫界大師**』是如何產生的嗎？

邀請了 2 位重量級大師蒞臨現場：

周昌德教授、蔡嘉哲教授

此活動將與重量級大師對談

2 位大師將自我介紹，談論一生經歷並分享生涯規劃

周昌德教授將分享” 如何攀登高峰~在風濕科如何一腳一步往前行而能達標”

蔡嘉哲教授將分享” Balance in Work and life”

中華民國風濕病醫學會 2016

物理治療講習班

時間：2016 年 10 月 21 日 (星期五) 13:00~19:00

地點：新竹喜來登飯店三樓百合廳

主辦單位：中華民國風濕病醫學會

協辦單位：三軍總醫院風濕免疫過敏科、復健醫學部

教學目標：風濕科專科醫師學員完成 32 學分的風濕病相關物理治療學分課程後，將能

(1) 給予僵直性脊椎炎病患運動治療處方以符合生物製劑申請之要件

(2) 獨立處方簡單至中度復健治療以申請健保給付。

時間	講題	主講人	主持人
13:00-13:50	Primary rehabilitation medicine in rheumatology	三軍總醫院復健部 張正強醫師	風濕病醫學會 理事長 陳得源教授
13:50-14:40	風濕免疫常見輔具的申請與評估	三軍總醫院復健部 許高誌醫師	
14:40-15:30	僵直性脊椎炎的評估與復健	三軍總醫院復健部 林靜約醫師	
15:30-16:00	Break		
16:00-16:50	疼痛與復健	三軍總醫院復健部 吳永燦醫師	三軍總醫院 風濕免疫過敏科 陳相成主任
16:50-17:40	風濕關節炎之行動輔具簡介	三軍總醫院復健部 蔣尚霖醫師	
17:40-18:30	Basic MSK-US in shoulder	三軍總醫院復健部 張智雅醫師	
18:30-19:00	考試	秘書處	

教育學分：台灣內科醫學會、中華民國風濕病醫學會、中華民國免疫學會申請中

中華民國風濕病醫學會 2016 年會

Plenary Lecture

Taiwan Rheumatology Association Keynote Speech :

Prof. William E.Kraus,M.D.

時間：105 年 10 月 22 日(星期六)09：20-10：00

Time：09：20-10：00 22-Oct-2016

地點：新竹喜來登飯店宴會廳 II

Place：3F Sheraton-Hotels,Hsin-Chu

主辦單位：社團法人中華民國風濕病醫學會

主持人：高雄長庚醫院風濕過敏免疫科鄭添財主任

Moderator：Tien-Tsai Cheng, Kaohsiung Chang Gung Memorial Hospital

The Optimal Exercise for Cardiovascular Prevention in Rheumatic Disease:Dose and Intensity

Prof. William E.Kraus,M.D.

Professor with Tenure, Division of Cardiology, Department of Medicine, Duke University School of Medicine, Durham, North Carolina

The benefits of regular physical activity for prevention and treatment of disease are unequivocal. However, defining the best amount, intensity and mode of exercise for any given condition can be challenging: perhaps, more of an art than a science. This is particularly true for rheumatic diseases, particularly osteoarthritis, where high intensity exercise may be potentially detrimental to diseased joints. It is becoming clear that more moderate intensity exercise—brisk walking—can be beneficial even for cardiometabolic diseases and may be the preferred intensity for health benefits in arthritic conditions. Although there is no evidence that regular exercise causes osteoarthritis in uninjured joints, there are some emerging data to indicate that too much exercise may be detrimental to already arthritic joints. Appropriate strengthening exercises for the muscles adjacent to an affected joint may be particularly beneficial for maintaining joint stability, health and function. Here we will discuss whether regular exercise causes osteoarthritis and the amount, intensity and modes of exercise optimal for health benefits for a range of arthritic conditions.

中華民國風濕病醫學會 2016 年會

Keynote speech

Taiwan Rheumatology Association Keynote Speech :

Virginia Byers Kraus, MD, PhD

時間：105 年 10 月 22 日(星期六)10：30~11：10

Time：10：30~11：10 22-Oct-2016

地點：新竹喜來登飯店宴會廳 II

Place：3F Sheraton-Hotels, Hsin-Chu

主辦單位：社團法人中華民國風濕病醫學會

主持人：三軍總醫院 陳相成主任

Moderator：Hsiang-Cheng Chen, Department of Internal Medicine, Tri-Service General Hospital

Evidence for Endogenous Cartilage Repair

Virginia Byers Kraus, MD, PhD

Professor of Medicine, Duke University School of Medicine

Cartilage has traditionally been considered a tissue with minimal or no reparative capacity over time or after injury. Our human cartilage studies, based on analyses of post-translationally modified proteins, have uncovered a natural repair response of knee but not hip cartilage when it is affected by osteoarthritis (OA) (1-3). Due to this difference in repair responses, human OA knees are on average 30 years biologically ‘younger’ and OA hips 10 years ‘older’ than non-OA joints (2). Increasing evidence of endogenous cartilage repair responses are also emerging from other studies. Consistent with an endogenous repair response in knee but not hip OA cartilage, clinical studies suggest the possibility of faster OA progression of hip compared with knee OA (4). In clinical studies, an increased radiographic joint space width and cartilage thickness are observed after knee joint distraction thereby providing in vivo evidence for endogenous cartilage regeneration (5). Animal studies knocking out Mitogen-inducible gene 6 (MIG-6), an inhibitor of epidermal growth factor receptor (EGFR) signaling in synovial joint tissues, reveal that EGFR plays an anabolic role in cartilage and is responsible for maintaining joint homeostasis (6). Taken together, these lines of evidence are pointing to a process of constitutive endogenous cartilage repair that likely varies by joint site. Much more work needs to be done to understand the mechanisms regulating endogenous repair responses to harness them as treatment approaches for OA and other arthritides.

References:

1. Catterall JB, Hsueh MF, Stabler TV, McCudden CR, Bolognesi M, Zura R, Jordan JM, Renner JB, Feng S, Kraus VB. Protein modification by deamidation indicates variations in joint extracellular matrix turnover. *J Biol Chem* 2012;287(7):4640-51.
2. Catterall JB, Zura RD, Bolognesi MP, Kraus VB. Aspartic acid racemization reveals a high turnover state in knee compared with hip osteoarthritic cartilage. *Osteoarthritis Cartilage* 2016;24(2):374-81.
3. Hsueh MF, Khabut A, Kjellstrom S, Onnerfjord P, Kraus VB. Elucidating the Molecular Composition of Cartilage by Proteomics. *J Proteome Res* 2016;15(2):374-88.
4. Manno RL, Bingham CO, 3rd, Paternotte S, Gossec L, Halhol H, Giacobelli G, Rovati L, Mazzuca SA, Clegg DO, Shi H, Tajana Messi E, Lanzarotti A, Dougados M. OARSI-OMERACT initiative: defining thresholds for symptomatic severity and structural changes in disease modifying osteoarthritis drug (DMOAD) clinical trials. *Osteoarthritis Cartilage* 2012;20(2):93-101.
5. Wiegant K, van Roermund PM, Intema F, Cotozana S, Eckstein F, Mastbergen SC, Lafeber FP. Sustained clinical and structural benefit after joint distraction in the treatment of severe knee osteoarthritis. *Osteoarthritis Cartilage* 2013;21(11):1660-7.
6. Pest MA, Russell BA, Zhang YW, Jeong JW, Beier F. Disturbed cartilage and joint homeostasis resulting from a loss of mitogen-inducible gene 6 in a mouse model of joint dysfunction. *Arthritis Rheumatol* 2014;66(10):2816-27.

中華民國風濕病醫學會 2016 年會

Scientific Lecture

Taiwan Rheumatology Association Keynote Speech :

顏正賢教授

時間：105 年 10 月 22 日(星期六)13：40~14：20

Time：13：40~14：20 22-Oct-2016

地點：新竹喜來登飯店宴會廳 II

Place：3F Sheraton-Hotels,Hsin-Chu

主辦單位：社團法人中華民國風濕病醫學會

主持人：中國醫藥大學附設醫院 蔡嘉哲 教授

Moderator：Prof. Gregory J Tsay, China Medical University Hospital

我的醫學研究生涯 ~談 Etiopathogenesis of Rheumatoid Arthritis

顏正賢教授

高雄醫學大學附設中和紀念醫院過敏免疫風濕科

我的研究生涯是從跟隨劉宏文教授開始。最初的研究題目是以 SLE 為主，但因難以忍受病人對於類固醇服藥遵從性的不佳，逐漸改變研究重心，轉成以類風濕性關節炎為主，其它風濕病為輔。

自體免疫疾病的致病機轉雖不完全清楚，但可能和基因、環境因子有關。自體免疫疾病之組織傷害有些和免疫複合體(IC) 的沉積有關。而 IC 之清除則和補體受體(CR)有關，類風濕性關節炎病人之紅血球具缺少補體受體。NRAMP1 (SLAIIA1) 和 Killing intracellular pathogen 有關，亦屬先天免疫系統之一部份。NRAMP1 823C/ 1703G/ 1729+55 del 4 TGTG+ haplotype 和類風濕性關節炎的 susceptibility 有關。

在後天免疫系統中，HLA 和 TCR 間的交互作用是最基本的。DRB1*0405 和 RA susceptibility 有關，而 DRB1*0403 則具保護作用。HLA-DQA1*0302 和 DQA1*0303 和 susceptibility 有關，0301 則具保護作用。HLA-DP、HLA-DMA 和-DMB 則和 RA 之致病無關，而類風濕性關節炎滑膜液中之 TCR-V β gene 具 restricted heterogeneity 現象，HLA-DR4(B1*0405)和 TCR-VB7-VB8 間之交互作用可能和 RA 致病有關。PD-L1 和 PD-L2 polymorphisms 和 RA susceptibility 無關，但具 PD-L1 6777G 者則類風濕性關節結出現機會較多。KIR 和先天以及後天免疫系統均有關，KIR2DS4 和 corresponding ligand HLA-CW4

同時存在時，可能和 RA 的致病有關。

在發炎過程中，NF κ B, I κ B, I κ BL 扮演重要的角色，I κ B α -826T -550A -519C haplotype 和類風濕性關節炎之 susceptibility 有關，而且 Luciferase reporter assay 亦可證實不同的 haplotype 會影響其表現。I κ BL-421 8T -62T haplotype 可能和 RA 之 susceptibility 有關。NF κ B pathway 會調節 TNF α 產生，TNF α promoter polymorphism 和 TNF α microsatellite 會影響 TNF α 表現。TNF α 和其標定的 TNFR2 間的交互作用，和發炎反應有關。TNFR2 polymorphism 或 TNFR2 microsatellite 亦可能影響此反應。SOCS1 在細胞激素訊號傳遞扮演負回饋的角色，類風濕性關節炎病人之 PBMC 中，SOCS1 RNA 表現增加。經不同細胞激素刺激後，其 increment 比正常人者低。環境因素可能和類風濕性關節炎的致病有關。抽菸會增加類風濕性關節炎的風險和嚴重度。抽煙會產生肺動脈高壓，且 CYP1A1 可催化肺動脈高壓使其變成活性產物，而造成 DNA 傷害。MnSOD 屬抗氧化酵素，可以減少抽菸誘發的細胞毒性，所以 CYP1A1 和 MnSOD gene polymorphism 可能和類風濕性關節炎致病有關。另外病毒度感染可能亦扮演某些角色，如 Parvovirus infection。類風濕性關節炎病人感染過 Parvovirus B19 之盛行率比一般人高，且類風濕性關節炎滑膜液中 Parvovirus B19 DNA 的陽性率也比一般人高。

中華民國風濕病醫學會 2016 年會

Scientific Lecture

Taiwan Rheumatology Association Keynote Speech :

Prof. Shoze Izui,MD,PhD

時間：105 年 10 月 22 日(星期六)15：40~16：20

Time：15：40~16：20 22-Oct-2016

地點：新竹喜來登飯店宴會廳 II

Place：3F Sheraton-Hotels,Hsin-Chu

主辦單位：社團法人中華民國風濕病醫學會

主持人：秀傳醫療財團法人彰濱秀傳紀念醫院 鄭賀雄 副院長

Moderator：Prof. He Hsiung Cheng Chang Bing Show Chwan Memorial Hospital

Autoantibody Pathogenicity: Lessons from Monoclonal Autoantibodies

Prof. Shoze Izui,MD,PhD

Department of Pathology and Immunology, Faculty of Medicine, University of Geneva

The pathogenesis of autoantibody-mediated cellular and tissue lesions is attributable to the combined action of autoantigen-binding properties (specificity and affinity) and effector functions associated with the Fc regions, *i.e.*, the capacity to activate complement and to interact with immune effector cells expressing Fc receptors for IgG (Fc γ R). The analysis of IgG subclass-switch variants of a murine anti-erythrocyte monoclonal autoantibody revealed striking differences in the Fc-dependent effector functions among four different IgG subclasses and hence their pathogenic potentials (IgG2a>IgG2b>IgG3>IgG1). IgG bears asparagine-linked oligosaccharide side-chains in the Fc region, and the proportion of galactose-deficient IgG is elevated in patients with a variety of chronic inflammatory diseases, most notably rheumatoid arthritis. Notably, the extent of galactosylation modulates the capacity of IgG to interact with Fc γ R, but its effect is dependent on the IgG subclass. In addition, because of the unique property of the IgG3 subclass to form Fc-mediated self-associating complexes and generate cryoglobulins, this subclass of autoantibodies such as rheumatoid

factor (RF) and anti-DNA is capable of inducing different types of glomerular and vascular complications, depending on the level and kinetics of its production. Moreover, the analysis of glycovariants of an IgG3 RF monoclonal autoantibody revealed a critical role of terminal sialylation for its pathogenic potential by limiting its cryoglobulin activity. Since the switch to IgG2a and IgG3 is promoted by Th1 cytokine IFN γ , Th1 autoimmune responses are critically involved in the generation of more pathogenic IgG antibodies. Moreover, the extent of IgG galactosylation and sialylation is an additional significant factor determining the pathogenic potential of autoantibodies.

