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IN BRIEF

COMPLEMENTARY AND ALTERNATIVE THERAPY

No benefit from acupuncture for chronic knee pain

In a study in patients aged ≥ 50 years with moderate or severe chronic knee pain, neither laser acupuncture nor needle acupuncture was effective for improving pain or function. The trial allocated 282 community volunteers to treatment with needle acupuncture ($n = 70$), laser acupuncture ($n = 71$), sham laser acupuncture ($n = 70$) or no acupuncture ($n = 71$) by family physician acupuncturists. Pain, as measured on a 1–10 numeric rating scale, and physical function, as measured by the Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC), did not differ between the laser acupuncture, needle acupuncture and sham acupuncture groups after 12 weeks of treatment. Compared with no acupuncture, needle and laser acupuncture resulted in modest improvements in pain at 12 weeks but these differences were not maintained at 1 year.

Original article Hinman, R. *et al.* Acupuncture for chronic knee pain—a randomized clinical trial. *JAMA* 312, 1313–1322 (2014)

CONNECTIVE TISSUE DISEASES

Primigravida is a risk factor for SLE flare

A retrospective analysis of 120 pregnant women with systemic lupus erythematosus (SLE) identified first pregnancy as a risk factor for flare of disease activity during pregnancy. The investigators identified 47 episodes of flare (relapse rate 37.9%), the most common manifestations of which were renal, joint, cutaneous and haematological. Flare of disease activity during pregnancy was associated with increased frequency of pre-eclampsia and preterm delivery. Primigravida was associated with an increased risk of any type of SLE flare during pregnancy (OR 2.3, 95% CI 0.99–5.52, $P = 0.05$), whereas the main risk factors for renal flare included primigravida (OR 3.6, 95% CI 1.19–11.3, $P = 0.02$) as well as disease activity prior to pregnancy (OR 3.7, 95% CI 0.97–14.1, $P = 0.05$), and previous renal disease (OR 5.8, 95% CI 1.95–17.6, $P = 0.001$).

Original article Saavedra, M. A. *et al.* Primigravida is associated with flare in women with systemic lupus erythematosus. *Lupus* doi:10.1177/0961203314552116

SPONDYLOARTHROPATHIES

Therapy influences herpes zoster risk in patients with PsA

The risk of herpes zoster in patients with psoriatic arthritis (PsA) is influenced by a number of factors, according to a retrospective cohort study of 3,128 patients. A total of 182 herpes zoster events were recorded in the database between 2002 and 2013. Grouping of patients with PsA according to treatment type revealed that the crude incidence rate (IR) of herpes zoster episodes was highest in those treated with anti-TNF agents in combination with conventional DMARDs (IR 17.86, 95% CI 10.91–27.58), compared with patients treated with no DMARDs (IR 7.36, 95% CI 5.41–9.79), conventional DMARDs alone (IR 9.21, 95% CI 7.5–11.21) or anti-TNF agents alone (IR 8.64, 95% CI 4.84–14.26). Combination therapy with DMARDs and anti-TNF agents was also associated with an increased risk of herpes zoster events in multivariate analysis (HR 2.37, 95% CI 1.32–4.22), as were age (HR 1.01, 95% CI 1.00–1.02) and treatment with steroids (HR 1.08, 95% CI 1.04–1.13).

Original article Zisman, D. *et al.* Psoriatic arthritis treatment and the risk of herpes zoster. *Ann. Rheum. Dis.* doi:10.1136/annrheumdis-2013-205148