
Supplemental Online Content

Li C, Li Z, Cao Y, et al. Tofacitinib for the treatment of nail lesions and palmoplantar pustulosis in synovitis, acne, pustulosis, hyperostosis, and osteitis syndrome. *JAMA Dermatol*. Published online September 30, 2020. doi:10.1001/jamadermatol.2020.3095

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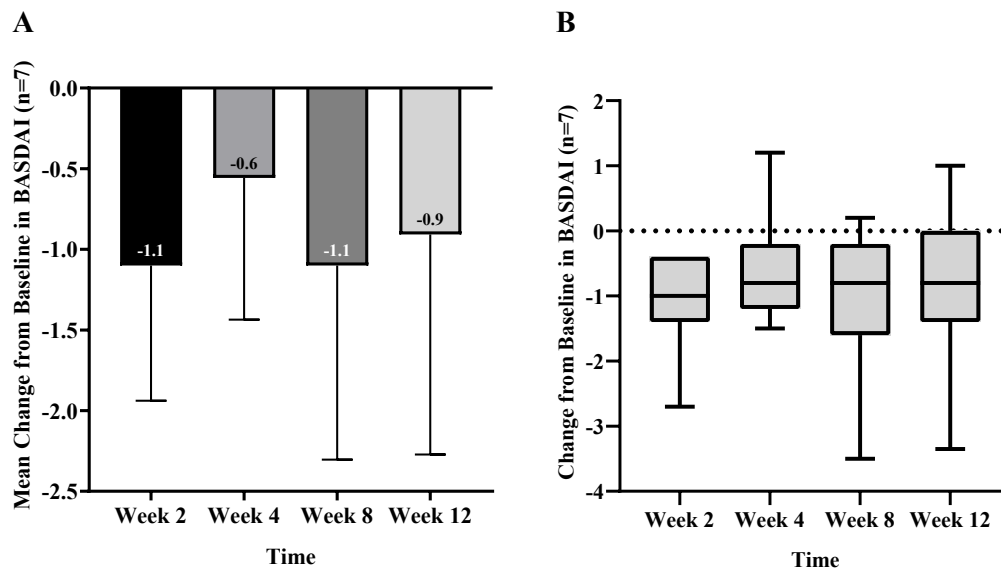
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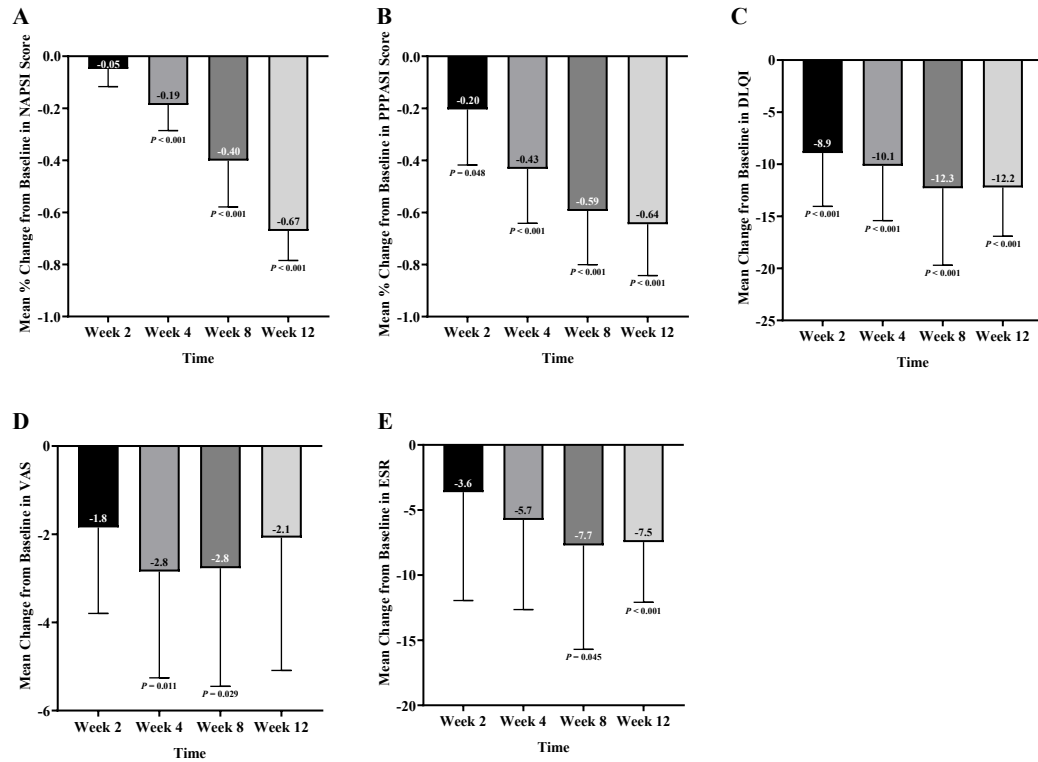
This supplemental material has been provided by the authors to give readers additional information about their work.

eFigure 1. Change from Baseline in BASDAI in Patients with SAPHO Syndrome Treated with Tofacitinib.



(A) Results of parametric analyses. Data are expressed as the means, with T bars indicating the standard deviation. (B) Results of non-parametric analyses. Boxes include the median and interquartile range. Whiskers are within the 1.5 interquartile range, and circles are outliers. *P* values relate to comparisons between the data obtained at each follow-up and baseline ($n=7$, only for patients with spinal or sacroiliac joint involvement). BASDAI, Bath Ankylosing Spondylitis Disease Activity Index.

eFigure 2. Clinical Response of Nail Involvement, Palmoplantar Pustulosis, Osteoarticular Manifestations, and Inflammatory Parameters in Patients with SAPHO Syndrome Treated with Tofacitinib.



(A) Percent change from baseline in NAPSII during the 12-week treatment period. (B) Percent change from baseline in PPPASI during the 12-week treatment period. (C) DLQI, measured as change from baseline. (D) Change from baseline in VAS in global osteoarticular pain during the 12-week treatment period. (E) Change from baseline in ESR during the 12-week treatment period. Data are expressed as the means, with T bars indicating the standard deviation. *P* values relate to comparisons between the data obtained at each follow-up and baseline using analysis of covariance (ANCOVA). NAPSII, Nail Psoriasis Severity Index; PPPASI, Palmoplantar Psoriasis Area and Severity Index; DLQI, Dermatology Life Quality Index; VAS, Visual Analogue Scale; ESR, erythrocyte sedimentation rate.

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