

RHEUMATOID ARTHRITIS

Role for infliximab uncertain as targeted DMARD combinations achieve effective disease control

Results from two trials in DMARD-naïve patients with early rheumatoid arthritis (RA) suggest that using dynamic, target-adjusted regimens of traditional DMARDs and corticosteroids can achieve unprecedented levels of disease control that are not improved by initial addition of infliximab, or by replacement of corticosteroids with infliximab. Albeit conducted over different time periods, using distinct regimens and working to separate targets, the studies provide reassurance that informed use of relatively inexpensive treatments can be effective and well tolerated in early RA.

In the NEO-RACo study, Vappu Rantalaïho *et al.* published 5-year data following on from the 2-year Finnish RA combination treatment (FIN-RACo) trial, which used methotrexate, sulfasalazine, hydroxychloroquine and low-dose prednisolone, as needed, with or without the addition of infliximab for the first 6 months. With a goal of ACR remission,

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treatment strategies became unrestricted for the 99 participants after the initial obligatory 2-year, three-DMARD combination period (during which some drug substitutions were permitted).

In the other trial, the 18-month infliximab as induction therapy in early RA (IDEA) study, Paul Emery and colleagues compared regimens of methotrexate plus either infliximab or high-dose methylprednisolone in a total of 112 patients. Radiographic and clinical outcomes were assessed.

The NEO-RACo results—87% of all patients with initially highly active RA were in DAS28 remission at 5 years—are the best of any long-term follow-up study in patients with early RA to date.

No significant differences were observed between the groups; furthermore, concerns of potential serious adverse events with the intensive DMARD regimen were not realized. Similarly, IDEA found good disease control and little structural progression in both groups. Although differences might have become evident in a larger cohort, their magnitude would be of questionable clinical impact.

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Original articles Rantalaïho, V. *et al.* Targeted treatment with a combination of traditional DMARDs produces excellent clinical and radiographic long-term outcomes in early rheumatoid arthritis regardless of initial infliximab. The 5-year follow-up results of a randomised clinical trial, the NEO-RACo trial. *Ann. Rheum. Dis.* doi:10.1136/annrheumdis-2013-203497 | Nam, J. L. *et al.* Remission induction comparing infliximab and high-dose intravenous steroid, followed by treat-to-target: a double-blind, randomised, controlled trial in new-onset, treatment-naïve, rheumatoid arthritis (the IDEA study). *Ann. Rheum. Dis.* doi:10.1136/annrheumdis-2013-203440