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EARLY THERAPEUTIC INTERVENTION FOR PRE-RHEUMATOID ARTHRITIS (PRE-RA) PATIENTS SIGNIFICANTLY REDUCES RISK OF RA

Research supports newly launched EULAR campaign: "Don't Delay, Connect Today"

Madrid, Spain, 14 June 2017: The results of a meta-analysis presented today at the Annual European Congress of Rheumatology (EULAR) 2017 press conference has demonstrated that early therapeutic intervention in patients with so-called "pre-rheumatoid arthritis" (pre-RA) significantly reduces the risk of the occurrence of rheumatoid arthritis (RA) in these patients at 52 weeks or more.¹

Recent progress in the understanding of RA pathogenesis has led to growing interest in the concept of pre-RA, which is defined as undifferentiated arthritis or very early RA, a clinical stage in which very early intervention could be more efficacious.^{2,3,4}

"Our review of the available clinical data supports the rationale for early treatment in these patients," claimed lead author Dr. Stephane Hilliquin, from the Pitié Salpêtrière University Hospital, Paris, France. "In those studies where pre-RA patients received active treatment, there was a significant reduction in the risk of occurrence of RA at 52 weeks or more," he said. "Although there was no statistically significant difference in the absence of disease progression as seen on X-ray between those taking active treatments or placebo due to the disease being at such an early stage."

"Our data nicely complements the newly launched EULAR campaign: 'Don't Delay, Connect Today', which is emphasising the importance of early intervention in the treatment of people with rheumatic and musculoskeletal diseases through early diagnosis and early referral," added Dr. Hilliquin. "However, the benefit / risk balance and feasibility of early aggressive treatment of pre-RA in clinical practice will still need further assessment," he concluded.



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From 595 abstracts, 9 randomised controlled trials (8 related to undifferentiated arthritis; 1 to very early RA) were deemed eligible for analysis, including 2 from congress abstracts. Together these studies provided a total population of 1,156 patients, with weighted mean age of 45.8 ± 15.2 years, mean symptom duration of 16.2 ± 12.6 weeks; and $66.0 \pm 17.7\%$ were female. The occurrence of RA at week 52 was available in 6 studies and at Week 120 in 1 additional study (a total of 800 patients). Early therapeutic intervention in these pre-RA patients included methylprednisolone, methotrexate, TNF-blocker, abatacept or rituximab.

A systematic literature review was performed following Cochrane guidelines using the terms 'undifferentiated arthritis' or 'very early rheumatoid arthritis' (VERA) associated with 'therapy' or 'treatment', and was limited to randomised controlled trials published in English over the last five years. In addition to searching the PubMed, Embase and Cochrane databases, the review included EULAR and American College of Rheumatology congress abstracts from the last two years.

Two independent readers extracted data using a standardised form covering study quality, patient status at baseline, type of intervention, and disease characteristics over time, as well as the occurrence of RA.

Abstract Number: OP0011

-ENDS-

NOTES TO EDITORS:

For further information on this study, or to request an interview with the study lead, please do not hesitate to contact the EULAR congress Press Office in the Goya Room at the IFEMA, Madrid during EULAR 2017 or on:

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About Rheumatic and Musculoskeletal Diseases

Rheumatic and musculoskeletal diseases (RMDs) are a diverse group of diseases that commonly affect the joints, but can also affect the muscles, other tissues and internal organs. There are more than 200 different RMDs, affecting both children and adults. They are usually caused by problems of the immune system, inflammation, infections or gradual deterioration of joints, muscle and bones. Many of these



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diseases are long term and worsen over time. They are typically painful and limit function. In severe cases, RMDs can result in significant disability, having a major impact on both quality of life and life expectancy.

About 'Don't Delay, Connect Today!'

'Don't Delay, Connect Today!' is a EULAR initiative that unites the voices of its three pillars, patient (PARE) organisations, scientific member societies and health professional associations - as well as its international network - with the goal of highlighting the importance of early diagnosis and access to treatment. In Europe alone, over 120 million people are currently living with a rheumatic disease (RMD), with many cases undetected. The 'Don't Delay, Connect Today' campaign aims to highlight that early diagnosis of RMDs and access to treatment can prevent further damage, and also reduce the burden on individual life and society as a whole.

About EULAR

The European League Against Rheumatism (EULAR) is an umbrella organisation which represents scientific societies, health professional associations and organisations for people with rheumatic and musculoskeletal diseases throughout Europe. EULAR aims to reduce the burden of rheumatic and musculoskeletal diseases on individuals and society and to improve the treatment, prevention and rehabilitation of rheumatic and musculoskeletal diseases. To this end, EULAR fosters excellence in education and research in the field of rheumatology. It promotes the translation of research advances into daily care and fights for the recognition of the needs of people with musculoskeletal diseases by the governing bodies in Europe through advocacy action.

To find out more about the activities of EULAR, visit: www.eular.org

References

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