

Rheumatism drug also effective at half dose

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The treatment of moderately active rheumatoid arthritis with the tumour necrosis factor inhibitor Etanercept achieves excellent success in more than 80 per cent of patients. With this method, the success can be maintained at half of the drug dose just as effectively as with the full dose. These are the latest findings of a study led by Josef Smolen, Head of the Department of Rheumatology at the MedUni Vienna, which has just been published in the top journal *Lancet*. Says Smolen: "This finding underpins on the one hand the tremendous successes that can be achieved with the drugs that are available today, and on the other paves the way for the healthcare system to achieve excellent potential savings with reduced drug burdens for patients who have achieved good

treatment successes."

Between 50,000 and 80,000 Austrians are affected by [rheumatoid arthritis](#) (chronic polyarthritis), an inflammatory rheumatic condition that causes severe disabilities. It usually affects people between the ages of 40 and 60. Its symptoms include pain, stiffness and even destruction of the affected joints.

"Treating each patient costs between Euro 10,000 and 20,000 a year," explains the researcher and Head of the University Department of [Internal Medicine](#) III and the 2nd Medical Department at Hietzing Hospital, which represented Austria in this international study. A lower dose also means that the risk of possible [adverse side effects](#) can be reduced.

The multi-centre Preserve study involved 604 patients who had long-term but moderately active rheumatoid arthritis and who were given treatment with 50 milligrams of [Etanercept](#) a week - plus Methotrexate - and who, after nine months, noted a significant improvement in terms of achieving a low level of disease activity. The treatment was then continued in a "double-blind" manner either at the same dose, namely 50 mg of Etanercept (with continuation of the [Methotrexate](#)), with Etanercept discontinued or at half of the Etanercept dose.

It was discovered that discontinuing the drug very frequently caused a flare-up of the disease, which indicates that treatment needs to be continued and should not be stopped. However, in patients who were given only half of the dose of the rheumatoid drug, the low level of disease activity was achieved as consistently as in the patients who were continuing to take the full dose. Says Smolen: "This study is the first controlled study of its kind and has given us new insights into the long-term treatment of patients with long-term rheumatoid arthritis."

The Head of the Vienna District Health Insurance Fund, Ingrid Reischl, is also delighted by the results of the study: "A lower probability of side effects for patients with lower costs for the social insurance. What more could I wish for? I'm grateful to Professor Smolen for his research and would like to encourage all scientists as well as the pharmaceutical industry to continue their research in this direction. We want the best possible medical care for insured Austrians, and it is because we need to be able to provide this, that these types of research results are so important."

More information: Smolen, J. et al., Maintenance, reduction, or withdrawal of etanercept after treatment with etanercept and methotrexate in patients with moderate rheumatoid arthritis (PRESERVE): a randomised controlled trial. *Lancet*.

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