DISEASE REMISSION ASSOCIATED WITH 80% REDUCTION IN RISK OF CARDIOVASCULAR OUTCOMES IN PATIENTS WITH RHEUMATOID ARTHRITIS

Among traditional risk factors, type II diabetes was significantly associated with both cardiovascular outcomes and pre-clinical cardiovascular disease.

**Madrid, Spain, 12 June 2019:** The results of a study presented today at the Annual European Congress of Rheumatology (EULAR 2019) demonstrate that remission in patients with rheumatoid arthritis is associated with an 80% reduction in risk of cardiovascular outcomes.

Rheumatoid arthritis is a chronic inflammatory disease that affects the joints, causing pain and disability. Patients with rheumatoid arthritis have an increased risk of premature death compared with the general population, mainly due to cardiovascular disease.

“The heightened risk of cardiovascular disease in patients with rheumatoid arthritis is in large part a consequence of uncontrolled inflammation. By demonstrating that remission of rheumatoid arthritis is associated with a reduction in cardiovascular complications, these results really emphasise the importance of more effective control of disease, beyond symptom management alone,” said Professor John D. Isaacs, Chairperson of the Abstract Selection Committee, EULAR.

The study analysed data from 797 patients with rheumatoid arthritis over three years and found that patients in remission had an 80% reduced risk of clinical cardiovascular disease, defined as heart attack, congestive heart failure, or stroke (Odds Ratio (OR):0.20, 95% Confidence Interval (CI): 0.09-0.95, p=0.041). The authors also demonstrated a 75% reduced risk of pre-clinical cardiovascular disease in patients in remission, defined as lesions on arteries detected by ultrasound (OR:0.25, 95% CI: 0.11-0.56, p=0.001).

The study also looked at traditional cardiovascular risk factors and the analysis identified type II diabetes as being significantly associated with both cardiovascular outcomes, clinical (OR:6.21, 95% CI:2.19-17.71, p=0.001) and pre-clinical cardiovascular disease (OR:4.50, 95% CI:1.74-11.62, p=0.002). In addition, pre-clinical cardiovascular disease was significantly associated with high blood pressure (OR:2.03, 95% CI:1.04-4.14, p=0.042), ACPA (OR:2.36, 95% CI:1.19-4.69, p=0.002) and mean values of CRP during follow-up (OR:1.07, 95%CI:1.03-1.14, p=0.040).

---

* ACPA, Anti-Citrullinated Protein Antibodies
† CRP, C-Reactive Protein
“Our study supports the idea that systemic inflammatory processes and more traditional cardiovascular risk factors work together to increase the cardiovascular risk in patients with rheumatoid arthritis,” said Dr. Piero Ruscitti, University of L’Aquila, L’Aquila, Italy. “This is important because it highlights the need for the effective coordination of care between rheumatologists, internists, cardiologists and primary-care physicians to optimise management of cardiovascular risk in patients with rheumatoid arthritis.”

This three-year, prospective, observational study included patients who were initially part of the GIRRCS cohort study which assessed the cardiovascular risk profile of consecutive patients with rheumatoid arthritis admitted to Italian Rheumatology units during 2015. The median age was 60 and 82.7% were female. The median rheumatoid arthritis disease duration was 8.35 years, 70.9% showed rheumatoid factor and 55.7% ACPA in their blood. The BMI was 27.21±4.05, 33% were smokers, 49.3% had high blood pressure and 12.3% had type II diabetes. Remission was reached and maintained in 42.6% of patients.1

Abstract number: OP0090

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 Press Office:

Email: eularpressoffice@ruderfinn.co.uk
Telephone: +44 (0) 20 7438 3084
Twitter: @EULAR_Press
EULAR TV: YouTube.com/EULARorg

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 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.4

About EULAR
The European League against Rheumatism (EULAR) is the European umbrella organisation representing scientific societies, health professional associations and organisations for people with RMDs. EULAR aims to reduce the burden of RMDs on individuals and society and to improve the treatment, prevention and rehabilitation of RMDs. To this end, EULAR fosters excellence in education and research in the field of rheumatology. It promotes the translation

4 Gruppo Italiano di Ricerca in Reumatologia Clinica e Sperimentale
of research advances into daily care and fights for the recognition of the needs of people with RMDs by the EU institutions through advocacy action.

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

References