中華民國風濕病醫學會 2016 年會

風濕病友教育講座

時間：105 年 10 月 22 日(星期六) 14:00 ~ 16:30

Time：14:00 ~ 16:30 22-Oct-2016

地點：新竹喜來登大飯店 3 樓梅花廳+桐花廳

時間	講題	主講人	主持人
14:00-14:10	Opening		臺北榮民總醫院 林孝義醫師
14:10-14:50	僵直性脊椎炎的概況	臺北榮民總醫院 劉德鈴醫師	花蓮慈濟醫院 蔡世滋主任
14:50-15:00	Break		
15:00-15:40	全身性紅斑狼瘡的治療與展望	台大醫院 吳政翰醫師	大林慈濟醫院 賴寧生院長
15:40-15:50	Break		
15:50-16:30	類風濕關節炎之預防保健	三軍總醫院 劉峰誠醫師	三軍總醫院 陳相成主任

中華民國風濕病醫學會 2016 年會

Scientific Lecture

Taiwan Rheumatology Association Keynote Speech :

李玉雲教授

時間：105 年 10 月 23 日(星期日)09：10~09：50

Time：09：10~09：50 23-Oct-2016

地點：新竹喜來登飯店宴會廳 II

Place：3F Sheraton-Hotels,Hsin-Chu

主辦單位：社團法人中華民國風濕病醫學會

主持人：成大醫院 劉明輝教授

Moderator：Prof. Ming Fei Liu, Medical College, National Cheng Kung University

Clinical and pathological spectrum of evanescent and persistent eruptionsof adult-onset Still disease

J. Yu-Yun Lee, MD,

Department of Dermatology, National Cheng-Kung University, Tainan, Taiwan

Persistent pruritic papules, plaques and linear pigmentation have been reported as atypical but specific skin lesions of adult-onset Still disease (AOSD) and a potential sign of severe disease. Most reports described single cases and mainly affecting Asians. Persistent pruritic eruptions (PPEs) appear more common in our patients with AOSD. We have previously documented such eruptions in up to 78% of 36 patients with AOSD. Despite these reports, non-evanescent, pruritic eruptions are rarely described in studies of larger series of AOSD. In this talk, the clinicopathologic features of evanescent and PPEs, evolution of the lesions, clinical course and the differential diagnosis will be given.

PPEs of AOSD are polymorphic, commonly manifesting pruritic urticarial or lichenoid papules, followed by bizarre linear and dermatographism-like lesions (a manifestation of Kobner phenomenon), dermatomyositis-like and prurigo pigmentosa-like eruptions. Some patients manifest multiple types of eruption. In our series of 36 cases, the clinical activity score for patients with and without DM-like PPE was 6.57 vs 5.57 ($p<0.03$). DM-like PPE had poor outcome with 3 of the 7 patients being fatal.

The key pathologic findings are necrotic keratinocytes (singly or clustered)

mostly in the upper half of the epidermis (including the horny layer) with minimal or no interface change, and a perivascular neutrophilic and lymphocytic infiltrate in the dermis. PPEs may be easily misinterpreted clinically as drug eruption, viral exanthem, dermatographism, scratch marks, dermatomyositis, prurigo pigmentosa, eczema, lichen simplex chronicus, etc. Skin biopsy is essential for diagnosis of AOSD-associated PPEs. Except for very mild or early lesions, the pathologic features of PPE are distinctive, either diagnostic or highly suggestive, in the right clinical settings.

Correct diagnosis of PPE can facilitate early exclusion of other diseases during diagnostic workup. However, the diagnosis requires familiarization with the clinical and pathologic characteristic of PPEs, high index of suspicion, and confirmation by skin biopsy.

PPEs may be a useful diagnostic criterion, at least in some Asian populations. More studies are needed to determine the prevalence of PPEs in other patient populations and to correlate the severity and pattern of PPEs with the clinical activity score and other severity parameters.

中華民國風濕病醫學會 2016 年會

Plenary Lecture

Taiwan Rheumatology Association Keynote Speech :

徐建華教授

時間：105 年 10 月 23 日(星期日)10：30~11：10

Time：10：30~11：10 23-Oct-2016

地點：新竹喜來登飯店宴會廳 II

Place：3F Sheraton-Hotels,Hsin-Chu

主辦單位：社團法人中華民國風濕病醫學會

主持人：臺北榮民總醫院 周昌德 教授

Moderator：Prof. Chung-Tei Chou, Taipei Veterans General Hospital

骨關節炎影像學改變及藥物治療進展

徐建華教授

安徽醫科大學第一附屬醫院風濕免疫科主任/中國醫師協會風濕免疫科醫師分會常委

骨關節炎 (osteoarthritis, OA) 是一種臨床常見關節疾病，是導致中老年人關節疼痛和行動障礙的主要原因。隨著全球老齡化進程，其患病率及發病率逐年增高。OA 以關節軟骨損失為主要特徵，並影響整個關節組織，其發生的危險因素包括性別、年齡、肥胖、遺傳、外傷、關節過度承重等，但具體的發病機制尚不明確。

OA 的診斷主要依據 X 線，並分為 X 線：症狀性 OA (臨床症狀+X 線) 和放射學 OA (只有 X 線表現)，一旦出現 X 線表現，結構破壞已不可逆，即為中晚期病變。

2014 年值得關注的研究是重新評估如何定義早期 OA，國際 OA 組織修改目前膝 OA 定義 (X 線分級必須為 Kellgren ≥ 2)，為應包括 Kellgren 0-1 級 (沒有 OA 放射學證據) 的患者，這些人群膝關節的病理結構可通過核磁共振 (MRI) 檢測到軟骨缺失等，稱為早期 OA (放射學期前)：MRI 顯示，軟骨缺失損傷等，認為是 OA 的早期證據。

膝骨關節炎患者 MRI 改變和評分-WORMS 評分：包括軟骨容積損失 (Cartilage volume loss)、軟骨缺損 (Cartilage defects, CD)、骨髓病變 (Bone marrow lesion, BML)、滲液 (Effusion)，並根據程度分 0-3 級。其他改變：如髌骨下脂肪墊、半月板、滑膜炎、肌腱炎等。

2014 年國際骨關節炎研究協會 (OARSI) 膝 OA 非手術治療指南，核心內容是：地面、水中鍛煉、控制體重、力量訓練和自我管理和教育；藥物治療主要是非

甾體抗炎藥（NSAIDs）。因而目前 OA 治療藥物有限，除緩解疼痛以外尚無選擇。

隨著研究深入和影像學在 OA 中的應用，發現其多種關節結構改變，包括關節軟骨降解、低水準滑膜炎、滑膜炎、軟骨下骨骨髓損害等，加深了對 OA 的認識，並根據不同階段（早期、早中期、中期、晚期），不同部位（承重關節或非承重關節），不同結構（軟骨、骨、半月板、滑膜等，單發或共同受累），不同危險因素（機械因素、損傷、肥胖、代謝、炎症等）等方面，將 OA 分為多種亞型，為精準個體化治療提供依據，以延緩或逆轉 OA 進程。但多數藥物仍在臨床試驗階段，療效尚待確定。

中華民國風濕病醫學會 2016 年會

風濕病個案管理師訓練班

時間：105 年 10 月 23 日上午 8:50-12:20

地點：新竹喜來登大飯店 3 樓梅花+桐花+百合廳

主辦單位：社團法人中華民國風濕病醫學會

課程目標：希望透過本訓練班 4 小時的課程，增加個案管理師對使用生物製劑之風濕病患者病情評估及風險管理計畫執行的能力，且能爭取國家機構對於免疫風濕科個案管理師之認證。

訓練對象：各院免疫風濕科負責使用生物製劑風濕病患之個案管理之護理師或個案管理師。完成 4 小時課程者學會將發給學分證書。

名額限制：220 人

報名費：每人 1000 元

時 間	講 題	演 講 者	主持人
08:40~09:00	報 到	風濕病醫學會秘書處	
08:55~09:00	Opening	風濕病醫學會理事長陳得源教授	
09:00~09:40	免疫風濕疾病生物製劑療法 與達標治療	高醫大附設醫院 免疫風濕科 蔡文展主任	風濕病醫學會 理事長 陳得源教授
09:40~10:10	生物製劑風險管理計畫(RMP)- 個案管理師的角色與功能	台中榮民總醫院 過敏免疫風濕科 周秀琤組長/資深個管師	
10:10~10:30	免疫風濕疾病使用生物製劑之 結核病防治策略	台中榮民總醫院 過敏免疫風濕科 陳一銘醫師	台中榮民總醫 院 過敏免疫風濕 科 陳怡行主任
10:30~11:20	生物製劑風險管理計畫(RMP)- 速克伏(3HP)短期療程 LTBI 治 療都治計畫	疾病管制署(CDC) 結核病防治中心 詹珮君副主任	
11:20~11:50	生物製劑風險管理計畫(RMP)- 病毒性肝炎感染篩檢及防治策 略	彰化基督教醫院 過敏免疫風濕科 邱瑩明主任	
11:50~12:15	綜合討論	全體人員	
12:15~12:20	Closing	風濕病醫學會理事長陳得源教授	

學分申請：專科護理師學分、護理師學分

中華民國風濕病醫學會 2016 年會

Special Lecture

Taiwan Rheumatology Association Keynote Speech :

藍忠亮 副院長

時間：105 年 10 月 23 日(星期日)09：10~09：50

Time：09：10~09：50 23-Oct-2016

地點：新竹喜來登飯店宴會廳 II

Place：3F Sheraton-Hotels,Hsin-Chu

主辦單位：社團法人中華民國風濕病醫學會

主持人：高雄醫學大學附設中和紀念醫院 劉宏文 教授

Moderator：Prof. Hong-Wen Liu, Kaohsiung Medical University Hospital

Connective Tissue Disease Associated with Interstitial Lung Disease: Clinical Features, Biomarkers, HRCT lung score and Treatment outcome

藍忠亮教授

中國醫藥大學附設醫院醫療副院長/風濕免疫科主治醫師

中國醫藥大學 醫學系教授

Involvement of the respiratory system is common in connective tissue diseases (CTDs), and the lung injury can affect every part of the lung: the pleura, alveoli, interstitium, vasculature, lymphatic tissue, and large and/or small airways. Most of the parenchymal manifestations of CTD are similar to those found in idiopathic interstitial lung diseases (ILDs). Moreover, the lung disease associated with CTD may precede the clinical presentation of CTD, sometimes by more than 5 years.

Carefully look for the skin signs may help a lot to the differential diagnosis of various CTD, such as Gottron signs, Gottron signs with ulceration, shawl signs, Holster signs, sclerodactyly, scleroderma, mechanic hand, callous feet, cuticle hypertrophy, periungal erythema, periungal telangiectasia, polygonal tenlangiectasis, digital pitting scar,---etc.

Immunologic markers such as t RNA synthetase antibody (Jo 1 and non Jo 1), Scl-70 and MDA5 antibody are characteristic disease marker . We found non -Jo 1 anti-synthetase antibodies and MDA5 antibody related interstitial lung disease are

not uncommon in Taiwanese. We will also show immune-precipitation method is the golden standard for detection of various anti-synthetase antibody.

CT is widely used for patients with CTD, and is currently considered to be the best clinically applicable modality for assessment of chest diseases in patients with CTD (RA, Scleroderma, PM/DM, SLE, Sjogren Syndrome, MCTD). A careful evaluation of the chest radiograph and chest HRCT of patients with parenchymal abnormalities can yield some useful clues to the presence of CTD. Characteristic patterns of pulmonary involvement are found in CTDs. For this reason, High Resolution CT (HRCT) as well as pulmonary function tests and serum markers are utilized for diagnosis, disease severity assessment, and therapeutic efficacy. The HRCT finding of UIP, NSIP, organizing pneumonia, pulmonary hypertension, bronchiectasis, obliterative bronchiectasis, bronchioectasis, tree in bud, air-trapping, lymphoid interstitial pneumonia, esophageal dilation, pericardial effusion, pleural effusion can help for the differential diagnosis in various CTDs and correlate with its prognosis. In collaboration with our radiologist and image analysis specialist, we have developed an algorithm of HRCT quantitative program for lung score, it may help the assessment of the severity of lung involvement and fibrosis of interstitial lung disease and to evaluate of the efficacy of drug treatment.

