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IN BRIEF

OSTEOARTHRITIS

GWAS identifies risk variants for severe hand OA

A genome-wide association study has revealed sequence variants that confer an increased risk of severe osteoarthritis (OA) of the hand. A group of common variants at 15q22 (represented by rs12907038[G]; frequency 50.7%, odds ratio [OR] 1.51, $P=3.99 \times 10^{-10}$), located within the *ALDH1A2* gene, were associated with hand OA in the discovery set of Icelandic individuals (n=2,230); the association was replicated consistently in five additional European sample sets. The investigators also describe a rare variant at the 1p31 locus (frequency 0.02%, OR=50.6, $P=9.8 \times 10^{-10}$), which in one Icelandic family with a large number of cases segregated with severe hand OA and generalized OA. The rare variant was also found in other European populations, with 6 of the 15 carriers identified known to have hand or knee OA.

Original article Styrkarsdottir, U. *et al.* Severe osteoarthritis of the hand associates with common variants within the *ALDH1A2* gene and with rare variants at 1p31. *Nat. Genet.* doi:10.1038/ng.2957

CRYSTAL ARTHRITIS

Poorly controlled diabetes linked to decreased gout risk

In patients with type 2 diabetes mellitus (T2DM), the risk of incident gout is markedly decreased among those with poorly controlled blood glucose levels (as indicated by an increased A1C level), according to the results of an observational study using the UK-based Clinical Practice Research Datalink. From the base population of patients in UK general practices with T2DM, 7,536 cases of incident gout were matched with the same number of gout-free controls. Those with an A1C level <7% were at greater risk of gout than those with an A1C level of 7.0–7.9 (OR 0.79, 95% CI 0.72–0.86), 8.0–8.9 (OR 0.63, 95% CI 0.55–0.72) or \geq 9% (OR 0.46, 95% CI 0.40–0.53). The risk of gout was also found to decrease in association with increasing duration of T2DM.

Original article Bruderer, S. G. *et al.* Poorly controlled type 2 diabetes mellitus is associated with a decreased risk of incident gout: a population-based case-control study. *Ann. Rheum. Dis.* doi:10.1136/annrheumdis-2014-205337

SPONDYLOARTHRITIS

Golimumab safe and effective in Chinese patients with AS

In a phase III trial of Chinese patients with active ankylosing spondylitis, more patients treated with the TNF inhibitor golimumab (50 mg subcutaneously every 4 weeks; n = 108) than with placebo (n=105) met the primary endpoint of ≥20% improvement in Assessment of SpondyloArthritis international Society criteria (ASAS20) after 14 weeks (49.1% vs 24.8%, P<0.001). ASAS20 response rates were also higher in the golimumab group at week 24 (50.0% vs 22.9%, P<0.001). Golimumab-treated patients reported greater mean improvements in physical function and range of motion from baseline to week 14 than placebo-treated patients, and these outcomes improved further through week 52. Rates of adverse events in the golimumab and placebo groups were similar at week 16 (30.6% vs 31.4%) and week 24 (32.0% vs 34.3%); 41.2% of golimumab-treated patients reported an adverse event through week 56.

Original article Bao, C. et al. Safety and efficacy of golimumab in Chinese patients with active ankylosing spondylitis: 1-year results of a multicentre, randomized, double-blind, placebo-controlled phase III trial. *Rheumatology (Oxford)* doi:10.1093/ rheumatology/keu132