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## IN BRIEF

### RHEUMATOID ARTHRITIS

#### GO-MONOtherapy with golimumab for RA

Golimumab monotherapy (50 mg or 100 mg every 4 weeks) effectively reduces the signs and symptoms of rheumatoid arthritis (RA) in patients with active disease despite DMARD therapy, according to results from a phase II/III trial in 316 Japanese patients. At week 14, the proportion of patients achieving  $\geq 20\%$  improvement in the American College of Rheumatology criteria were markedly greater in the golimumab groups (50 mg, 50.5%; 100 mg, 58.8% than the placebo group (19.0%).

**Original article** Takeuchi, T. *et al.* Golimumab monotherapy in Japanese patients with active rheumatoid arthritis despite prior treatment with disease-modifying antirheumatic drugs: results of the phase 2/3, multicentre, randomised, double-blind, placebo-controlled, GO-MONO study through 24 weeks. *Ann. Rheum. Dis.* doi:10.1136/annrheumdis-2012-201796

### THERAPY

#### NSAID use early in pregnancy does not increase risk of congenital malformations

Of 110,783 pregnancies during 1998–2009 in southern Israel, 5,267 mothers were exposed to NSAIDs (nonselective cyclooxygenase [COX] and selective COX2 inhibitors) during their first trimester. Intrauterine exposure to NSAIDs did not increase the risk of major congenital malformations in general; however, exposure to selective COX2 inhibitors was associated with an increased risk of musculoskeletal malformations (adjusted OR 3.39; 95% CI 1.37–8.34).

**Original article** Daniel, S. *et al.* Major malformations following exposure to nonsteroidal antiinflammatory drugs during the first trimester of pregnancy. *J. Rheumatol.* doi:10.3899/jrheum.120453

### RHEUMATOID ARTHRITIS

#### Safety profile of tocilizumab confirmed

24-week data from a phase IIIb US study have confirmed the safety and tolerability of tocilizumab (either 8 mg/kg alone or 4 mg/kg or 8 mg/kg in combination with nonbiologic DMARDs) for patients with moderate-to-severe rheumatoid arthritis. The adverse event profile of tocilizumab in the 866 patients analysed was similar to previous results, with the most common serious complication being infection.

**Original article** Weinblatt, M. E. *et al.* Tocilizumab as monotherapy or in combination with nonbiologic DMARDs: a 24-week results of an open-label, clinical practice study (ACT-STAR). *Arthritis Care Res.* doi:10.1002/acr.21847

### OSTEOARTHRITIS

#### No association between mtDNA variants and osteoarthritis

Components that underlie the heritability of osteoarthritis (OA) are yet to be defined. Contrary to previous results, an analysis of two large genome-wide association study cohorts across a total of 7,393 patients with OA and 5,122 controls has found no association between OA and 48 maternally inherited mitochondrial DNA (mtDNA) variants; accordingly, OA phenotypic subgroups were not associated with mtDNA haplogroups.

**Original article** Hudson, G. *et al.* No evidence of an association between mitochondrial DNA variants and osteoarthritis in 7393 cases and 5122 controls. *Ann. Rheum. Dis.* doi:10.1136/annrheumdis-2012-201932