

Rheumatology News

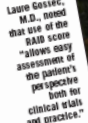
INTERNATIONAL

2011

Rheumatology News

Vol. 5, No. 2

The Leading Independent



Laure Gossec, M.D., notes that use of the RAID score "allows easy assessment of the patient's perspective both for clinical trials and practice."

RAID Score Measures RA's Impact on Life

BY DIANA MAHONEY

By collapsing seven health domains into one composite index, the patient-derived Rheumatoid Arthritis Impact of Disease score "allows easy assessment of the patient's perspective both for clinical trials and practice," said Dr. Laure Gossec of Hôpital Cochin, Paris. The Rheumatoid Arthritis Impact of Disease (RAID) scoring system is designed to measure the impact of rheumatoid arthritis (RA) on patients' lives. The score contains components to assess perceived pain, functional disability, fatigue, emotional well-being, physical walking, being, sleep disturbance, and would be used in the RAID score to measure the impact of RA on patients' lives. The score contains components to assess perceived pain, functional disability, fatigue, emotional well-being, physical walking, being, sleep disturbance, and would be used in the RAID score to measure the impact of RA on patients' lives.

WHAT'S NEW

World Health Organization's impact of QI on health for sub-Saharan Africa. 2

Treatment is unnecessary in patients with serologically active but clinically quiescent lupus. 8

Screening for hepatitis B is a must in all RA patients they undertake DMARD therapy. 12

Rheumatology News

Vol. 5, No. 4

The Leading Independent Newspaper for the Rheumatologist

JULY/AUGUST 2010

To view an interview with Dr. Jürgen Braun (right), go to www.youtube.com/globalmedicalnews, and click on "Playlist." Then click on Rheumatology News.



Anti-TNFs Among First Choices in AS

BY MITCHELL L. ZOLER

ROME — Revised recommendations for the management of ankylosing spondylitis from two international societies set tumor necrosis factor inhibitors as the cornerstone of treatment for patients who fail to have an adequate response to treatment with nonsteroidal anti-inflammatory drugs. The new recommendations also emphasize the extra-articular manifestations of ankylosing spondylitis (AS)—including psoriasis, uveitis, and inflammatory bowel disease (IBD)—and stress that these manifestations should be managed in collaboration with other specialists, along with recognition that AS patients also face increased risks for cardiovascular disease and osteoporosis, Dr. Jürgen Braun said at the congress.

Extra-articular AS manifestations also given new emphasis in revised guidelines.

[NSAIDs]. All TNF inhibitors work similarly well for the spine, peripheral joints, and entheses. For AS patients whose major problem is peripheral joint disease, a conventional DMARD—specifically sulfasalazine—can be effective, said Dr. Braun, director of the Center for Rheumatic Diseases in Herne, Germany. The new treatment guidelines complement the new classification criteria for AS and axial spondyloarthritis that were published by the ASAS (Assessment of Spondyloarthritis International Association) last year (Ann. Rheum. Dis. 2009;88:777-83). The new classification criteria mean that rheumatologists can "treat when they see inflammation on MRI" instead of having to wait for patients to develop radiographic changes, he noted.

See AS page 3

WHAT'S NEW

Vertebral fractures, usually in the midthoracic spine, have been reported in patients with newly diagnosed spondyloarthropathies, suggesting that the risk for osteoporosis is increased much sooner in the disease course than had been believed previously. 2

Data from a 3-year study uphold the use of mycophenolate mofetil in the management of lupus nephritis. 8

Many rheumatologists have been using this drug as an off-label treatment, and new data support the approach. 3

Four of eight patients with severe intractable lupus approved double ramipril after undergoing autologous hematopoietic stem-cell transplants, according to data presented at the



International Congress on Systemic Lupus Erythematosus. 6

A dietary supplement made from macadamia and soybeans has been shown to slow progression of joint destruction in patients with hip osteoarthritis over the course of 3 years. 8

Alcohol use was significantly less common among almost 1,000 people with newly diagnosed rheumatoid arthritis compared to 5,800 controls, a finding that suggests either that alcohol use was protective or that the patients felt too sick to tolerate alcohol. 9



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Neuropsychiatric Screening Tool Sensitive in SLE

Questionnaire takes just 8 minutes.

