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IN BRIEF

BONE

Fracture prevention with high-dose vitamin D

Seemingly, fracture risk in people aged ≥ 65 years is reduced by vitamin D supplementation, but only moderately and only at high doses (≥ 800 IU per day oral vitamin D). Data from 11 double-blind, randomized controlled trials were pooled in an analysis that included 31,022 people with 1,111 incident hip fractures and 3,770 nonvertebral fractures. Those in the highest quartile of intake had a 30% lower risk of hip fracture than those taking placebo (HR 0.70; 95% CI 0.58–0.86) and a 14% lower risk of any nonvertebral fracture (HR 0.86; 95% CI 0.76–0.96).

Original article Bischoff-Ferrari, H. A. *et al.* A pooled analysis of vitamin D dose requirements for fracture prevention. *N. Engl. J. Med.* 367, 40–49 (2012)

SPONDYLOARTHRITIS

ABILITY of adalimumab in nonradiographic axial SpA

12-week data from the ABILITY-1 trial of adalimumab in patients fulfilling the Assessment of Spondyloarthritis international Society (ASAS) criteria for axial spondyloarthritis, with an inadequate response to NSAIDs and without radiographic disease, show effective control of disease activity, reduced inflammation and better quality of life in those taking the drug, compared with placebo. At week 12, 36% of the adalimumab group ($n=91$) reached an ASAS 40% response, as opposed to 15% of the placebo group ($n=94$).

Original article Sieper, J. *et al.* Efficacy and safety of adalimumab in patients with non-radiographic axial spondyloarthritis: results of a randomised placebo-controlled trial (ABILITY-1). *Ann. Rheum. Dis.* doi:10.1136/annrheumdis-2012-201766

RHEUMATOID ARTHRITIS

Tocilizumab switch as good as adding to methotrexate

In 512 adults with active rheumatoid arthritis (RA) despite methotrexate therapy, a randomized switch to tocilizumab (8 mg/kg every 4 weeks) plus placebo produced comparable clinical outcomes at 24 weeks to those of adding tocilizumab to ongoing methotrexate therapy. Both strategies produced meaningful reductions in disease activity, whereas increases in alanine aminotransferase levels were more frequent with the combined DMARDs.

Original article Dougados, M. *et al.* Adding tocilizumab or switching to tocilizumab monotherapy in methotrexate inadequate responders: 24-week symptomatic and structural results of a 2-year randomised controlled strategy trial in rheumatoid arthritis (ACT-RAY). *Ann. Rheum. Dis.* doi:10.1136/annrheumdis-2011-201282

CRYSTAL ARTHRITIS

Gout prevalence increases in line with BMI

In an analysis of data from the US National Health and Nutrition Examination Surveys (1988–1994 and 2007–2010), the prevalence of gout was 1–2% in participants with normal BMI, 4–5% in those with class I obesity, and 5–7% in people with class II or class III obesity, irrespective of gender or ethnicity. After adjusting for serum uric acid, for a US adult of 1.76 m in height, an increase of 1 BMI unit is associated with a 5% greater likelihood of gout.

Original article Juraschek, S. P. *et al.* Body mass index, obesity, and prevalent gout in the United States in 1988–1994 and 2007–2010. *Arthritis Care Res.* doi:10.1002/acr.21791