

The effect on work loss of different treatments for rheumatoid arthritis

July 1 2013

Treatment with a biological agent was not superior to conventional treatment in terms of the effect on work loss over 21 months in patients with early rheumatoid arthritis (RA) who responded insufficiently to methotrexate, according to a report published by *JAMA Internal Medicine*.

The introduction of biological [tumor necrosis factor](#) inhibitors has improved the treatment of RA but at a substantial cost, according to the study background.

From a [randomized clinical trial](#), Jonas K. Eriksson, M.Sc., of the Karolinska Institutet, Sweden, and colleagues measured monthly sick leave and disability pension days in patients who did not achieve low disease activity after three to four months of methotrexate therapy. The patients were divided into groups to receive additional biological treatment with [infliximab](#) or conventional combination treatment with sulfasalazine plus [hydroxychloroquine](#). Of 204 eligible patients, 105 were assigned to biological and 99 to conventional treatment.

The baseline average work loss was 17 days per month in both groups. The average changes in work loss at 21 months were -4.9 days per month in the biological and -6.2 days per month in the conventional treatment group, according to the study results.

"Our analysis showed that early and aggressive treatment in methotrexate-resistant patients not only stops the trend of increasing work loss days, as

in patients with mainly established RA, but partly reverses it. However, we did not find any difference between treatment arms, indicating that the significantly improved disease control associated with infliximab treatment over a one-year period and the better radiological results after two years did not translate into less work loss," the study concludes. "The substantially higher cost of infliximab relative to conventional treatment needs to be weighed against the greater incidence of short-term adverse events leading to discontinuation of conventional treatment."

More information: JAMA Intern Med. Published online July 1, 2013.
[doi:10.1001/jamainternmed.2013.7801](https://doi.org/10.1001/jamainternmed.2013.7801)

Provided by The JAMA Network Journals

Citation: The effect on work loss of different treatments for rheumatoid arthritis (2013, July 1)
retrieved 23 April 2024 from
<https://medicalxpress.com/news/2013-07-effect-loss-treatments-rheumatoid-arthritis.html>

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