BY M. ALEXANDER OTTO

FROM THE INTERNATIONAL CONGRESS ON RHEUMATOID ARTHRITIS

VANCOUVER, B.C. — A short questionnaire promises to be a simple way to identify neuropsychiatric involvement in patients with systemic lupus erythematosus. Affected individuals need referral and specialized treatment. A score higher than 17 on the questionnaire is 92.9% sensitive (95% confidence interval [CI], 85.1%-97.3%) and 25.5% specific (95% CI, 14.7%-39.0%) for neuropsychiatric systemic lupus erythematosus (NPSLE), according to Dr. Stefano Bombardieri, chairman of the department of internal medicine and professor of rheumatology at the University of Pisa (Italy), who presented the findings at the international congress. The questionnaire appears to be able to identify patients that should be referred for further assessment," he said. Dr. Bombardieri's conclusion is based on administration of the questionnaire to 139 SLE patients, 58 of whom had been previously diagnosed with NPSLE. The screening tool contains 27 questions for patients to answer about their CNS and psychiatric health. A few questions are yes/no answers. The majority have "always," "often," "sometimes," and "never" answers. The questions are weighted for scoring purposes. "It is very simple and requires about 8 minutes to complete. We have been using the questionnaire but have not yet validated it," said Dr. Maria Mosca, also of the University of Pisa. This is the first such screening tool developed for NPSLE. To the best of her knowledge, said Dr. Mosca. To validate the questionnaire, patients with a score suggestive of NPSLE will be assessed for NPSLE according to recently published European League Against Rheumatism guidelines. The goal is to see if the survey over- or underestimates the findings at the international congress.

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See Screening page 6

Rheumatology News

Rheumatology

MAY/JUNE 2010

T Blockade Sens Risk for Heart Disease in RA

lowers serum NT-proBNP levels in availability, studies find.

MAHONEY risk and ventricular function in rheumatoid arthritis," said Dr. Mike Medical Science. The study measured serum NT-proBNP at baseline and after 16 weeks of biweekly abataceptab treatment, without heart failure new reported (Ann. Rheum. Dis. 2010 April 7; [doi:10.1136/ard.2009.119412]).

After week 16, the investigators observed an approximately 10% reduction in NT-proBNP levels, providing biological evidence that TNF-alpha blockade does not worsen ventricular function in patients with RA who do not have preexisting heart failure, and supporting epidemiologic findings that indicate it may reduce overall cardiovascular risks in these patients, he explained. The results also add weight to the accumulating evidence that inhibits TNF-alpha in the cardiovascular system associated with RA, and support the beneficial effect of blocking TNF-alpha in non-rheumatoid heart failure. In a separate study, Dr. Mahoney and colleagues sought to assess the functional effects of anti-TNF-alpha therapy on the brains of depressed patients with RA, and determined that TNF-alpha blockade mediates altered serotonin transporter availability and induces an improvement in depression measures. "This is critically important," Dr. Mike Medical Science page 2

RA relapse rate is low in children with juvenile idiopathic arthritis (JIA) who use on methotrexate for 12 months after drug remission. 10

Significant lupus flare short of the usual flare target remains 12

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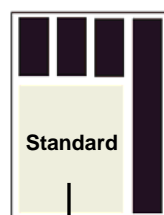
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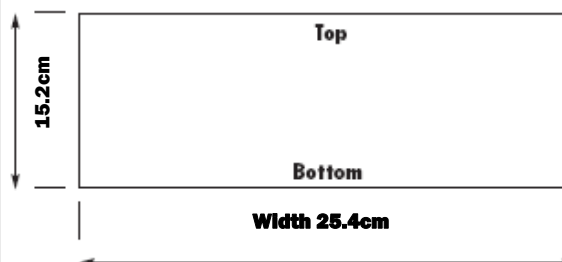
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