



**Fig. 1.** (A) and (B) The presence of hyperpigmented spots on the mucosa of the inner lining of the cheeks and lower lip, with well-defined borders. (C) Presence of brown-colored hyperpigmented bands in the area of the fingernails. (D) Decrease in the intensity of the pigmentation in the area of the fingernails (although it did not completely disappear) 3 years after discontinuing chloroquine.

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2173-5743/

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## Fibromyalgia and Facebook™: Beyond the “I like”<sup>☆</sup>



### *Fibromialgia y Facebook® : más allá del «me gusta»*

To the Editor,

Fibromyalgia is a progressive disease that limits patient activity. It is known that social support contributes to improve physical and

mental aspects. Likewise, it has been seen that social networks can provide emotional support, a source of information and a means of empowerment for the patient.<sup>1</sup> Being that Facebook™ is a widely used social network, we decided to evaluate the features of the pages related to this disorder. We analyzed the pages in terms of the versatility of their characteristics. Here we report our findings.<sup>2</sup>

We utilized the methodology employed by Hale et al.<sup>2</sup>: we carried out the search in Facebook™ using the term “fibromyalgia” on October 17, 2016. We considered only the option that shows pages and excludes from the search the results concerning individuals, groups and other categories. We recorded the Uniform Resource Locator (URL) and the number of “likes” for each page. Since the Facebook™ search tool varies depending on the user’s profile,

<sup>☆</sup> Please cite this article as: Tejada-Llacsá PJ, Cahuana-Aparco J, Cordova Cassia CA. *Fibromialgia y Facebook® : más allá del «me gusta».* *Reumatol Clin.* 2018;14:178–179.

previous searches and the network of friends, we created a new profile specifying only name, sex and age: “Prueba, Prueba”, male, 26 years. We also disabled cookies and location services. When taking data for each page, we considered the time since the last post, the country of origin and the page type; the latter was classified in accordance with the publication as 1 of 3 types: “patient support” (messages of emotional support), “promotional/marketing” (messages promoting products or treatments) and “information” (messages providing information on the disease and its treatment).

Of a total of 110 pages returned in the search, we excluded 47 as they were not in Spanish and 1 page that was from Wikipedia, meaning a total of 62 pages. The maximum number of “likes” was 33,342 and the minimum was 21. The minimum time since the last post was 45 min and the maximum was 4 years. Concerning the country of origin, it was specified in only 41 pages: 19 (46.3%) were from Spain, 8 (19.5%) from Argentina, 4 (9.7%) from Mexico and 10 (24.5%) from the remaining Spanish-speaking countries. Depending on the page type, 25 (40.3%) corresponded to “patient support”, 22 (35.5%) to “promotional/marketing” and 15 (24.2%) to “information”. On the other hand, those providing “patient support” had the highest number of “likes”, with a median of 1008, and a shorter time since the last post, with a median of 3 days.

The number of “likes” involves a type of “word-of-mouth” marketing; that means, a greater diffusion depending on the interest of the individuals. In our case, we observed that the “patient support” page type received the greatest number of “likes”, possibly because they share emotive messages that been shown to have the greatest response from visitors.<sup>3</sup> On the other hand, there is a shorter time since the last post in the “patient support” type, suggesting that there may be a greater activity. These features (follow-up and

activity) should be taken into account to ensure an effective use of the pages.<sup>2,3</sup> We consider it important to report these results because they may serve as guidelines to the health organizations that administer Facebook™ pages related to fibromyalgia. The purpose is to achieve greater dissemination of the information, while maintaining the quality of the content.

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2173-5743/

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## Rheumatoid Arthritis and Ocular Myasthenia Gravis: Effectiveness of Rituximab in the Management of These Two Diseases<sup>☆</sup>



### *Artritis reumatoide y miastenia gravis ocular: efectividad del rituximab en el manejo de ambas enfermedades*

To the Editor,

Myasthenia gravis (MG) is an autoimmune disease that affects the neuromuscular junction of the striated muscles. It provokes a fluctuating weakness of the voluntary muscles, mainly due to the direct attack of autoantibodies against the acetylcholine receptor (AChR).<sup>1</sup>

Our patient was a 66-year-old woman, diagnosed with rheumatoid arthritis (RA) in 2012. She was being treated with 20 mg/week of methotrexate. After 23 months of good clinical control, her disease became active, and treatment was begun with etanercept at 50 mg/week. After 6 doses of etanercept, she came to the emergency department with complete ptosis of right eye with a fluctuating course, that had developed 3 days earlier. She had a limitation of upgaze and, thus, was admitted by the neurology department with suspected ocular MG. During her hospital stay, she underwent brain magnetic resonance imaging and chest computed tomography, both of which were normal. Laboratory tests

showed normal erythrocyte sedimentation rate and C-reactive protein, antinuclear antibodies and extractable nuclear antigens were negative, rheumatoid factor was 232 IU/mL (normal level 0–14), anti-cyclic citrullinated peptide antibodies >300 IU/mL (0–20) and anti-AChR antibodies 29.52 nmol/L (0–0.25). Electromyogram revealed an increase in mean jitter, presence of right frontalis muscle blocks and a decrease in the amplitude at rest of facial nerve signal to nasalis muscle, compatible with a postsynaptic neuromuscular transmission defect. With the confirmation of the diagnosis of ocular MG, it was decided to discontinue etanercept. Three weeks after the interruption of etanercept therapy, which was replaced by 30 mg/day of prednisone, the patient’s neurological status improved. However, over the course of 12 weeks, during which the prednisone dose was being tapered, she developed a polyarticular flare and the ocular symptoms reappeared. It was decided to administer a course of rituximab (2 doses of 500 mg separated by 15 days), followed by retreatment (500 mg every 6 months), with which control of the joint and neurological symptoms was achieved (Fig. 1).

Approximately 5% of the population has one or more autoimmune diseases, and the prevalence is highest in middle-aged women.<sup>2</sup> Patients who have an autoimmune disease are more susceptible to developing a second one. Myasthenia gravis is associated with RA in up to 4% of the patients.<sup>3</sup>

This association may be due to immunological factors that favor the activation of autoreactive B and T cells, epigenetic factors and genetic susceptibility to certain groups of genes, particularly those belonging to the major histocompatibility complex.<sup>3</sup> Thus, if we consider that the overlap of autoimmune disorders is a reflection of the existence of common pathogenic mechanisms, the therapeutic approach should be the same.

<sup>☆</sup> Please cite this article as: Novella-Navarro M, Salvatierra-Ossorio J, Muñoz-Gómez MM, Pavo-Blanco M. Artritis reumatoide y miastenia gravis ocular: efectividad del rituximab en el manejo de ambas enfermedades. *Reumatol Clin.* 2018;14:179–180.