Achieving Comprehensive Disease Control in Long-standing or Early Rheumatoid Arthritis Patients Treated With Adalimumab Plus Methotrexate vs. Methotrexate Alone

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METHODOLOGY

• All patients had active RA, 68 (65%) of whom also had early RA.
• Patients were randomized at baseline demographics and disease characteristics.
• Methotrexate-naive patients were randomly assigned to receive adalimumab or placebo, in addition to weekly placebo or methotrexate.
• The primary endpoint was the proportion of patients achieving LDA or remission at 1 year, as defined by the EULAR criteria.
• The rescue efficacy arm of the early RA study was carried out in parallel with the maintenance of LDA or remission, normal physical function, and radiographic progression.

RESULTS

• All patients had active RA with a mean disease duration of 8 years (range 0.6–30)
• The percentage of patients achieving LDA or remission at 1 year was significantly higher in the early RA arm compared to the maintenance of LDA or remission, normal physical function, and radiographic progression.

CONCLUSIONS

• Treatment with adalimumab in early RA significantly improved disease activity and physical function compared to placebo.
• The results of this study provide evidence that adalimumab may be a useful addition to methotrexate therapy in patients with early RA.