

Dr. van Lieshout, *et al* reply

To the Editor:

We thank Dr. Shin and colleagues for their careful reading of our case report discussing a patient who developed Graves' disease during treatment with anti-tumor necrosis factor- α (anti-TNF- α) for an active rheumatoid arthritis¹. They refer to another recent report², in which transient hyperthyroidism was observed during treatment with anti-TNF- α . Together, these observations suggest a potential link between TNF- α and Graves' disease that remains to be elucidated.

In our opinion, current reports suggesting an association between anti-TNF- α therapy and Graves' disease do not yet justify firm conclusions or recommendations regarding thyroid-function monitoring during treatment with anti-TNF- α . However, we agree with Shin and colleagues that further studies are warranted to investigate the role of TNF- α in Graves' disease and subsequently the potential effect of neutralizing TNF- α on the development of Graves' disease. When such an association has been demonstrated, monitoring thyroid function during anti-TNF- α treatment may be a necessary addition to the routine (laboratory) tests that are currently advised to prevent adverse events of anti-TNF- α treatment.

ANTOINE W.T. van LIESHOUT, MD; MARJONNE C.W. CREEMERS, MD, PhD, Department of Rheumatology; TIMOTHY R.D.J. RADSTAKE, MD, PhD, Department of Rheumatology, Department of Internal Medicine; LAMMY D. ELVING, MD, PhD, Department of Internal Medicine; PIET L.C.M. van RIEL, MD, PhD, Department of Rheumatology, Radboud University Nijmegen Medical Centre, Nijmegen, The Netherlands. Address reprint requests to Dr. M. Creemers, Department of Rheumatology, Radboud University Nijmegen Medical Centre, PO Box 9101, Nijmegen, 6500 HB, The Netherlands. E-mail: m.creemers@reuma.umcn.nl

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