of this type demonstrate the potential to aid differentiation between SLE and other closely related autoimmune disorders.

Original article Mahler M *et al.* (2007) Effect of dsDNA binding to SmD-derived peptides on clinical accuracy in the diagnosis of systemic lupus erythematosus. *Arthritis Res Ther* [doi:10.1186/ar2266]

Group-educational program for patients with RA is not effective

Educational programs for patients with rheumatoid arthritis (RA) that aim to improve health status by use of cognitive behavioral strategies have been tested and seem to provide short-term beneficial effects, although evidence of long-term benefit is lacking. Giraudet-Le Quintrec *et al.* conducted a prospective, randomized, controlled trial to evaluate the effect of an 8-week multidisciplinary educational program on patients with RA.

In total 1,242 patients with RA were invited to enrol; 102 of these were ineligible for the study and 932 refused to participate. The extensive time commitment required to complete the program was a major reason for refusal. The remainder were randomly allocated usual medical care ($n = 104$) or the former plus the educational program ($n = 104$); both groups received leaflet information on RA. The educational program involved group sessions (6–10 outpatients) 6 h every week for 8 weeks. Sessions included information on RA and its treatment, nutritional advice, instruction on exercises to do at home, and social and psychological resources. The educational program was not effective—the mean change in Health Assessment Questionnaire score from baseline to 12 months was not significantly different between the two groups. Nevertheless, improvements were seen at 12 months in measures of coping, satisfaction, and knowledge.

The authors suggest that future studies test intensive but less time-consuming programs on patients with RA who have less knowledge of the disease than their patient population. They also question whether the Health Assessment Questionnaire was sensitive enough to assess this nonpharmacological trial.

Original article Giraudet-Le Quintrec J-S *et al.* (2007) Effect of a collective educational program for patients with rheumatoid arthritis: a prospective 12-month randomized controlled trial. *J Rheumatol* **34:**1684–1691

Pain in rheumatoid arthritis: assessment, predictors and treatment

Researchers from the US have shown that the visual analog pain scale (VAS) is superior to the Medical Outcomes Study Short Form-36 Health Survey (SF-36) scale for assessing pain in patients with rheumatoid arthritis (RA).

Wolfe and Michaud used data from the National Data Bank for Rheumatic Diseases to quantitatively answer questions that will help clinicians and researchers to understand what causes pain, what factors affect the degree of pain suffered, and how the pain can be relieved.

Data from 12,090 patients with RA were analyzed, with demographic variables, treatments, functional status and pain scores recorded. The results showed that, compared with the SF-36 scale, the VAS pain scale was more strongly correlated with every clinical variable measured. The minimal clinically important change for pain in observational studies was defined as 0.5–1.1 units, and the most appropriate cutoff point for an acceptable level of pain was ≤2.0. The level of pain did not change significantly with age or disease duration, but demographic characteristics had a stronger influence, with greater levels of pain recorded in women and ethnic minorities with RA, and lower levels in college graduates with this disease. Overall, 45% of pain variance could be explained by demographic characteristics combined with the regional site of pain. The results also showed that anti-tumor necrosis factor therapy reduced pain by an average of 0.51 units, satisfying the minimal clinically important change criterion.

Original article Wolfe F and Michaud K (2007) Assessment of pain in rheumatoid arthritis: minimal clinically significant difference, predictors, and the effect of anti-tumor necrosis factor therapy. *J Rheumatol* **34:** 8–18

CpG oligonucleotides can prevent RA in a mouse model

Infections have been associated with the onset of rheumatoid arthritis (RA) in humans, and pathogen-associated molecules can promote RA development in mouse models. While