In addition to HRCT, pulmonary function tests, the serum markers of KL-6, surfactant protein A and D (SP-A and SP-D), and the monocyte chemoattractant protein-1 (MCP-1) are utilized for diagnosis, disease severity assessment, and therapeutic effect evaluation of ILD associated with CTD. For the biomarker of fibrosis KL6 proved to be highly correlated with the severity of lung fibrosis. Krebs von den Lungen-6 (KL-6) is a mucinous high- molecular weight glycoprotein that is expressed on type 2 pneumocytes and bronchiolar epithelial cells. It has been reported to be elevated in the serum and bronchoalveolar lavage fluid of patients with interstitial pneumonia. It was also found that serum levels of KL-6 of patients with interstitial pneumonia associated DM were significantly high compared with those of DM without interstitial pneumonia and healthy controls. KL-6 levels predict the prognosis of patients with interstitial pneumonia in cases of DM. Patients with poor prognosis showed increases in KL-6 during the first 4 weeks after treatment.

中華民國風濕病醫學會 2016 年會

Free Paper Presentation

時間：105 年 10 月 22 日(星期六) 11:20-12:00

地點：新竹喜來登飯店宴會廳 II

主辦單位：社團法人中華民國風濕病醫學會

11:20-12:00	類型	座長：顏正賢、魏正宗
11:20-11:26	Clinical A : RA	<p>Risk Factors and Outcomes of Nontuberculous Mycobacterial Disease among Rheumatoid Arthritis Patients: A Case-Control study in a TB Endemic Area Tsai-Ling Liao^{1,2}, Chin-Fu Lin³, Yi-Ming Chen^{1,2,4}, Hung-Jen Liu² and Der-Yuan Chen^{2,4,5*}</p> <p>¹Department of Medical Research, Taichung Veterans General Hospital, Taiwan ²Rong Hsing Research Center for Translational Medicine, National Chung Hsing University, Taiwan ³Department of Pathology and Laboratory Medicine, Taichung Veterans General Hospital, Taiwan ⁴Division of Allergy, Immunology and Rheumatology, Taichung Veterans General Hospital and Faculty of Medicine, National Yang Ming University, Taiwan ⁵Department of Medical Education, Taichung Veterans General Hospital, Taiwan</p> <p>類風濕關節炎患者發生非結核性分枝桿菌感染之危險因子與預後：結核病流行地區之病例對照研究 廖采苓^{1,2} 林進福³ 陳一銘^{1,2,3} 劉鴻俊² 陳得源^{2,4,5} 台中榮民總醫院 醫學研究部¹ 中興大學 轉譯醫學博士學程² 台中榮民總醫院 病理醫檢部³ 過敏免疫風濕科⁴ 陽明大學醫學系⁴ 教學部⁵</p>

11:26-11:32	Clinical A : RA	<p>Hydroxychloroquine, Methotrexate, and Sulfasalazine Might Had Time-dependent Benefit on Risk of Ischemic Stroke in RA Patients. A Nation-wide, Population-based Retrospective Cohort study</p> <p><u>Li-Chih Wu</u>³, PY Leong¹, KJ Yeo¹, Ting-Yu Li³, Yu-Hsun Wang², Jeng-Yuan Chiou⁴, Lichi Lin⁵, James Cheng-Chung Wei^{1,3}</p> <p>¹Division of Allergy, Immunology and Rheumatology, Chung Shan Medical University Hospital</p> <p>²Department of Medical Research, Chung Shan Medical University Hospital</p> <p>³School of Medicine, Chung Shan Medical University</p> <p>⁴School of Health Policy and Management, Chung Shan Medical University</p> <p>⁵Department of Statistics, Oklahoma State University</p> <p>Hydroxychloroquine、Methotrexate 和 Sulfasalazine 對於類風濕性關節炎患者的缺血性中風風險可能具有時間依賴性的助益：一項全國性的回溯性世代研究</p> <p><u>吳立智</u>³，梁培英¹，楊凱介¹，李庭瑀³，王煜勛²，邱政元⁴，林莉琪⁵，魏正宗^{1,3}</p> <p>¹中山醫學大學附設醫院過敏免疫風濕科</p> <p>²中山醫學大學附設醫院醫學研究部</p> <p>³中山醫學大學醫學院</p> <p>⁴中山醫學大學健康管理學院</p> <p>⁵美國奧克拉荷馬州立大學統計系</p>
11:32-11:38	Clinical A : RA	<p>Why Rheumatoid Arthritis (RA) Patients do not Come Back to See the Doctors ?</p> <p>One and half-year Adherence Study in A Medical Center</p> <p><u>Cheng Tien-Tsai</u>^{1,2}, Yin-Chou Chen^{1,2}, Han-Ming Lai^{1,2}, Shan-Fu Yu^{1,2}, Jia-Feng Chen¹, Wen-Chan Chiu^{1,2}, Fu-Mei Su^{1,2}, Ben Yu-Jih Su^{1,2}, Chung-Yuan Hsu^{1,2}, Chi-Hua Ko¹</p> <p>¹Division of Rheumatology, Allergy and Immunology, Kaohsiung Chang Gung Memorial Hospital,</p> <p>²Chang-Gung University College of Medicine, Kaohsiung, Taiwan</p>
11:38-11:44	Clinical A : RA	<p>Chemical Mechanisms of HDL Dysfunctional in Patients with Rheumatoid Arthritis</p> <p><u>Hua-Chen Chan, PhD</u>^{1,2,3}, Liang-Yin Ke, PhD⁴, Wen-Chan Tsai, MD, PhD⁵, Tsan-Teng Ou, MD, PhD⁵, Cheng-Chin Wu, MD, PhD⁵, Tseng CC, MD⁵, Sung WY, MD⁵, Yen, MD, PhD^{5,6}</p> <p>From ¹ the Center for Lipid Biosciences, KMU Hospital, KMU, Kaohsiung, Taiwan; ² Lipid Science and Aging Research Center, KMU, Kaohsiung, Taiwan; ³ the Center for Lipid Biosciences, KMU Hospital, Kaohsiung, Taiwan; ⁴ the Department of Medical Laboratory Science and Biotechnology, College of Health Sciences, KMU, Kaohsiung, Taiwan; ⁵ Department of Rheumatology, Immunology and Allergology, KMU Hospital, Kaohsiung, Taiwan; ⁶ the College of Medicine, KMU, Kaohsiung, Taiwan</p>

11:44-11:50	Clinical A : RA	Pro-inflammatory cytokines play a part in mood symptoms of rheumatoid arthritis patients Ya-Chi Li ¹ , Hsiang-Cheng Chen ¹ , Deh-Ming Chang ² 黎亞綺 ¹ , 張德明 ² ¹ 三軍總醫院風濕免疫過敏科 Division of Rheumatology/Immunology/Allergy, Department of Internal Medicine, Tri-Service General Hospital, National Defense Medical Center, Taipei, Taiwan, ROC ² 台北榮民總醫院過敏免疫風濕科 Division of Allergy, Immunology, Rheumatology, Taipei Veterans General Hospital, Taipei, Taiwan, ROC
11:50-12:00	綜合討論	

註：

類型分類依研究方法分為 clinical 臨床(個案/資料庫) image 臨床影像(echo/MRI) Basic/translational，再依疾病別分為 A、B 兩類。

A 類：骨骼關節疾病：再分 RA, spondyloarthropathy, 骨鬆 and others。

B 類：自體免疫疾病：再分 SLE, SS/PSS/PM/DM, others。

中華民國風濕病醫學會 2016 年會

Free Paper Presentation

時間：105 年 10 月 22 日(星期六) 11:20-12:00

地點：新竹喜來登飯店梅花+桐花廳

主辦單位：社團法人中華民國風濕病醫學會

11:20-12:00	類型	座長： 蔡長祐、余光輝
11:20-11:26	Clinical B : others	Different IgG4 Cutoff levels for the Diagnosis of IgG4-Related Disease by Two Different Machines and Reagents Kuang-Hui Yu ^{1,3} , Ching-Hui Cheng ² , Pi-Yueh Chang ^{2,3} ¹ Division of Rheumatology, Allergy, and Immunology, and ² Department of Laboratory Medicine, Chang Gung Memorial Hospital and ³ Chang Gung University, Taiwan. 比較兩種不同儀器試劑分析免疫球蛋白 IgG4 濃度診斷 IgG4 相關疾病之差異 余光輝 ^{1,3} 鄭清慧 ² 張璧月 ^{2,3} 林口長庚醫院風濕過敏免疫科、檢驗醫學科、長庚大學
11:26-11:32	Clinical B : others	High density lipoprotein in Relation to Inflammation in Sjorgren's syndrome. Ko-Chi-Hua ¹ , Ying-Chou Chen, Fu-Mei Su ¹ ; Jia-Feng Chen ¹ ; Shan-Fu Yu ^{1,2} ; Tien-Tsai Cheng ^{1,3} , Wen-Chan Chiu ¹ , Chung-Yuan Hsu ¹ , Yu-Jih Su 柯祈化,陳英州,蘇富美,陳嘉峯,尤珊富,鄭添財,邱文燦,許鐘元,蘇昱日 高雄長庚紀念醫院 風濕免疫科 ¹ Division of Rheumatology, Allergy, and Immunology, Department of Internal Medicine, Kaohsiung Chang Gung Memorial Hospital, Taiwan ² Chang Gung University College of Medicine, Kaohsiung, Taiwan
11:32-11:38	Clinical B : others	Increased heterogeneity of Brain Perfusion is an Early Marker of Central Nervous System Involvement in Antiphospholipid Antibody Carriers 腦灌注歧異度增加為抗磷脂質抗體侵犯中樞神經的早期指標 Ting-Syuan Lin ^{1,2} , Pei-Ying Hsu ^{3,4} , Chin-Hao Chang ⁵ , Chi-Lun Ko ^{3,4} , Song-Chou Hsieh ⁶ 林廷軒 ^{1,2} , 許沛瑩 ^{3,4} , 張晉豪 ⁵ , 柯紀綸 ^{3,4} , 謝松洲 ⁶ ¹ Department of Internal Medicine, National Taiwan University Hospital Yun-Lin Branch, Yun-Lin, Taiwan ² Institute of Clinical Medicine, National Taiwan University College of Medicine, Taipei, Taiwan ³ Department of Nuclear Medicine, National Taiwan University Hospital Yun-Lin Branch, Yun-Lin, Taiwan

		⁴ Department of Nuclear Medicine, National Taiwan University Hospital and National Taiwan University College of Medicine, Taipei, Taiwan ⁵ Department of Medical Research, National Taiwan University Hospital, Taipei, Taiwan ⁶ Department of Internal Medicine, National Taiwan University Hospital, Taipei, Taiwan ¹ 國立臺灣大學附設醫院雲林分院內科部 ² 國立臺灣大學醫學院臨床醫學研究所 ³ 國立臺灣大學附設醫院雲林分院核子醫學部 ⁴ 國立臺灣大學附設醫院核子醫學部 ⁵ 國立臺灣大學附設醫院醫學研究部 ⁶ 國立臺灣大學附設醫院內科部
11:38-11:44	Clinical B : Sjogren	Increased cancer incidence in SICA syndrome patient positive for anti-centromere antibody Ko-Chi-Hua ¹ , Ying-Chou Chen, Fu-Mei Su ¹ ; Jia-Feng Chen ¹ ; Shan-Fu Yu ^{1, 2} ; Tien-Tsai Cheng ^{1,3} , Wen-Chan Chiu ¹ , Chung-Yuan Hsu ¹ , Yu-Jih Su 柯祈化,陳英州,蘇富美,陳嘉峯,尤珊富,鄭添財,邱文燦,許鐘元,蘇昱日 高雄長庚紀念醫院 風濕免疫科 ¹ Division of Rheumatology, Allergy, and Immunology, Department of Internal Medicine, Kaohsiung Chang Gung Memorial Hospital, Taiwan ² Chang Gung University College of Medicine, Kaohsiung, Taiwan
11:44-11:50	Clinical B : Sjogren	Increased risk of osteoporotic fractures in patients with primary Sjögren syndrome: a nationwide population-based study in Taiwan. Yen-Po Tsao ¹ , Yu-Sheng Chang ² , Chien-Chih Lai ¹ , Wei Sheng Chen ¹ , Chang-Youh Tsai ¹ 曹彥博 ¹ ,張又升 ² ,賴建志 ¹ ,陳瑋昇 ¹ ,蔡長祐 ¹ ¹ Division of Allergy, Immunology and Rheumatology, Department of Medicine, Taipei Veterans General Hospital, Taiwan. ¹ 臺北榮民總醫院 內科部過敏免疫風濕科 ² Division of Allergy, Immunology and Rheumatology, Department of Medicine, Taipei Medical University, Shuang Ho Hospital ² 衛生福利部雙和醫院 內科部過敏免疫風濕科
11:50-12:00	綜合討論	

註：

類型分類依研究方法分為 clinical 臨床(個案/資料庫) image 臨床影像(echo/MRI)

