

Persistent pain shows up inefficiency of current psoriatic arthritis (PsA) treatment

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The results of two studies presented today at the Annual European Congress of Rheumatology (EULAR) 2017 press conference have highlighted limitations in the current treatment of patients with Psoriatic Arthritis (PsA).

In the first study, analysis of real world patient reported data has shown that self-reported pain is common among PsA patients despite treatment with currently available biologic therapies. Severe pain was associated with greater impairment of health-related quality of life, physical function, ability to engage in activities and productivity at work.

In a second study, the presence of comorbidities in PsA patients, such as cardiovascular diseases, diabetes, and depression, was associated with higher baseline disease activity, an increased risk of discontinuing anti-TNF treatment and a reduced rate of clinical response.

Need for PsA treatments which provide fast and sustained pain relief

Patients with PsA receiving traditional biologic treatment (mainly anti-TNF) for three or more months voluntarily completed questionnaires providing information on their self-reported intake of non-prescription pain medication, work status, health-related quality of life, impairment in physical function, and impairment in work productivity and activity.

Responses to the pain section of the SF36 questionnaire, a 36-item, patient-reported survey of patient health, showed that despite treatment more than one-third (36.8%) were experiencing severe pain and just under one-third (30%) moderate pain. More severe pain was associated with increased use of prescription non-steroidal anti-inflammatory drugs (NSAIDs) ($p=0.0026$) and opioids ($p=0.0065$), as well as non-prescription pain medication (p

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