



UNIVERSITY OF LEEDS

This is a repository copy of *Ultrasound erosions in the feet best predict progression to inflammatory arthritis in anti-CCP positive at-risk individuals without clinical synovitis*.

White Rose Research Online URL for this paper:  
<https://eprints.whiterose.ac.uk/160005/>

Version: Supplemental Material

---

**Article:**

Di Matteo, A, Mankia, K, Duquenne, L et al. (5 more authors) (2020) Ultrasound erosions in the feet best predict progression to inflammatory arthritis in anti-CCP positive at-risk individuals without clinical synovitis. *Annals of the Rheumatic Diseases*, 79 (7). pp. 901-907. ISSN 0003-4967

<https://doi.org/10.1136/annrheumdis-2020-217215>

---

© Author(s) (or their employer(s)) 2020. No commercial re-use. See rights and permissions. Published by BMJ. This is an author produced version of a paper published in *Annals of the Rheumatic Diseases*. Uploaded in accordance with the publisher's self-archiving policy.

**Reuse**

Items deposited in White Rose Research Online are protected by copyright, with all rights reserved unless indicated otherwise. They may be downloaded and/or printed for private study, or other acts as permitted by national copyright laws. The publisher or other rights holders may allow further reproduction and re-use of the full text version. This is indicated by the licence information on the White Rose Research Online record for the item.

**Takedown**

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing [eprints@whiterose.ac.uk](mailto:eprints@whiterose.ac.uk) including the URL of the record and the reason for the withdrawal request.



[eprints@whiterose.ac.uk](mailto:eprints@whiterose.ac.uk)  
<https://eprints.whiterose.ac.uk/>

Supplementary Table 2. Prevalence and distribution of x-rays bone erosions during follow-up			
Bone erosions	MCP2 joints	MCP5 joints	MTP5 joints
<b>Absence</b>	426 (100%)	426 (100%)	420 (98.6%)
<b>Presence</b>	0 (0%)	0 (0%)	6 (1.4%)

At least 1 follow-up hands and feet x-ray was available for 213 CCP+ at risk individuals (median follow-up: 728 days, IQR: 382- 1396 days). Six bone erosions (all in the MTP5 joints), in 3/213 (1.4%) CCP+ at risk individuals, were detected on x-rays during the follow-up. Four out of these 6 bone erosions (one grade 1, two grade 2 and one grade 3) were documented on the baseline US scans, 3 of which in combination with synovitis. The 2 individuals with x-rays bone erosions in the MCP2 and MCP5 joints at baseline (see Supplementary Table 1) did not have further hands and feet x-rays during the follow-up.