

Video abstract transcript

Changes in Tumor Necrosis Factor Inhibitor Drug Survival in Patients With Rheumatoid Arthritis, Psoriatic Arthritis, and Ankylosing Spondylitis Over 15 Years

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Slide 1:

Hello, my name is Ingrid Visman and I am with Reade, part of the Amsterdam Rheumatology and immunology Center in Amsterdam, the Netherlands, and I would like to introduce you to our paper, entitled: changes in TNF inhibitor drug survival in patients with rheumatoid arthritis, psoriatic arthritis and ankylosing spondylitis over 15 years.

Slide 2:

Since the introduction of TNF inhibitors for patients with rheumatic diseases, the clinical outcomes for these patients have improved dramatically. However, a substantial proportion of patients discontinued TNF treatment. Patient characteristics and treatment options have changed in major ways over time. For example, currently rheumatologists strive for minimal disease activity or even remission for these patients, and in recent years, tapering strategies have taken on more and more importance. But these changes may not apply equally to patients with rheumatoid arthritis, psoriatic arthritis or ankylosing spondylitis.

Slide 3:

As drug survival is a marker for the effect of treatment in routine care, our objective for this study was to study the changes in their retention of the first biological DMARD therapy for patients with rheumatic diseases over a period of 15 years.

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To this end, we assessed patient and disease characteristics and drug survival of patients starting TNF therapy between 2004, when these drugs first became widely available in routine care in the Netherlands, up to 2019. All patients were treated in routine care at Reade, the Netherlands. The patients were divided into three groups: Early, starting in 2004 through 2008, Intermediate, starting in 2009 through 2013, and Recent, starting in 2014 through 2018.

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We included 1938 patients in our outpatient clinic at Reade. 33% had the diagnosis rheumatoid arthritis, 19% psoriatic arthritis and 19% ankylosing spondylitis. 65% of these patients were female. As shown in Figure 1, the drug survival decreased significantly over time. This decrease was mostly caused by the decrease in the most Recent group. There was no difference found between the Early and Intermediate groups.

Slide 6:

As for the different rheumatic diseases, Figure 2 shows that rheumatic arthritis patients have a much shorter drug survival time than patients with psoriatic arthritis or ankylosing spondylitis.

Slide 7:

In conclusion, patients with rheumatoid arthritis, psoriatic arthritis and ankylosing spondylitis currently starting TNF therapy have discontinued TNF therapy much sooner than the patients starting in the past. This is especially true for patients with rheumatoid arthritis, most likely due to the availability of alternatives and treated target protocols aiming at low disease activity or even remission.

Slide 8:

As patients often expect they will be using these drugs for years, or even life-long, it is important for rheumatologists to keep in mind the likelihood that the patient may be switching fairly soon. This is especially true for rheumatoid arthritis patients. It is therefore important to manage patients expectations accordingly.