Basic/translational，再依疾病別分為 A、B 兩類。

A 類：骨骼關節疾病：再分 RA, spondyloarthropathy, 骨鬆 and others。

B 類：自體免疫疾病：再分 SLE, SS/PSS/PM/DM, others。

中華民國風濕病醫學會 2016 年會

Free Paper Presentation

時間：105 年 10 月 22 日(星期六) 14:20-15:40

地點：新竹喜來登飯店宴會廳 II

主辦單位：社團法人中華民國風濕病醫學會

14:20-14:56	類型	座長：鄭添財、賴寧生
14:20-14:26	Basic/translation A : RA	<p>Aberrant expression of long non-coding RNAs in T cells from patients with rheumatoid arthritis <u>Ming-Chi Lu¹</u>, Hui-Chun Yu¹, Ning-Sheng Lai¹ ¹ Division of Allergy, Immunology and Rheumatology, Dalin Tzu Chi Hospital, Buddhist Tzu Chi Medical Foundation, Chiayi, Taiwan; ² Department of Internal Medicine, National Taiwan University Hospital and National Taiwan University College of Medicine, Taipei, Taiwan; 長片段非編碼核糖核酸在類風濕性關節炎的 T 細胞表現異常 呂明錡¹，游惠君¹，賴寧生¹ 佛教慈濟醫療財團法人大林慈濟醫院過敏免疫風濕科¹</p>
14:26-14:32	Basic/translation A : RA	<p>Dissociation of the Inhibitory Apoptosis Stimulating Protein of p53 (iASPP) Binding with Transcription Factor p73 Induces Synovial Fibroblast Apoptosis in the Rheumatoid Joint Chrong-Reen Wang, Shih-Yao Chen, Ai-Li Shiau, Ming-Fei Liu, Chao-Liang Wu Departments of Internal Medicine, National Cheng Kung University Hospital, Departments of Microbiology and Immunology, Biochemistry and Molecular Biology, Institute of Basic Medical Sciences, National Cheng Kung University Medical College 利用臨床檢體及關節炎模型來研究利用分離 iASPP 與轉錄因子 p73 鍵結以誘導類風濕性關節滑膜纖維母細胞的凋亡 王崇任、陳世堯、蕭瓊莉、劉明輝、吳昭良 成功大學附設醫院內科部、成功大學醫學院微免所、生化所、基醫所</p>
14:32-14:38	Basic/translation A : RA	<p>Polymorphism and Protein Expression of MUTYH Gene on the Risk for Rheumatoid ArthritisMUTYH 基因多型性與蛋白質表現在類風濕性關節炎風險之研究 Chung-Ming Huang^{1,3}, Joung-Liang Lan¹, Gregory J Tsay¹, Jonathan Chen¹, Po-Hao Huang¹, Chien-Chung Huang¹, Hong-Wei Jhe¹, Shih-Yin Chen^{2,4},Fuu-Jen Tsai^{2,4} 黃春明^{1,3}，藍忠亮¹，蔡嘉哲¹，陳俊宏¹，黃柏豪¹，黃建中¹，洪偉哲¹，陳世殷^{2,4}，蔡輔仁^{2,4} Division of Immunology and Rheumatology, Department of</p>

		Internal Medicine ¹ , and Genetic Center, Department of Medical Research ² , China Medical University Hospital, Taichung, Taiwan; Graduate Institute of Integrated Medicine ³ , College of Chinese Medicine, China Medical University ⁴ , Taichung, Taiwan 中國醫藥大學附設醫院 內科部免疫風濕科 ¹ 醫研部 ² 中國醫藥大學 中醫學院 ⁴ 中西整合研究所 ³
14:38-14:44	Basic/translation A : RA	Tocilizumab inhibits inflammation through suppression of JAK3-STAT3 pathway in patients with active rheumatoid arthritis <u>Chang-Youh Tsai</u> , Hsien-Tzung Liao, Wei-Sheng Chen, Ya-Hwei Shen, Lien Lee, Chung-Tei Chou, Deh-Ming Chang 蔡長祐、廖顯宗、陳瑋昇、沈雅惠、李濂、周昌德、張德明 Division of Allergy, Immunology, & Rheumatology, Taipei Veterans General Hospital and National Yang-Ming University 台北榮民總醫院暨國立陽明大學
14:44-14:50	Basic/translation A : OA	Using Gene-gene interactions to identify SNPs of type 9 and type11 collagen polymorphisms for knee osteoarthritis <u>Hsiang-Cheng Chen</u> ¹ , Chin Lin ² , Sui-Lung Su ² ¹ Division of Rheumatology/Immunology/Allergy, Department of Internal Medicine, Tri-Service General Hospital, National Defense Medical Center, Taipei, Taiwan, ROC ² School of Public Health, National Defense Medical Center, Taipei, Taiwan, ROC 陳相成 ¹ 林嶽 ² 蘇遂龍 ² 1.三軍總醫院 內科部風濕免疫過敏科 2.國防醫學院公共衛生學系
14:50-14:56	Basic/translation A : OA	COL2A1 gene polymorphisms and susceptibility to Knee OA in the Taiwanese Population <u>Hsiang-Cheng Chen</u> ¹ , Chin Lin ² , Sui-Lung Su ² ¹ Division of Rheumatology/Immunology/Allergy, Department of Internal Medicine, Tri-Service General Hospital, National Defense Medical Center, Taipei, Taiwan, ROC ² School of Public Health, National Defense Medical Center, Taipei, Taiwan, ROC 陳相成 ¹ 林嶽 ² 蘇遂龍 ² 1.三軍總醫院 內科部風濕免疫過敏科 2.國防醫學院公共衛生學系

14:56-15:40	類型	座長：賴振宏、黃春明
14:56-15:02	Basic/translation A : others	<p>MicroRNA-134, crucial role in adult-onset Still's disease: its association with IL-18 levels by targeting IL-18 binding protein</p> <p>Tsai-Ling Liao^{1,2}, Yi-Ming Chen^{1,2,3,§}, Chia-Wei Hsieh^{2,4,§}, Hsin-Hua Chen^{1,2,3,§}, Wei-Ting Hung^{1,3}, Kuo-Tung Tang^{2,4}, Kuo-Lung Lai⁴, Der-Yuan Chen^{1,2,3,4*}</p> <p>¹Department of Medical Education and Research, Taichung Veterans General Hospital, Taichung, Taiwan</p> <p>²Ph.D. Program in Translational Medicine and Rong Hsing Research Center for Translational Medicine, National Chung Hsing University, Taichung, Taiwan</p> <p>³Faculty of Medicine, National Yang Ming University, Taipei, Taiwan</p> <p>⁴Division of Allergy, Immunology and Rheumatology, Taichung Veterans General Hospital, Taichung, Taiwan</p> <p>§These authors contributed equally to this work.</p> <p>微小 RNA-134 在成人型史篤兒氏症之致病角色：藉由抑制介白素-18 結合蛋白而與介白素-18 濃度之相關性</p> <p>廖采苓^{1,2} 陳一銘^{1,2,3} 謝佳偉^{2,4} 陳信華^{1,2,3} 洪維廷^{1,4} 賴國隆⁴ 譚國棟^{2,4} 陳得源^{1,2,3,5}</p> <p>台中榮民總醫院教學研究部¹ 中興大學轉譯醫學博士學程² 陽明大學醫學系³</p> <p>台中榮民總醫院過敏免疫風濕科⁴</p>
15:02-15:08	Clinical B : SLE	<p>Inverse Association of Parkinson Disease With Systemic Lupus Erythematosus: The role of immunosuppressant agents</p> <p>全身性紅斑性狼瘡與巴金森氏症的負相關：免疫調節劑的角色</p> <p>Feng-Cheng Liu^{1,2}, Kuen-Tze Lin³, Hsiang-Cheng Chen¹, Uei-Han Ju¹, Yu-Hsiang Chiu¹, Yu-Hsiu Chen¹, Tsung-Yun Hou¹, Chia-Hung Kao^{4*}</p> <p>劉峰誠 林昆澤 陳相成 朱威翰 裘喻翔 陳玉秀 侯宗昀 高嘉鴻*</p> <p>¹ <u>Rheumatology/Immunology and Allergy, Department of Medicine, Tri-Service General Hospital, National Defense Medical Center, Taipei, Taiwan, R.O.C.</u></p> <p>² Graduate Institute of Medical Science, National Defense Medical Center, Taipei, Taiwan, R.O.C.</p> <p>³ Department of Radiation Oncology, Tri-Service General Hospital, National Defense Medical Center, Taipei, Taiwan, Republic of China</p> <p>⁴ Department of Nuclear Medicine and PET Center, China Medical University Hospital, Taichung, Taiwan</p> <p>¹ <u>國防醫學院三軍總醫院內科部風濕免疫過敏科</u></p>
15:08-15:14	Basic/translation	<p>Identification of a novel inhibitor Cf-02 of NLRP3 Inflammasome and Autophagy signaling in severe lupus nephritis</p>

	B : SLE	<p>mice</p> <p>一項成功合成小分子藥物Cf-02的研發能治療狼瘡腎炎小鼠藉由抑制NLRP3發炎體與自噬作用的訊息傳導</p> <p><u>Feng-Cheng Liu^{1,2}, Shuk-Man Ka³, Chia-Chung Lee^{1,4,5}, Yu-Ling Tasi³, Uei-Han Ju², Hsiang-Cheng Chen^{1,2}, Hsu-Shan Huang^{1,4,5}, Jenn-Haung Lai⁶, Ling-Jun Ho⁷, Ann Chen³</u></p> <p><u>劉峰誠 賈淑敏 李佳駿 蔡佑靈 朱威翰 陳相成 黃旭山 賴振宏 何令君 陳安</u></p> <p>¹ <u>Graduate Institute of Medical Science, National Defense Medical Center, Taipei 114, Taiwan, R.O.C.</u></p> <p>² <u>Rheumatology/Immunology/Allergy, Tri-Service General Hospital, National Defense Medical Center, Taipei 114, Taiwan, R.O.C.</u></p> <p>³ Department of Pathology, Tri-Service General Hospital, Taipei, Taiwan, Republic of China</p> <p>⁴ Graduate Institute of Cancer Biology and Drug Discovery, College of Medical Science and Technology, Taipei Medical University, Taipei 110, Taiwan, R.O.C.</p> <p>⁵ School of Pharmacy, National Defense Medical Center, Taipei 114, Taiwan, R.O.C.</p> <p>⁶ Division of Allergy, Immunology and Rheumatology, Department of Internal Medicine, Chang Gung Memorial Hospital, Chang Gung University, Tao-Yuan 333, Taiwan, R.O.C.</p> <p>⁷ Institute of Cellular and System Medicine, National Health Research Institute, Zhunan 350, Taiwan, R.O.C.</p> <p><u>國防醫學院三軍總醫院內科部風濕免疫過敏科</u></p>
15:14-15:20	<p>Basic/translation</p> <p>B : others</p>	<p>Fetal microchimerism cells modulate maternal immune responses by inducing IL-10⁺ cells in arthritis mice during pregnancy</p> <p>胎兒間葉幹細胞經由誘發第十介白質調節母親免疫反應</p> <p>Cheng-Chi Wu, Fei-Lan Liu, Deh-Ming Chang</p> <p>吳正啟 劉斐蘭 張德明</p> <p>Allergy/Immunology/Rheumatology, Taipei Veterans General Hospital, Taiwan; Rheumatology/Immunology/Allergy, Tri-Service General Hospital, Taipei, Taiwan, R.O.C.</p>
15:20-15:40	綜合討論	

註：

類型分類依研究方法分為 clinical 臨床(個案/資料庫) image 臨床影像(echo/MRI) Basic/translational，再依疾病別分為 A、B 兩類。

A 類：骨骼關節疾病：再分 RA, spondyloarthropathy, 骨鬆 and others。

B 類：自體免疫疾病：再分 SLE, SS/PSS/PM/DM, others。

中華民國風濕病醫學會 2016 年會

Free Paper Presentation

時間：105 年 10 月 23 日(星期日) 09:50-10:20

地點：新竹喜來登飯店宴會廳 II

主辦單位：社團法人中華民國風濕病醫學會

09:50-10:20	類型	座長：張棋楨、謝松洲
09:50-09:56	Image A : RA	Ultrasound of the wrist in low disease rheumatoid arthritis patients: Intercarpal joint is more sensitive than radio-carpal and distal radio-ulnar joint 低疾病活性之類風濕性關節炎病患，其手腕超音波評估位置 Intercarpal joint 優於 radio-carpal and distal radio-ulnar joint Ying-Chou Chen, Jia-Feng Chen 陳英州 陳嘉峯 Department of Rheumatology, Kaohsiung Chang Gung Memorial Hospital, Chang Gung University College of Medicine
09:56-10:02	Image A : SpA	High Prevalence of Subclinical Synovitis in Patients with Psoriasis: an Ultrasound Screen Study 乾癬病人有盛行率的亞臨床性滑膜炎：超音波篩檢研究 <u>Kuo-Lung Lai¹</u> , Chih-Wei Tseng ¹ , Hsin-Hua Chen ¹ , Pei-Lin Chao ¹ , Chung-Yang Yen ² , Chien-Shan Chiu ² , Chao-Kuei Juan ² <u>賴國隆¹</u> , 曾智偉 ¹ , 陳信華 ¹ , 趙珮琳 ¹ , 閻忠揚 ² , 邱乾善 ² , 阮昭奎 ² 1.Division of Allergy, Immunology and Rheumatology, Department of Internal Medicine, Taichung Veterans General Hospital, Taiwan 2.Department of Dermatology, Taichung Veterans General Hospital, Taiwan 1. 台中榮民總醫院內科部過敏免疫風濕科 2. 台中榮民總醫院皮膚部
10:02-10:08	Image A : others	Generalized estimating equation model for comparison drug effects on synovitis in rheumatoid arthritis between abatacept versus adalimumab versus tocilizumab using high resolution ultrasound 以GEE統計方法比較恩瑞舒，復邁及安挺樂在超音波上之療效 Ying-Chou Chen 陳英州 Department of Rheumatology, Kaohsiung Chang Gung Memorial Hospital, Chang Gung University College of Medicine, Kaohsiung 833, Taiwan
10:08-10:14	Image A : Osteoporosis	Higher signal intensity in magnetic resonance imaging had lower risk of life-threatening infection in osteoporotic vertebral fracture 核磁共振造影可預測骨質疏鬆脊椎骨折生命危險感染之危險

