

*Nature Reviews Rheumatology* 10, 196 (2014); published online 25 February 2014;  
 doi:10.1038/nrrheum.2014.27;  
 doi:10.1038/nrrheum.2014.28;  
 doi:10.1038/nrrheum.2014.29;  
 doi:10.1038/nrrheum.2014.30

## IN BRIEF

### OSTEOARTHRITIS

#### Overnight custom splinting reduces OA finger pain

Few cost-effective interventions are available for hand osteoarthritis (OA) affecting the distal interphalangeal joint (DIP); however, short-term, night-time joint splinting could offer a safe and simple solution. In a prospective study of 26 patients with painful, deforming DIP-joint hand OA, a custom splint worn nightly reduced 'average pain' and 'worst pain' at 3 months compared with baseline values. Extension lag deformity (that is, loss of full extension) also improved from baseline, and in comparison with matched contralateral joints that were not splinted.

**Original article** Watt, F. E. *et al.* Night-time immobilization of the distal interphalangeal joint reduces pain and extension deformity in hand osteoarthritis. *Rheumatology (Oxford)* doi:10.1093/rheumatology/ket455

### CONNECTIVE TISSUE DISEASES

#### Vitamin D replacement improves cutaneous lupus

The risk of having vitamin D deficiency is more than threefold higher in patients with cutaneous lupus erythematosus (CLE) than in healthy individuals (OR 3.47, 95% CI 1.79–6.69), according to a new study ( $n=177$ ). However, the same study also showed that treatment of vitamin D insufficiency with oral vitamin D3 therapy for 1 year was associated with improvements in disease severity in 60 patients with CLE, according to patient and physician assessments, compared with 25 untreated patients with CLE.

**Original article** Cutillas-Marco, E. *et al.* Vitamin D and cutaneous lupus erythematosus: effect of vitamin D replacement on disease severity. *Lupus* doi:10.1177/0961203314522338

### INFLAMMATION

#### Tocilizumab effective for refractory Still's disease

In a retrospective, open-label study of 34 patients with adult-onset Still's disease unresponsive to multiple therapies, treatment with tocilizumab (either as monotherapy or in combination with synthetic DMARDs) showed rapid and sustained efficacy. Improvements in clinical manifestations including joint symptoms, cutaneous rash and fever, and in laboratory markers of disease activity such as erythrocyte sedimentation rate and serum levels of C-reactive protein, were apparent 1 month from the start of therapy and were sustained after 1 year of therapy.

**Original article** Ortiz-Sanjuán, F. *et al.* Efficacy of tocilizumab in refractory adult-onset Still's disease: multicenter retrospective open-label study of 34 patients. *Arthritis Rheum.* doi:10.1002/art.38398

### RHEUMATOID ARTHRITIS

#### Mortality rates in RA have not improved over past 20 years

Data from the Norfolk Arthritis Registry in the UK reveal that, after adjustment for trends in the general population, mortality for patients with rheumatoid arthritis (RA) did not change between 1990 and 2011. The analysis included 2,519 adults with early RA ( $\geq 2$  swollen joints for  $\geq 4$  weeks). Compared with the general population of Norfolk, all-cause and cardiovascular standard mortality ratios were higher in patients with RA, particularly in those who were autoantibody-positive.

**Original article** Humphreys, J. H. *et al.* Mortality trends in patients with early rheumatoid arthritis over 20 years: results from the Norfolk Arthritis Register. *Arthritis Care Res. (Hoboken)* doi:10.1002/acr.22296