

Arthritis medications reduce the risk of heart attacks and strokes

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Patients prescribed drugs to treat rheumatoid arthritis could be at a reduced risk of heart attacks and strokes, according to a study published today in the open access journal *Arthritis Research & Therapy*.

An international team of researchers led by Antonio Naranjo of the University of Las Palmas de Gran Canaria, Spain, and colleagues in Argentina, Europe, and the USA have analyzed data from the QUEST-RA (Quantitative Patient Questionnaires in Standard Monitoring of Patients with Rheumatoid Arthritis) study. From this study, including 4,363 patients from 48 sites in 15 countries, the team has examined the causes and effects of rheumatoid arthritis, as well as the potential benefits of medications.

Rheumatoid arthritis is a known risk factor for hardening of the arteries and so can lead to stroke and heart attacks occurring in sufferers ten years earlier than in people without the condition. However, earlier studies have shown that treating rheumatoid arthritis with disease-modifying anti-rheumatic drugs (DMARDs), such as methotrexate, may reduce this risk. The current research quantifies this risk reduction in thousands of patients in the QUEST-RA study.

Naranjo and colleagues found that risk, when adjusted for age, sex, disease activity, and traditional risk factors such as lack of exercise, smoking, diabetes, and high cholesterol levels, correlated strongly with the use of drugs to treat rheumatoid arthritis. Taking methotrexate – the most widely used DMARD – for just one year for example was found to

be associated with an 18% reduction in risk of heart attack and an 11% decrease in risk of stroke, the researchers say.

"Our study provides further support of the influence of both traditional and RA specific risk factors in the development of cardiovascular events, especially heart attack" the researchers conclude, "As assessed by this study, the risk was lower with the prolonged use of methotrexate, sulfasalazine, glucocorticoids, leflunomide and TNF- α blockers."

In an accompanying editorial, Dr Ronald van Vollenhoven of Karolinska Institute, Sweden, reviews the research article. "The possibility that antirheumatic therapy decreases the risk for cardiovascular complications is tantalizing," writes the author. "The current study, while not exactly proving this point, adds a further measure of support to the concept, and suggests that it must now be formally addressed.

Source: BioMed Central

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