		因素 Ying-Chou Chen ¹ 陳英州 ¹ 林偉哲 ² Department of Rheumatology and ² Department of Radiology, Kaohsiung Chang Gung Memorial Hospital, Chang Gung University College of Medicine, Kaohsiung 833, Taiwan
10:14-10:20	綜合討論	

註：

類型分類依研究方法分為 clinical 臨床(個案/資料庫) image 臨床影像(echo/MRI)
 Basic/translational，再依疾病別分為 A、B 兩類。

A 類：骨骼關節疾病：再分 RA, spondyloarthropathy, 骨鬆 and others。

B 類：自體免疫疾病：再分 SLE, SS/PSS/PM/DM, others。

中華民國風濕病醫學會 2016 年會

Free Paper Presentation

時間：105 年 10 月 23 日(星期日) 11:10-12:00

地點：新竹喜來登飯店宴會廳 II

主辦單位：社團法人中華民國風濕病醫學會

11:10-12:00	類型	座長：曾瑞成、陳俊宏
11:10-11:16	Clinical A : RA	<p>Methotrexate is not associated with increased liver cirrhosis in a population-based cohort of rheumatoid arthritis patients with chronic hepatitis C. 類風溼性關節炎患者合併 C 型肝炎使用 methotrexate 產生肝硬化的全國性追蹤研究 <u>Kuo-Tung Tang</u>^{1,2}, Yi-Hsing Chen^{1,3}, Ching-Heng Lin⁴, Der-Yuan Chen^{1,3, 5,6} 譚國棟^{1,2}, 陳怡行², 林敬恆⁴, 陳得源^{1,3,5,6}</p> <ol style="list-style-type: none"> 1. Division of Allergy, Immunology and Rheumatology, Taichung Veterans General Hospital, Taichung, R.O.C. 台中榮民總醫院過敏免疫風濕科 2. Ph.D. Program in Translational Medicine, National Chung Hsing University, Taichung, R.O.C. 國立中興大學轉譯醫學博士學位學程 3. Faculty of Medicine, School of Medicine, National Yang-Ming University, Taipei, R.O.C. 國立陽明大學醫學系 4. Department of Medical Research, Taichung Veterans General Hospital, Taichung, R.O.C. 台中榮民總醫院醫學研究部 5. Institute of Microbiology and Immunology, Chung Shan Medical University, Taichung, R.O.C. 中山醫學大學微生物免疫研究所 6. Institute of Biomedical Science, National Chung Hsing University, Taichung, R.O.C. 國立中興大學生物醫學研究所
11:16-11:22	Clinical A : RA	<p>Ultrasonography facilitates treat-to-target in rheumatoid arthritis 超音波促進類風濕關節炎治療達標 <u>Chien-Chih Lai</u>, Ming-Hsueh Tsai, Wei-Sheng Chen, Chang-Youh Tsai Division of Allergy, Immunology, and Rheumatology, Department of Medicine, Taipei Veterans General Hospital, Taiwan 賴建志, 蔡明學, 陳瑋昇, 蔡長祐 臺北榮民總醫院 內科部過敏免疫風濕科</p>
11:22-11:28	Clinical A :	Sulfasalazine Might Reduce Risk of Cardiovascular Diseases in Patients with

	SpA	Ankylosing Spondylitis: A Nationwide Population-Based Retrospective Cohort Study. 魏正宗, James Cheng-Chung Wei 中山醫學大學附設醫院風濕免疫科 Division of Allergy, Immunology and Rheumatology, Chung Shan Medical University Hospital, Taiwan
11:28-11:34	Clinical A : SpA	Uveitis in Psoriasis: A Nationwide Population-Based Study in Taiwan 乾癬病患虹彩炎的風險 Chang-Fu Kuo ¹ ; Meng-Jiun Chiou ¹ ¹ Division of Rheumatology, Allergy and Immunology, Chang Gung Memorial Hospital, Taoyuan, Taiwan 林口長庚醫院風濕過敏免疫科
11:34-11:40	Clinical A : OA	Clinical Experience of Treating Knee Osteoarthritis with Cross-link Hyaluronic Acid 交聯型玻尿酸於膝退化性關節炎的治療經驗 <u>Kuo-Lung Lai, Yi-Ming Chen, Hsin-Hua Chen, Wen-Nan Huang, Yi-Hsin Chen, Der-Yuan Chen</u> 賴國隆、陳一銘、陳信華、黃文男、陳怡行、陳得源 Division of Allergy, Immunology and Rheumatology, Department of Internal Medicine, Taichung Veterans General Hospital, Taiwan 台中榮民總醫院內科部過敏免疫風濕科
11:40-11:46	Clinical A : others	Comparison of Effect of Corticosteroid and Lidocaine Injection in Treatment of Tennis Elbow 皮質類固醇與局部止痛劑注射對於網球肘療效之比較 謝霖芬 ^{1,2} <u>Lin-Fen Hsieh</u> ^{1,2} 1. Department of Physical Medicine and Rehabilitation, Shin Kong Wu Ho-Su Memorial Hospital. 新光吳火獅紀念醫院復健科 2. School of Medicine, Fu Jen Catholic University. 輔仁大學醫學系
11:46-12:00	綜合討論	

註：

類型分類依研究方法分為 clinical 臨床(個案/資料庫) image 臨床影像(echo/MRI) Basic/translational，再依疾病別分為 A、B 兩類。

A 類：骨骼關節疾病：再分 RA, spondyloarthritis, 骨鬆 and others。

B 類：自體免疫疾病：再分 SLE, SS/PSS/PM/DM, others。

中華民國風濕病醫學會 2016 年會

Free Paper Presentation

時間：105 年 10 月 23 日(星期日) 14:10-14:50

地點：新竹喜來登飯店梅花+桐花廳

主辦單位：社團法人中華民國風濕病醫學會

14:10-14:50	類型	座長： 陳怡行、邱瑩明
14:10-14:16	Clinical B : SLE	<p>Incidence and Antiviral Response of Hepatitis C Virus Reactivation in Systemic Lupus Erythematosus Patients Receiving Immunosuppressive Therapy</p> <p>探討紅斑性狼瘡病患的 C 型肝炎發生率及治療反應</p> <p>Ming-Han Chen^{1,3}, Yi-Hsiang Huang^{2,3}, De-Feng Huang^{1,3}, Chang-Youh Tsai^{1,3}, Deh-Ming Chang¹</p> <p>陳明翰^{1,3}, 黃怡翔^{2,3}, 黃德豐^{1,3}, 蔡長祐^{1,3}, 張德明^{1,3}</p> <p>¹ Division of Allergy, Immunology and Rheumatology, and ² Division of Gastroenterology, Department of Medicine, Taipei Veterans General Hospital & ³ Faculty of Medicine, National Yang-Ming University, Taipei, Taiwan</p> <p>¹ 台北榮民總醫院過敏免疫風濕科及 ² 肝膽腸胃科, ³ 國立陽明大學醫學系</p>
14:16-14:22	Basic/translat ion B : SLE	<p>Trogocytosis Between Polymorphonuclear Neutrophils and Mononuclear cells is Defective in Patient with Active Systemic Lupus Erythematosus</p> <p>Ko-Jen Li, Cheng-Han Wu, Chieh-Yu Shen, Yu-Min Kuo, Chia-Li Yu, Song-Chou Hsieh</p> <p>李克仁, 吳政翰, 沈玠妤, 郭佑民, 余家利, 謝松洲</p> <p>Department of Internal Medicine, National Taiwan University Hospital, Taiwan</p> <p>台灣大學附設醫院 內科</p>
14:22-14:28	Clinical B : Scleroderma	<p>Increased Incidence of Rheumatoid Arthritis in Multiple Sclerosis: A Nationwide Cohort Study</p> <p>Chia-Chun Tseng¹, Wen-Chan Tsai², Jeng-Hsien Yen^{2,3,4}, Tsan-Teng Ou², Cheng-Chin Wu², Wan-Yu Sung^{2,4}, Ming-Chia Hsieh^{5,6}, Shun-Jen Chang⁷, Hong-Wen Liu²</p> <p>曾家駿, 蔡文展, 顏正賢, 歐燦騰, 吳正欽, 宋婉瑜, 謝明家, 章順仁, 劉宏文</p> <p>¹ Department of Internal Medicine, Kaohsiung Municipal Ta-tung Hospital, Kaohsiung, Taiwan</p> <p>高雄市立大同醫院內科部</p> <p>² Division of Rheumatology, Department of Internal Medicine, Kaohsiung Medical University Hospital, Kaohsiung, Taiwan</p> <p>高雄醫學大學附設醫院風濕免疫科</p> <p>³ Institute of Biomedical Sciences, National Sun Yat-sen University, Kaohsiung, Taiwan</p>

		國立中山大學生物醫學研究所 ⁴ Graduate Institute of Medicine, College of Medicine, Kaohsiung Medical University, Kaohsiung, Taiwan 高雄醫學大學醫學研究所 ⁵ Division of Endocrinology and Metabolism, Department of Internal Medicine, Changhua Christian Hospital, Changhua, Taiwan 彰化基督教醫院內分泌暨新陳代謝科 ⁶ Graduate Institute of Integrated Medicine, China Medical University, Taichung, Taiwan 中國醫藥大學中西醫結合研究所 ⁷ Department of Kinesiology, Health and Leisure Studies, National University of Kaohsiung, Kaohsiung, Taiwan 高雄大學運動健康與休閒學系
14:28-14:34	Clinical B : gout	Risk of total hip and knee replacement in gout patients prior to and following diagnosis: A national population study in Taiwan 痛風病患接受全關節置換術的風險 Chang-Fu Kuo ¹ ; Jung-Sheng Chen ¹ ¹ Division of Rheumatology, Allergy and Immunology, Chang Gung Memorial Hospital, Taoyuan, Taiwan 林口長庚醫院風濕過敏免疫科
14:34-14:40	Basic/ translation B : myositis	Study of Serum KL-6 and Cytokine/Chemokine Levels in Dermatomyositis Patients 皮膚炎患者中血清 KL-6 與細胞素/趨化素含量之研究 Wei-Jhe Hong, Ju-Pi Li, Chien-Chung Huang, Po-Hao Huang, and Lan Joung-Liang* 洪偉哲, 李如璧, 黃建中, 黃柏豪, 藍忠亮* ¹ Division of Immunology and Rheumatology, and ² Rheumatology Research Center, China Medical University Hospital ¹ 風濕免疫科, ² 風濕病研究中心, 中國醫藥大學附設醫院
14:40-14:50	綜合討論	

註：

類型分類依研究方法分為 clinical 臨床(個案/資料庫) image 臨床影像(echo/MRI)

