in the signs and symptoms of psoriatic arthritis.

Commenting on the approval, Alvin Wells (Rheumatology and Immunotherapy Center, WI, USA) said, “The approval of oral Otezla is significant for patients living with psoriatic arthritis, which is a debilitating, painful disease that has a significant effect on a patient’s day-to-day activities. Otezla offers physicians and patients a meaningful new treatment option, with the potential to benefit psoriatic arthritis patients irrespective of prior treatment.”

Philip Mease from the University of Washington (DC, USA) added, “The approval of an oral therapy with a novel mechanism of action for patients with psoriatic arthritis offers a different approach to patient care.”

— Written by Dominic Chamberlain

Source: Celgene press release, OTEZLA® (apremilast) - first oral therapy approved by the US Food and Drug Administration for the treatment of adults with active psoriatic arthritis: http://ir.celgene.com/releasedetail.cfm?releaseid=834687

Rheumatoid arthritis patients at increased risk of developing kidney disease

A Mayo Clinic (MN, USA) study has observed rheumatoid arthritis (RA) patients to have a higher likelihood of developing chronic kidney disease when compared with the general population.

Researchers studied 813 RA patients and compared them with 813 patients without the disease. Over a 20-year period, individuals with RA were observed to have a one in four chance of developing chronic kidney disease, compared with a one in five risk for the general population.

“That might not seem like a lot, but in fact that’s quite a big difference, and it has important implications for the course of RA and for the management of the disease,” explained senior study author Eric Matteson (Mayo Clinic).

Factors contributing to the increased risk in RA patients include corticosteroid use, increased erythrocyte sedimentation rate, obesity, hypertension and dyslipidemia. There are currently no specific medical guidelines for the management of chronic kidney disease in RA; however, it is hoped that this research will increase clinician awareness of the issue and eventually lead to the creation of guidelines.

Matteson recommends physicians to be cautious when prescribing medicines for RA patients in order to reduce the risk of medicine-induced kidney disease. RA patients should have blood and urine tests conducted annually to detect kidney problems. Behavioral interventions, including blood pressure awareness, a low salt diet and avoidance of medications that are toxic to the kidneys, specifically nonsteroidal anti-inflammatories, should also be considered.

Further investigations are being planned to aid understanding of the factors contributing to kidney disease development in RA patients, with the hope of uncovering new interventions to reduce this risk.

— Written by Hannah Wilson


Predicting response: new study offers insight into which osteoarthritis patients will respond to NSAIDs

Results reported in a scientific poster today at the 30th Annual Meeting of the American Academy of Pain Medicine (AZ, USA) suggest that scientists can predict which osteoarthritis (OA) patients with neuropathic pain symptoms will respond to treatment with NSAIDs, by assessing the nervous system’s own capacity to regulate pain.

In the study, patients whose tests had indicated superior conditioned pain modulation (CPM) had less pain and fewer neuropathic symptoms at study’s end.

One of the investigators, Ajay D Wasan (University of Pittsburgh, PA, USA), noted that, “Clinically, these results indicate that neuropathic symptoms are very common in knee OA and that neuropathic processes, such as changes in conditioned modulation, predict