Antirheumatic drugs have minor effect on preeclampsia risk

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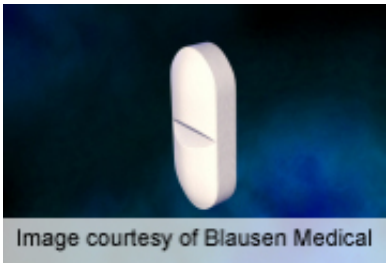

The use of a disease-modifying antirheumatic drug during pregnancy is rare and is associated with a nonsignificant increase in the risk for preeclampsia in women with autoimmune disease, according to a study published in the November issue of *Arthritis Care & Research*.

(HealthDay)—The use of a disease-modifying antirheumatic drug (DMARD) during pregnancy is rare and is associated with a nonsignificant increase in the risk for preeclampsia in women with autoimmune disease, according to a study published in the November issue of *Arthritis Care & Research*.

Kristin Palmsten, of the Harvard School of Public Health in Boston, and associates compared the risk for preeclampsia among 44,786 British Columbia women with and without autoimmune diseases, who were past users (study drug dispensing before pregnancy) and continuous users (use before and during the first 20 gestational weeks). Risks were compared for users of DMARDs, corticosteroids, and nonsteroidal anti-

inflammatory drugs (NSAIDs).

The researchers found that DMARDs were dispensed to 0.1 percent of women during pregnancy. For past users, the incidence of preeclampsia was 2.3 percent for DMARDs, 2.7 percent for corticosteroids, and 2.9 percent for NSAIDs. For continuous users, compared with past users, there was a nonsignificant increase in the relative risk of preeclampsia for DMARD users. The delivery year-adjusted relative risk was 2.02 for women with systemic lupus erythematosus (SLE) compared to those without autoimmune disease. Exclusion of antimalarials attenuated the DMARD results and, on restriction of the analysis to women with autoimmune disease, the delivery-year adjusted relative risk was 0.95 (95 percent confidence interval, 0.25 to 3.55).

"We observed a two-fold increased risk of preeclampsia among women with SLE and a nonsignificant increase in risk in DMARD users," the authors write. "The DMARD and preeclampsia association was attenuated when antimalarials were excluded and null when restricted to women with autoimmune disease, which suggests the association is likely due to greater autoimmune disease severity in DMARD users."

Several authors disclosed financial ties to the pharmaceutical industry.

More information: Abstract
Full Text (subscription or payment may be required)

effect-preeclampsia.html