Basic/translational，再依疾病別分為 A、B 兩類。

A 類：骨骼關節疾病：再分 RA, spondyloarthritis, 骨鬆 and others。

B 類：自體免疫疾病：再分 SLE, SS/PSS/PM/DM, others。

中華民國風濕病醫學會 2016 年會

海報目錄

時間：105 年 10 月 22 日(星期六) 10：10~10：30

地點：新竹喜來登飯店海報區

主辦單位：社團法人中華民國風濕病醫學會

主持人：黃文男醫師

NO.	摘要說明
P001	<p>Galectin-3 is a major determinant of femoral neck bone mineral density in a partial regression model: a preliminary study Ko-Chi-Hua¹, Ying-Chou Chen, Fu-Mei Su¹; Jia-Feng Chen¹; Shan-Fu Yu^{1, 2}; Tien-Tsai Cheng^{1, 3}, Wen-Chan Chiu¹, Chung-Yuan Hsu¹, Yu-Jih Su 柯祈化, 陳英州, 蘇富美, 陳嘉峯, 尤珊富, 鄭添財, 邱文燦, 許鐘元, 蘇昱日 高雄長庚紀念醫院 風濕免疫科 ¹Division of Rheumatology, Allergy, and Immunology, Department of Internal Medicine, Kaohsiung Chang Gung Memorial Hospital, Taiwan ²Chang Gung University College of Medicine, Kaohsiung, Taiwan</p>
P002	<p>Increased serum levels of anti-carbamylated 78-kDa glucose-regulated protein antibody in patients with rheumatoid arthritis Su-Qin Liu¹, Pei-Hsuan Lai¹, Hui-Chun Yu¹, Ming-Chi Lu¹ ¹ Division of Allergy, Immunology and Rheumatology, Dalin Tzu Chi Hospital, Buddhist Tzu Chi Medical Foundation, Chiayi, Taiwan; 類風濕性關節炎患者血清中抗甲酰化 GRP78 抗體濃度增加 劉素勤¹, 賴佩瑄¹, 游惠君¹, 呂明錡¹ 佛教慈濟醫療財團法人大林慈濟醫院過敏免疫風濕科¹</p>
P003	<p>Risk factors for cryptococcal infection among patients with rheumatoid arthritis receiving different immunosuppressive medications Tsai-Ling Liao^{1, 2}, Yi-Ming Chen^{1, 2, 3}, Hsin-Hua Chen^{1, 2, 3}, and Der-Yuan Chen^{2, 3, 4} ¹Department of Medical Research, Taichung Veterans General Hospital, Taiwan ²Ph.D. Program in Translational Medicine and Rong Hsing Research Center for Translational Medicine, National Chung Hsing University, Taichung, Taiwan ³Division of Allergy, Immunology and Rheumatology, Taichung Veterans General Hospital and Faculty of Medicine, National Yang Ming University, Taiwan ⁴Department of Medical Education, Taichung Veterans General Hospital, Taiwan 接受不同免疫抑制劑之類風濕關節炎患者，其隱球菌感染之危險因子 廖采苓^{1, 2} 陳一銘^{1, 2, 3} 陳信華^{1, 2, 3} 陳得源^{2, 3, 4} 台中榮民總醫院 醫學研究部¹ 中興大學 轉譯醫學博士學程² 台中榮民總醫院過敏免疫風濕科³ 陽明大學醫學系³ 台中榮民總醫院 教學部⁴</p>
P004	<p>Baricitinib in Taiwanese Patients with Active RA and Inadequate Response to cDMARDs: Post Hoc Subanalysis of the RA-BUILD Study 陳英州 Ying-Chou Chen,¹ 陳宏安 Hung-An Chen,² 李修身 Chyou-Shen Lee,³ 魏正宗 Cheng-Chung Wei,⁴ Rena Klar,⁵ Tara Carmack,⁵ Douglas Schlichting,⁶ Sirel Gürbüz,⁶ 吳文碩 Wen-Shuo Wu.⁷ ¹高雄長庚紀念醫院 Chang Gung Memorial Hospital, Kaohsiung City, Taiwan;</p>

	² 奇美醫學中心 Chi-Mei Medical Centre, Yongkang City, Taiwan; ³ 台北馬偕紀念醫院 Mackay Memorial Hospital, Taipei, Taiwan; ⁴ 中山醫學大學附設醫院 Chung Shan Medical University Hospital, Taichung City, Taiwan; ⁵ Quintiles, Durham, NC, USA; ⁶ Eli Lilly and Company, Indianapolis, IN, USA; ⁷ Eli Lilly and Company (Taiwan), Taipei, Taiwan.
P005	Baricitinib (Bari) vs Placebo (PBO) or Adalimumab (ADA) in Patients (Pts) with Active Rheumatoid Arthritis (RA) and an Inadequate Response (IR) to Background Methotrexate (MTX) Therapy: Results of a Phase 3 Study <u>吳文碩 Wen-Shuo Wu (presenter only)</u> ¹ , Peter C. Taylor ² , Edward C. Keystone ³ , Désirée van der Heijde ⁴ , Yoshiya Tanaka ⁵ , Taeko Ishii ⁶ , Kahaku Emoto ⁶ , Lili Yang ⁶ , Vipin Arora ⁶ , Carol Gaich ⁶ , Terence Rooney ⁶ , Douglas Schlichting ⁶ , William L. Macias ⁶ , Stephanie de Bono ⁶ , Michael E. Weinblatt ⁷ ¹ Presenting on behalf of Eli Lilly and Company, Indianapolis, IN, USA(禮來股份有限公司 醫藥學術處); ² Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences, Kennedy Institute of Rheumatology, University of Oxford, Oxford, UK; ³ The Rebecca MacDonald Centre, Mount Sinai Hospital, University of Toronto, Toronto, Ontario, Canada; ⁴ Leiden University Medical Center, Leiden, The Netherlands; ⁵ School of Medicine, University of Occupational & Environmental Health, Kitakyushu, Japan; ⁶ Eli Lilly and Company, Indianapolis, IN, USA; ⁷ Brigham and Women's Hospital, Boston, MA, USA
P006	Response to Baricitinib (Bari) at 4 Weeks (Wks) Predicts Response at 12 and 24 Wks in Patients (Pts) with Rheumatoid Arthritis (RA): Results from 2 Phase 3 Studies <u>吳文碩 Wen-Shuo Wu (presenter only)</u> ¹ , Joel Kremer ² , Maxime Dougados ³ , Mark C. Genovese ⁴ , Paul Emery ⁵ , Lili Yang ⁶ , Stephanie de Bono ⁶ , Thorsten Holzkaemper ⁷ , Douglas E. Schlichting ⁶ , Josef S. Smolen ⁸ ¹ Presenting on behalf of Eli Lilly and Company, Indianapolis, IN, USA(禮來股份有限公司 醫藥學術處); ² The Center for Rheumatology, Albany Medical College, Albany, NY, USA; ³ Cochin Hospital, Paris, France; ⁴ Department of Rheumatology and Immunology, Stanford University Medical Center, Palo Alto, CA, USA; ⁵ Leeds Institute of Rheumatic & Musculoskeletal Medicine, University of Leeds, Leeds, UK; ⁶ Eli Lilly and Company, Indianapolis, IN, USA; ⁷ Lilly Deutschland GmbH, Bad Homburg, Germany; ⁸ Division of Rheumatology, Medical University of Vienna, Vienna, Austria
P007	Posterior reversible encephalopathy and pancytopenia and low dose oral methotrexate – a case report. Ting-Hui Chang, Chien-Sheng Wu Division of Allergy, Immunology and Rheumatology, Department of Internal Medicine, Far Eastern Memorial Hospital 病例報告：服用低劑量 methotrexate 患者發生可逆性後腦病變症候群及全血球減少症 張婷惠，吳建陞 亞東紀念醫院內科部過敏免疫風濕科
P008	Associations of Serological Markers and Comorbid Conditions with Psoriatic Arthritis and Psoriasis: A Retrospective Chart Review 乾癬和乾癬性關節炎的比較 Wen-Chan Chiu, Chung-Yuan Hsu, Jia-Feng Chen, Chi-Hua Ko, Yu-Jih Su* 邱文燦，許鐘元，陳嘉峯，柯祈化，蘇昱日* Division of Rheumatology, Allergy and Immunology, Department of Internal Medicine, Kaohsiung Chang Gung Memorial Hospital and Chang Gung University College of

	Medicine, Kaohsiung, Taiwan
P009	<p>Effect of Concomitant Conventional Disease-Modifying Antirheumatic Drugs (DMARDs) on the Efficacy and Safety of Ixekizumab (IXE) in Biologic DMARD (bDMARD)-Naïve Patients (Pts) with Active Psoriatic Arthritis (PsA)</p> <p><u>吳文碩 Wen-Shuo Wu (presenter only)</u>¹, Laura C. Coates², Alice B. Gottlieb³, Catherine L. Shuler⁴, Chen-Yen Lin⁴, Susan R. Moriarty⁴, Chin H. Lee⁴, Philip J. Mease⁵</p> <p>¹Presenting on behalf of Eli Lilly and Company, Indianapolis, IN, USA(禮來股份有限公司 醫藥學術處); ²University of Leeds, Leeds, United Kingdom; ³Tufts Medical Center, Boston, MA, USA; ⁴Eli Lilly and Company, Indianapolis, IN, USA; ⁵Swedish Medical Center, and University of Washington, Seattle, WA, USA</p>
P010	<p>A Case of Ankylosing Spondylitis with Ulcerative Colitis Had Major Improvement after Treatment with Adalimumab</p> <p><u>Yen-Po Tsao</u>, Chang-Youh Tsai</p> <p><u>曹彥博</u>, 蔡長祐</p> <p>Division of Allergy, Immunology and Rheumatology, Department of Medicine, Taipei Veterans General Hospital, Taiwan.</p> <p>臺北榮民總醫院 內科部過敏免疫風濕科</p>

中華民國風濕病醫學會 2016 年會

海報目錄

時間：105 年 10 月 22 日(星期六) 10：10~10：30

地點：新竹喜來登飯店海報區

主辦單位：社團法人中華民國風濕病醫學會

主持人：陳堃宏醫師

NO.	摘要說明
P011	<p>Effect of medication adherence on mortality after hip fracture among the elderly in Taiwan: a nationwide cohort study 台灣地區老年人髖部骨折後藥物醫囑性對死亡率之影響：全國性的世代研究 Shan-Fu Yu^{1,2}, Jur-Shan Cheng³, Tien-Tsai Cheng^{1,2}, Jia-Feng Chen^{1,2}, Ben Yu-Jih Su^{1,2}, Yin-Chou Chen^{1,2}, Han-Ming Lai^{1,2}, Chi-Hua Ko^{1,2}, Wen-Chan Chiu^{1,2}, Fu-Mei Su^{1,2}, Chung-Yuan Hsu^{1,2} 尤珊富^{1,2}、鄭竹珊³、鄭添財^{1,2}、陳嘉峰^{1,2}、蘇昱日^{1,2}、陳英州^{1,2}、賴漢明^{1,2}、柯祈化^{1,2}、邱文燦^{1,2}、蘇富美^{1,2}、許鐘元^{1,2} ¹Division of Rheumatology, Allergy, and Immunology, Department of Internal Medicine, Kaohsiung Chang Gung Memorial Hospital, Taiwan ²Chang Gung University College of Medicine, Kaohsiung, Taiwan ³Clinical Informatics and Medical Statistics Research Center, College of Medicine, Chang Gung University, Taoyuan, Taiwan ¹高雄長庚醫院過敏免疫風濕科 ²長庚大學醫學院 ³長庚大學臨床資訊與醫學統計研究中心</p>
P012	<p>Poor First Year Adherence to Anti-Osteoporotic Therapy Increases Mortality in Magnetic Resonance Imaging-Proven Acute Osteoporotic Vertebral Fracture 藥物依從度不佳會增加骨鬆及椎骨折病患的死亡率 Ying-Chou Chen¹ 陳英州¹ 林偉哲² Department of Rheumatology and ²Department of Radiology, Kaohsiung Chang Gung Memorial Hospital, Chang Gung University College of Medicine, Kaohsiung 833, Taiwan</p>
P013	<p>Risk of infections-related death in osteoporotic vertebral fractures? A Hospital-Based Analysis 骨鬆合併脊椎骨折感染所導致死亡之危險因子 Ying-Chou Chen^{1*}, Wei-Che Lin² 陳英州 林偉哲 ¹Department of Rheumatology, Kaohsiung Chang Gung Memorial Hospital, Chang Gung University College of Medicine, Kaohsiung 833, Taiwan ²Department of Radiology, Kaohsiung Chang Gung Memorial Hospital, Chang Gung University College of Medicine, Kaohsiung 833, Taiwan</p>
P014	<p>Can zoledronic acid use lead to impair renal function in osteoporosis patients? 骨力強會導致骨鬆病患腎功能異常嗎? Ying-Chou Chen, Jia-Feng Chen, Tien-Tsai Cheng, Wen-Chan Chiu, Fu-Mei Su,</p>

	Han-Ming Lai, Yu-Jih Su, Shan-Fu Yu, Chung-Yuan Hsu, Chi-Hua, Ko
P015	<p>An Unusual Manifestation of SAPHO Syndrome Associated With Cutaneous Leukocytoclastic Vasculitis : a Case Report 以皮膚血管炎做為 SAPHO syndrome 皮膚表現的罕見個案報告 Ping-Chun Yang¹, Ya-Chih Tien², Ying-Min Chiu², Chih-Wei Lee³, Yen-Yun Tsai⁴ 楊秉鈞¹, 田雅之², 邱瑩明², 李智偉³, 蔡妍筠⁴ ¹Department of Family Medicine, Changhua Christian Hospital, Changhua, Taiwan ²Division of Allergy, Immunology and Rheumatology, Department of Internal Medicine, Changhua Christian Hospital, Changhua City, Taiwan ³Department of Medical Imaging, Changhua Christian Hospital, Changhua City, Taiwan ⁴Department of Dermatology, Changhua Christian Hospital, Changhua City, Taiwan ¹ 彰化基督教醫院家庭醫學科 ² 彰化基督教醫院過敏免疫風濕科 ³ 彰化基督教醫院影像醫學科 ⁴ 彰化基督教醫院皮膚科</p>
P016	<p>How effective is injections for rotator cuff disease? Yu-fen Hsiao Division of Rheumatology, Department of Internal Medicine, Chu Shang Show Chwan Hospital 蕭育芬 竹山秀傳醫院 過敏免疫風濕科</p>
P017	<p>Clinical Images: Intracellular hematoidin crystals identified in a patient with monoarthritis Chih-Wei Tseng 曾智偉 Taichung Veterans General Hospital 台中榮民總醫院</p>
P018	<p>Clinical Image Acute Polyarthritis as presentation of Paraneoplastic Syndrome Wei-Jhe Hong 洪偉哲 Division of Immunology and Rheumatology, China Medical University Hospital, Taiwan 中國醫藥大學附設醫院 免疫風濕科</p>
P019	<p>Surgery in patients with gout prior to and following diagnosis: case-control study 痛風診斷前後手術的風險 Chang-Fu Kuo¹; Mei-Yun Hsieh¹ ¹Division of Rheumatology, Allergy and Immunology, Chang Gung Memorial Hospital, Taoyuan, Taiwan 林口長庚醫院風濕過敏免疫科</p>

