

Infliximab Break Safe for Most Early RA Patients

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FROM ANNALS OF THE RHEUMATIC DISEASES

Approximately 80% of patients with early rheumatoid arthritis can discontinue infliximab for at least 1 year with no ill effects, according to data from 104 patients.

“Even temporary cessation can benefit both the individual patient and, given the high costs of TNF blockers, society as a whole,” said Dr. M. van den Broek of Leiden University Medical Center, the Netherlands, and colleagues.

To determine the duration of decreased disease activity after discontinuing infliximab, they conducted a post hoc analysis of data from the Dutch Behandel Strategieën study, a multicenter, randomized, single-blind trial comparing four treatment strategies in RA patients who had not previously received disease-mod-

(84% overall) regained a DAS of 2.4 or less within 3 months of reintroducing infliximab, the researchers noted.

Radiographs of joints before and after discontinuation of infliximab were available for 90 patients. These images showed no increase in joint damage progression in the year after discontinuation of infliximab, compared with the previous year.

At the time of infliximab cessation, the mean DAS was 1.3 and the median symp-

tom duration was 23 months. The median infliximab treatment was 11 months.

Independent risk factors for infliximab reintroduction were identified as being treatment duration of 18 months or longer, the presence of a shared epitope, and smoking, judging from findings from a multivariate analysis.

“The rate of serious infections was higher after the reintroduction of infliximab compared with during the initial

treatment period or the period of infliximab cessation,” the researchers noted. But the difference could reflect patient selection, longer duration of symptoms, or more severe RA, they said.

The study was limited in part by patient selection and by the lack of shared epitope data for all patients, but the findings suggest that infliximab can be discontinued for at least 1 year in 80% of early RA patients, the researchers said. ■

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ifying antirheumatic drugs (DMARDs).

In the post hoc analysis, 104 adult RA patients discontinued infliximab when their disease activity score (DAS) was 2.4 or less for 6 months. The follow-up period ranged from 14 to 103 months, with a median of 7 years. The patients' average age was 56 years, and 65% were women (Ann. Rheum. Dis. 2011;70:1389-94).

After cessation of infliximab, the DAS remained at 2.4 or less in 43 of 77 patients (56%) initially treated with infliximab and in 11 of 27 patients (41%) who were in a delayed infliximab treatment group.

In 50 patients (34 from the initial infliximab treatment group and 16 from the delayed infliximab group), the DAS increased above 2.4 over a median of 17 months, and infliximab was reintroduced. But 27 of the 34 patients in the initial treatment group and 15 of the 16 patients in the delayed treatment group

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