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IN BRIEF

RHEUMATOID ARTHRITIS

Tocilizumab shows promise in RA pilot study

A pilot study in 22 women with active rheumatoid arthritis has indicated that treatment with the anti-IL-6 antibody tocilizumab might provide beneficial effects on bone remodeling. Two monthly infusions led to increased osteoprotegerin (OPG) to RANKL (receptor activator of nuclear factor κ B ligand) ratios, decreased Dickkopf-1 levels and increased sclerostin levels. OPG:RANKL increases were larger in the patients who achieved remission compared with those who did not.

Original article Terpos, E. *et al.* Early effects of IL-6 receptor inhibition on bone homeostasis: a pilot study in women with rheumatoid arthritis. *Clin. Exp. Rheumatol.* (in press)

FIBROMYALGIA

Cognitive behavior therapy reduces pain catastrophizing

The results of a randomized controlled trial performed in Spain suggest that cognitive behavior therapy (group sessions comprising cognitive restructuring and coping strategies) is more effective than recommended pharmacologic therapy (pregabalin and duloxetine) in terms of key fibromyalgia outcomes, such as function and quality of life, and also mediators of treatment effects, such as pain catastrophizing and acceptance.

Original article Alda, M. *et al.* Effectiveness of cognitive behaviour therapy for the treatment of catastrophisation in patients with fibromyalgia: a randomized controlled trial. *Arthritis Res. Ther.* **13**, R173 (2011)

THERAPY

Adalimumab reduces the long-term need for back surgery in patients with sciatica

Two subcutaneous injections of adalimumab in patients with severe acute sciatica can significantly reduce the chance of them requiring back surgery within 3 years, according to a study in *Annals of the Rheumatic Diseases*. 23 (41%) of 56 patients who received treatment underwent discectomy during the 3-year follow-up period, compared with 15 (56%) of 27 patients who received placebo ($P=0.04$).

Original article Genevay, S. *et al.* Adalimumab in acute sciatica reduces the long-term need for surgery: a 3-year follow-up of a randomised double-blind placebo-controlled trial. *Ann. Rheum. Dis.* doi:10.1136/annrheumdis-2011-200373

OSTEOPOROSIS

Parathyroid hormone versus bisphosphonates: which provides greater BMD improvements in osteoporosis?

In a meta-analysis of data from 7 studies and a total of 944 patients with osteoporosis, treatment with parathyroid hormone (PTH) was shown to provide significantly greater improvements in bone mineral density (BMD) at the spine and hip compared with bisphosphonate therapy. However, BMD at the distal radius improved to a greater extent following bisphosphonate therapy than with PTH treatment.

Original article Shen, L. *et al.* Parathyroid hormone versus bisphosphonate treatment on bone mineral density in osteoporosis therapy: a meta-analysis of randomized controlled trials. *PLoS ONE* **6**, e26267 (2011)