

Arthritis research shows better management more important than new drugs

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Although there has been an increase in the number of new arthritis treatments in recent years, the best results will come from more effective use of the drugs we have. Research published today in BioMed Central's open access journal *Arthritis Research and Therapy* investigates the effectiveness of available arthritis drugs and concludes that better management is the most important factor.

Isidoro González-Alvaro from the Hospital Universitario de la Princesa, Spain, led a team of researchers who studied the treatment of 789 patients over four years between 2000 and 2004. He said, "Our work shows that the treatment of rheumatoid arthritis at tertiary hospitals in Spain has improved from the year 2000. It is likely that better management of available drugs, mainly methotrexate, has been learned during the last decade - along with the clinical development of most biologic agents."

The management of rheumatoid arthritis (RA) has changed a great deal over the last 10 years. The development of biologic therapies, as well as the rigorous clinical trials that have demonstrated their effectiveness, have probably contributed to this change. However, according to González-Alvaro, "In our study, we did not observe the amazing halt of radiological progression described in clinical trials."

When used outside trials, the effectiveness of new drugs may differ, since patients included in clinical trials are on average younger, have less comorbidity, and show greater disease activity than real-life patients. In

order to ascertain the real-life effectiveness of new RA medication, the authors studied RA patients in terms of disease activity, disability and radiological progression in the period after the Spanish launch of Leflunomide and the TNF antagonists. They write, "The most relevant finding of our work is that disease activity in RA has improved, independently of the availability of new therapies, in patients with severe and mild disease."

The authors conclude, "It is clear that we need specific markers of RA severity that allow us to select adequate patients for early biologic treatment in order to improve their therapeutic response, as well as their functional outcome. These tools may also help to improve cost-effectiveness of these drugs avoiding unnecessary prescriptions."

Source: BioMed Central

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