中華民國風濕病醫學會 2016 年會

海報目錄

時間：105 年 10 月 22 日(星期六) 16：20~16：30

地點：新竹喜來登飯店海報區

主辦單位：社團法人中華民國風濕病醫學會

主持人：蘇昱日醫師

NO.	摘要說明
P020	<p>軟指形軟珊瑚所含之天然物抗類風濕性關節炎之功效與機轉 The Effects and Mechanism of the marine natural compounds on rheumatoid arthritis 楊登和^{1,2} 林季千³</p> <p>1 國軍台中總醫院風濕免疫科 2 三軍總醫院國防醫學院風濕免疫科 3 國立中興大學生物醫學所</p>
P021	<p>Rapid Onset of Efficacy in Patients with Psoriasis Treated with Ixekizumab (IXE): A Pooled Analysis of Data from 2 Phase 3 Randomized Clinical Trials (UNCOVER-2 and UNCOVER-3) 吳文碩 Wen-Shuo Wu (presenter only)¹, Craig Leonardi², Richard Langley³, Andrew Blauvelt⁴, Kenneth Gordon⁵, David Stanley Shrom⁶, Lisa Nichole Farmer Kerr⁶, Ivaylo Stoykov⁶, Clement Ojeh⁶, Kristian Reich⁷</p> <p>¹Presenting on behalf of Eli Lilly and Company, Indianapolis, IN, USA (禮來股份有限公司 醫藥學術處); ²Saint Louis University School of Medicine, St. Louis, MO, USA; ³Dalhousie University, Halifax, NS, Canada; ⁴Oregon Medical Research Center, Portland, OR, USA; ⁵Northwestern University Feinberg School of Medicine, Chicago, IL, USA; ⁶Eli Lilly and Company, Indianapolis, IN, USA; ⁷Dermatologikum Hamburg, Hamburg, Germany</p>
P022	<p>異鼠李素對於樹狀細胞功能之影響 The Effects of Isorhamnetin on Dendritic Cells Functions 楊登和^{1,2} 林季千³</p> <p>1 國軍台中總醫院 風濕免疫科 2 三軍總醫院 國防醫學院 風濕免疫科 3 國立中興大學生物醫學所</p>
P023	<p>Clinical Images: Recurrent spontaneous intramuscular hematoma by acquired coagulation factor XIII deficiency in an elder patient with systemic lupus erythematosus Chien-Chung Huang^{1,2}, Joung-Liang Lan^{1,3}, Gregory J. Tsay^{1,3}, Chung-Ming Huang¹, Jiunn-Horng Chen^{1,3}, Po-Hao Huang¹, Po-Chang Wu¹, Wei-Jhe Hong¹ 黃建中^{1,2} 藍忠亮^{1,3} 蔡嘉哲^{1,3} 黃春明¹ 陳俊宏^{1,3} 黃柏豪¹ 吳柏樟¹ 洪偉哲¹</p> <p>¹Division of Immunology and Rheumatology, Department of Internal Medicine, China Medical University Hospital, Taichung, Taiwan ²Graduate Institute of Clinical Medical Science, China Medical University, Taichung, Taiwan ³School of Medicine, China Medical University, Taichung, Taiwan ¹中國醫藥大學附設醫院內科部風濕免疫科</p>

	² 中國醫藥大學臨床醫學研究所 ³ 中國醫藥大學醫學系
P024	Candida albicans pyomyositis in a SLE patient Yu- Hisu Chen M.D. ¹ , Yi-Jia Lin M.D. ² , Hsiang-Cheng Chen M.D., Ph.D. ¹ 陳玉秀 林宜嘉 陳相成 ¹ Division of Rheumatology/Immunology/Allergy, Department of Internal Medicine, ² Department of Pathology, Tri-Service General Hospital, National Defense Medical Center, Taipei, Taiwan, R.O.C. 三軍總醫院風濕免疫科，三軍總醫院病理部

中華民國風濕病醫學會 2016 年會

海報目錄

時間：105 年 10 月 23 日(星期日) 10：20~10：30

地點：新竹喜來登飯店海報區

主辦單位：社團法人中華民國風濕病醫學會

主持人：呂聆音醫師

NO.	摘要說明
P025	Ultrasound is more reliable than inflammatory parameters (ESR and CRP) to evaluate disease activity in rheumatoid arthritis patients on tocilizumab therapy 超音波比臨床指標更能準確用於安挺樂治療之評估 陳英州 陳嘉峯 Ying-Chou Chen, Jia-Feng Chen Department of Rheumatology, Kaohsiung Chang Gung Memorial Hospital, Chang Gung University College of Medicine
P026	Clinical Features of Patients with Early Rheumatoid Arthritis diagnosed by 40-joint Ultrasonography 以 40 關節超音波診斷之早期類風濕性關節炎病人的臨床特徵 <i>Kuo-Lung Lai, Hsin-Hua Chen, Pei-Lin Chao, Yi-Hsin Chen, Der-Yuan Chen</i> 賴國隆, 陳信華, 趙珮琳, 陳怡行, 陳得源 Division of Allergy, Immunology and Rheumatology, Department of Internal Medicine, Taichung Veterans General Hospital, Taiwan 台中榮民總醫院內科部過敏免疫風濕科
P027	Clinical Images: Intracellular maltese cross crystal in subcutaneous cryptococcal infection in a patient with rheumatoid arthritis Chih-Wei Tseng 曾智偉 Taichung Veterans General Hospital 台中榮民總醫院
P028	Clinical Images: Intracellular Maltese cross crystals in sacroiliac tuberculosis Chih-Wei Tseng 曾智偉 Taichung Veterans General Hospital 台中榮民總醫院
P029	Risk factors for residual inflammation in rheumatoid arthritis patient after one year of adalimumab therapy 經復邁治療一年後仍有超音波殘存發炎反應的危險因子 Ying-Chou Chen ¹ , Wen-Chan Chiu ¹ , Fu-Mei Su ¹ , Jia-Feng Chen ¹ 陳英州 邱文燦 蘇富美 陳嘉峯 ¹ Department of Rheumatology, Kaohsiung Chang Gung Memorial Hospital, Chang Gung University College of Medicine, Kaohsiung 833, Taiwan
P030	Multiple enlarged lymph nodes with comb sign mimicking adenocarcinoma in an AS patient with Crohn's disease

	<p>Yu- Hisu Chen M.D.¹, Chang-hsien Liu M.D.², Hsiang-Cheng Chen M.D., Ph.D.¹ 陳玉秀，劉昌憲，陳相成 ¹Division of Rheumatology/Immunology/Allergy, Department of Internal Medicine, ²Department of Radiology, Tri-Service General Hospital, National Defense Medical Center, Taipei, Taiwan, R.O.C. 三軍總醫院風濕免疫科，三軍總醫院放射診斷部</p>
P031	<p>Clinical Images: Maltese cross crystals in sputum from patients with Goodpasture syndrome 肺腎症候群其血痰中的馬耳他十字晶體 Chih-Wei Tseng, MD. 曾智偉 Taichung Veterans General Hospital, Taichung, Taiwan 台中榮民總醫院</p>
P032	<p>Clinical evidence of a good response to immunosuppressant therapy in a case of possible Bechet's syndrome related recurrent pseudo-aneurysms demonstrated by positron emission tomography (PET) 用正子攝影證實一位可能為白塞氏症候群相關反覆假性動脈瘤的患者使用免疫抑制劑治療具有極佳療效的臨床驗證 Wu-Yi Da¹, Kuo-Tung Tang¹ 吳沂達¹，譚國棟¹ ¹Division of Allergy, Immunology and Rheumatology, Taichung Veterans General Hospital, Taichung, Taiwan. 台中榮總過敏免疫風濕科</p>
P033	<p>IgG4-related retroperitoneal fibrosis-a case report IgG4 相關腹膜後纖維化-病例報告 Cheng-Han Wu, Jenhao Chen, Song-Chou Hsieh 吳政翰，陳仁豪，謝松洲 National Taiwan University Hospital 台大醫院風濕免疫科</p>
P034	<p>Salivary Gland Ultrasonography : Compare Sjogren's Syndrome with Other Diseases That Involved Salivary Gland 唾液腺超音波:比較乾燥症與其他唾液腺侵犯的疾病之間的差異 Po-Hao Huang 黃柏豪, Joung-Liang Lan 藍忠亮, Gregory-J Tsai 蔡嘉哲, Chung-Ming Huang 黃春明, Jiunn-Horng Chen 陳俊宏, Chien-Chung Huang 黃建中, Wei-Jhe Hong 洪偉哲, Po-Chang Wu 吳柏樟 中國附醫風濕免疫科 Division of Immunology and Rheumatology, China Medical University Hospital, Taiwan</p>
P035	<p>Multiple cranial neuritis presenting as acute onset of diplopia in a SLE patient Chi-Yung Yeung¹, Chun-Jung Juan M.D., Ph.D.³, Hsiang-Cheng Chen M.D., Ph.D.^{2*} ¹Department of Medicine, National Defense Medical Center, Taipei, Taiwan, ROC. ²Division of Rheumatology/Immunology/Allergy, Tri-Service General Hospital, National Defense Medical Centre, Taipei, Taiwan, R.O.C. ³Department of Radiology, Tri-Service General Hospital, National Defense Medical Centre, Taipei, Taiwan, R.O.C. 楊志永¹ 阮春榮³ 陳相成² 三軍總醫院內科部¹ 風濕免疫科² 放射部³</p>

中華民國風濕病醫學會 2016 年會

海報目錄

時間：105 年 10 月 23 日(星期日) 14：50~15：10

地點：新竹喜來登飯店海報區

主辦單位：社團法人中華民國風濕病醫學會

主持人：黃光永醫師

NO.	摘要說明
P036	<p>Autoimmune rheumatic diseases and the risk of Parkinson disease: A Nationwide Cohort Study in Taiwan Chi-Ching Chang¹, Tzu-Min Lin¹, Chi-Sheng Chiou¹, Kai-Len Tsai², Pei-I Kuo¹, Yu-Sheng Chang² ¹Division of Rheumatology, Immunology and Allergy, Taipei Medical University Hospital ²Division of Rheumatology, Immunology and Allergy, Taipei Medical University Shuang Ho Hospital 自體免疫風濕疾病與罹患巴金森疾病之風險性 張棋楨¹ 林子閔¹ 邱啟勝¹ 蔡凱倫² 郭佩邑¹ 張又升² 台北醫學大學附設醫院風濕免疫過敏科¹ 台北醫學大學衛生署雙和醫院過敏免疫風濕科²</p>
P037	<p>Increase the Risk of Dementia in Patients with Autoimmune Rheumatic Diseases: A Nationwide Cohort Study Tzu-Min Lin¹, Chi-Ching Chang¹, Chi-Sheng Chiou¹, Kai-Len Tsai², Pei-I Kuo¹, Yu-Sheng Chang² ¹Division of Rheumatology, Immunology and Allergy, Taipei Medical University Hospital ³Division of Rheumatology, Immunology and Allergy, Taipei Medical University Shuang Ho Hospital 自體免疫風濕疾病增加罹患失智症之風險性 林子閔¹ 張棋楨¹ 邱啟勝¹ 蔡凱倫² 郭佩邑¹ 張又升² 台北醫學大學附設醫院風濕免疫過敏科¹ 台北醫學大學衛生署雙和醫院過敏免疫風濕科²</p>
P038	<p>The risk factors of sepsis associated mortality in autoimmune rheumatic disease patients Chung-Yuan Hsu, Qi-Hua Ke, Jia-Feng Chen, Wen-Chan Chiu, Shan-Fu Yu, Han-Ming Lai, Ying-Chou Chen, Tien-Tsai Cheng, Yu-Jih Su 許鐘元, 柯祈化, 陳嘉峰, 邱文燦, 尤珊富, 賴漢明, 陳英州, 鄭添財, 蘇昱日 Division of Rheumatology, Allergy, and Immunology, Chang Gung Memorial Hospital - Kaohsiung Medical Center 高雄長庚醫院過敏免疫風濕科</p>
P039	<p>Pancreatic Head Cancer with the First Presentation of Erythema Nodosum F.Y. Chen, K.S. Tseng Tao-Yuan General Hospital, Division of Rheumatology, Immunology and Allergy</p>

	以紅斑性結節為第一表現的胰臟頭腫瘤 陳範宇、曾國森 衛生福利部桃園醫院 風濕免疫過敏科
P040	Clinical Images: Autoimmune hypophysitis 自體免疫性垂體炎 曾智偉 Chih-Wei Tseng 台中榮總過敏免疫風濕科 Taichung Veterans General Hospital, Division of Allergy, Immunology and Rheumatology
P041	Clinical Image Orbital Pseudotumor as Ocular Presentation of Wegener's Granulomatosis Wei-Jhe Hong 洪偉哲 Division of Immunology and Rheumatology, China Medical University Hospital, Taiwan 中國醫藥大學附設醫院 免疫風濕科
P042	Severe Refractory Autoimmune Hemolytic Anemia with Complete Hematologic Response to Treatment with Rituximab K.S. Tseng Tao-Yuan General Hospital, Division of Rheumatology, Immunology and Allergy 嚴重頑固自體免疫溶血性貧血莫須瘤治療案例分享 曾國森 衛生福利部桃園醫院 風濕免疫過敏科
P043	Characteristics and outcomes of patients with ANCA-associated vasculitis in a single medical center in Southern Taiwan ANCA相關血管炎之臨床表現與預後 Ling-ying Lu, Hsiu-man Keng, Ling-jung Yen, Ruey-jye Hwu, Jui-cheng Tseng Division of Allergy, Immunology and Rheumatology, Kaohsiung Veterans General Hospital, Kaohsiung, Taiwan 呂聆音, 耿秀曼, 顏伶容, 胡瑞潔, 曾瑞成 高雄榮民總醫院 過敏免疫風濕科
P044	臺灣自體免疫疾病併發肺動脈高血壓病患臨床特色及存活率分析: 單一醫學中心 15 年世代研究 Clinical Features and Survival of Taiwanese Patients with Connective Tissue Disease-related Pulmonary Arterial Hypertension (CTD-PAH): a tertiary referral center cohort for 15 years 謝祖怡 ^{1,2,3} 、陳信華 ¹ 、賴國隆 ¹ 、洪維廷 ^{1,2} 、陳一銘 ¹ 、譚國棟 ¹ 、謝佳偉 ¹ 、黃文男 ¹ 、陳怡行 ¹ 、陳得源 ^{1,2} 臺中榮民總醫院過敏免疫風濕科 ¹ 、教學部 ² 、逢甲大學 ³ Tsu-Yi Hsieh ^{1,2,4} , Hsin-Hua Chen ¹ , Lai, Kuo-Lung ¹ , Wei-Ting Hung ^{1,2} , Yi-Ming Chen ¹ , Kuo-Tung Tang ¹ , Chia-Wei Hsieh ¹ , Wen-Nan Hwang ¹ , Yi-Hsing Chen ¹ , Der-Yuan Chen ^{1,2} . 1. Section of Allergy, Immunology, and Rheumatology, Taichung Veterans General Hospital. 2. Department of Medical Education, Taichung Veterans General Hospital. 3. Feng Chia University
P045	Tumor markers in dermatomyositis/ polymyositis : friends or foes? Chong Hong LIM ^{1,2*} , Chih-Wei TSENG ^{2*} , Ching-Tsai LIN ² , Wen-Nan HUANG ^{2,4} , Yi-Hsing CHEN ^{2,4} , Der-Yuan CHEN ^{2,3,4,5,6,**}

林鍾泓, 曾智偉, 林靖才, 黃文男, 陳怡行, 陳得源

¹Rheumatology Unit, Department of Internal Medicine, Pulau Pinang General Hospital, Georgetown, Malaysia. 馬來西亞檳城醫院風濕科

²Division of Allergy, Immunology and Rheumatology, Department of Internal Medicine, Taichung Veterans General Hospital, Taichung, Taiwan
台中榮總過敏免疫風濕科

³Department of Medical Education, Taichung Veterans General Hospital, Taichung, Taiwan
台中榮總教學部

⁴School of Medicine, National Yang-Ming University, Taipei, Taiwan
陽明大學醫學系

⁵Institute of Biomedical Science and Rong Hsing Research Center for Translational Medicine, Chung-Hsing University, Taichung, Taiwan
中興大學轉譯醫學博士學程

⁶School of Medicine, Chung-Shan Medical University, Taichung, Taiwan.
中山醫藥大學醫學系

*Equal contribution

**Correspondence and requests for materials should be addressed to Dr. Der-Yuan Chen, Division of Allergy, Immunology and Rheumatology, Taichung Veterans General Hospital, Taichung, Taiwan. No. 1650, Sec. 4, Taiwan Boulevard, Taichung 40705, Taiwan.

中華民國風濕病醫學會 2016 年會

海報目錄

時間：105 年 10 月 23 日(星期日) 14：50~15：10

地點：新竹喜來登飯店海報區

主辦單位：社團法人中華民國風濕病醫學會

主持人：郭昶甫醫師

NO.	摘要說明
P046	Primary Sjogren's Syndrome With C3 Glomerulonephritis: A Case Report <u>Shih-Kai Wang</u> , Ling-Jung Yen, Li-Feng Wang, Jui-Chieh Hu, Ling-Yin Lu, Jui-Cheng Tseng 王仕凱, 顏伶容, 王立峰, 胡瑞潔, 呂聆音, 曾瑞成 Division of Allergy, Immunology and Rheumatology, Kaohsiung Veterans General Hospital, Taiwan 高雄榮民總醫院過敏免疫風濕科
P047	Caplan's Syndrome with Secondary Sjogren Syndrome <u>Yen-Po Tsao</u> ¹ , Fang-chi Lin ² , Hsiao-Yi Lin ¹ 曹彥博 ¹ , 林芳綺 ² , 林孝義 ¹ 1. Division of Allergy, Immunology and Rheumatology, Department of Medicine, Taipei Veterans General Hospital, Taiwan. 臺北榮民總醫院 內科部過敏免疫風濕科 2. Department of Chest Medicine, Taipei Veterans General Hospital, Taiwan. 臺北榮民總醫院 胸腔部
P048	修格連氏症病人週邊血液自體抗體之表現 The expression of circulating autoantibodies in the patients with Sjögren's syndrome 廖原茂 ¹ 楊登和 ^{1,2} ¹ 國軍台中總醫院 內科部 ² 三軍總醫院 國防醫學院 風濕免疫科
P049	Coexist of Sjogren's syndrome with diffuse large B cell lymphoma and multiple systems involvement <u>Hsien-Tzung Liao</u> , Chang-Youh Tsai, Deh-Ming Chang 廖顯宗, 蔡長祐, 張德明 Division of Allergy, Immunology & Rheumatology, Department of Internal Medicine, Taipei Veterans General Hospital, Taipei, Taiwan 臺北榮民總醫院內科部過敏免疫風濕科
P050	Hemophagocytic syndrome as the initial manifestation of Systemic Lupus Erythematosus 紅斑性狼瘡以嗜血症候群為初發表現 Horng-Ming Yeh Department of Internal Medicine, Tainan Municipal Hospital 葉宏明

	台南市立醫院內科
P051	<p>Prosthetic infective endocarditis with aortic root abscess in a patient with systemic lupus erythematosus: a case report Tsung-Hsien Chang, Medical Student, Tzu-Hao Li, MD, Hsiao-Yi Lin, MD. 張綜顯¹、黎子豪²、林孝義²</p> <p>¹ Faculty of Medicine, National Yang-Ming University, Taipei, Taiwan 國立陽明大學醫學系</p> <p>² Division of Allergy, Immunology and Rheumatology, Taipei Veterans General Hospital, Taipei, Taiwan 台北榮民總醫院內科部過敏免疫風濕科</p>
P052	<p>Anti-mitochondrial antibody negative primary biliary cirrhosis and autoimmune hepatitis overlap syndrome in a patient with systemic lupus erythematosus: a case report 抗粒線體抗體陰性的原發性膽汁性肝硬化與自體免疫性肝炎重疊症候群在一位全身性紅斑狼瘡病人:病例報告</p> <p>Chien-Chung Huang^{1,2}, Joung-Liang Lan^{1,3}, Gregory J. Tsay^{1,3}, Chung-Ming Huang^{1,4}, Jiunn-Horng Chen^{1,3}, Po-Hao Huang¹, Po-Chang Wu¹, Wei-Jhe Hong¹, Shin-Hsin Chang¹ 黃建中^{1,2} 藍忠亮^{1,3} 蔡嘉哲^{1,3} 黃春明^{1,4} 陳俊宏^{1,3} 黃柏豪¹ 吳柏樟¹ 洪偉哲¹ 張詩欣¹</p> <p>¹Division of Immunology and Rheumatology, Department of Internal Medicine, China Medical University Hospital, Taichung, Taiwan ²Graduate Institute of Clinical Medical Science, China Medical University, Taichung, Taiwan ³School of Medicine, China Medical University, Taichung, Taiwan ⁴ Graduate Institute of Integrated Medicine, China Medical University, Taichung, Taiwan</p> <p>¹ 中國醫藥大學附設醫院內科部風濕免疫科 ² 中國醫藥大學臨床醫學研究所 ³ 中國醫藥大學醫學系 ⁴ 中國醫藥大學中西醫結合研究所</p>
P053	<p>Comorbidities in patients with systemic lupus erythematosus prior to and following diagnosis: case-control study 紅斑性狼瘡診斷前後的共病風險</p> <p>Chang-Fu Kuo¹; Ting-Ting Chung¹ ¹Division of Rheumatology, Allergy and Immunology, Chang Gung Memorial Hospital, Taoyuan, Taiwan 林口長庚醫院風濕過敏免疫科</p>
P054	<p>Mycophenolic acid rather than mycophenolate mofetil is effective for refractory hemolytic anemia in a patient with systemic lupus erythematosus CC Wang², CC Lai¹, WS Chen¹, KS Tseng², DM Chang¹ and CY Tsai¹ ¹Department of Allergy, Immunology, and Rheumatology, Taipei Veterans General Hospital, Taiwan; and ² Department of Allergy, Immunology, and Rheumatology, Taoyuan General Hospital, Ministry of health and welfare, Taiwan</p> <p>針對一位難治型溶血性貧血的紅斑性狼瘡患者 Mycophenolic acid 比 mycophenolate mofetil 有效果</p> <p>王淳峻², 賴建志¹, 陳瑋昇¹, 曾國森², 張德明¹, 蔡長祐¹ ¹ 台北榮民總醫院, 過敏免疫風濕科 ² 衛福部桃園醫院, 過敏免疫風濕科</p>

學會官方 LINE 帳號



學會 Line 官方帳號已經申請完成，去年年會已公告學會官方帳號 QR code，此帳號為單向之官方帳號，會員登入後就可以隨時獲得學會提供的最新公告與國內外之學術活動訊息。

再麻煩請加入學會官方 LINE 群組，請利用 QR code 加入，謝謝

飯店位置圖

飯店名稱：新竹喜來登大飯店

飯店地址：302 新竹縣竹北市光明六路東一段 265 號

飯店電話：(03)620-6000

飯店網址：<http://www.sheraton-hsinchu.com/>



交通資訊

1. 由國道一號(中山高)竹北/芎林交流道

經由中山高→於竹北/芎林交流道出口下→沿交流道下之後往『芎林』方向→沿光明六路直行至自強南路→即可抵達新竹喜來登大飯店及在您左側。

National Highway NO.1 (Zhong-Shan Highway) to Hotel

Get off at Zhubei/Cyonglin intersection. Follow the direction to Cyonglin and go straight along Dong Sec. 1, Guangming 6th Rd.

The hotel is located at the left hand side of the road.

2. 由國道三號(北二高)竹林交流道

於竹林交流道(芎林/竹東)出口下→轉往台68線東西向快速道路→直行至往竹北方向下高架道路往平面道路行駛→沿自強南路直行至光明六路口左轉→即可抵達新竹喜來登大飯店。

National Highway NO.3 to Hotel

Get off at Cyonglin/Chutung intersection, and then take the National Expressway No. 68. Follow the direction to Zhubei and go straight along Ziqiang S. Rd. Turn left at Guangming 6th Rd. and the hotel is located at the right hand side of the intersection.

3. 由高鐵站前往飯店

於出口至高鐵七路後左轉→於光明六路東二段左轉→延光明六路直行約1.5公里→新竹喜來登飯店即在您右側。

搭乘計程車約4分鐘車程

High Speed Rail (THSR) Hsinchu Station to Hotel Go straight at Dong Sec. 2, Guangming 6th Rd. for about 2 kilometers and the hotel is located at the right hand side of the road.

Taxi service is available and takes about 4 minutes to Hotel.

4. 由新竹火車站前往飯店

中華路二段往竹北方向行駛→過頭前溪大橋後續接中華路→於光明六路口右轉約2.6公里→即可抵達新竹喜來登大飯店

Hsinchu Railroad Station to Hotel

The Station is located in downtown Hsinchu City. Taxi service is available and takes about 20 minutes to Hotel.

5. 由桃園機場前往飯店

由機場支線接往國道一號南下→在竹北/芎林交流道出口下→沿交流道下之後往『芎林』方向順行至光明六路東一段直行→即可抵達新竹喜來登大飯店。

Taoyuan International Airport to Hotel

Take National Highway No.1 southbound and get off at Zhubei/Cyonglin intersection. Follow the direction to Cyonglin and go straight along Dong Sec. 1, Guangming 6th Rd. The hotel is located at the left hand side of the road.