Many Patients Report RA Impairs Their Sexuality

BY BRUCE JANCIN
Denver Bureau

Amsterdam — Physicians have largely overlooked the sizable adverse impact rheumatoid arthritis often has on sexual activity, Ylva Helland said at the annual European Congress of Rheumatology.

Her survey of 1,041 Oslo-area patients with a median 14-year duration of rheumatoid arthritis (RA) showed that while 31% reported their disease had no impact upon sexual function, an equal percentage indicated RA had a major negative effect in this domain. Indeed, 21% of respondents said RA had a "considerable" adverse impact on their sexual function, another 7% reported their disease made sexual activity impossible, and 3% characterized sexual activity as nearly impossible, reported Ms. Helland, a research nurse at the University of Oslo.

The rest of the respondents, 38%, indicated that their disease had "little impact" on sexual activity. Patients who reported that RA had a large impact upon their sex life tended to have worse health status across the full spectrum of physical and psychological dimensions.

A greater impact of RA on sexual activity was reported by men, patients with less than 12 years of education, and those who reported higher levels of fatigue, she said at the congress sponsored by the European League Against Rheumatism. Ms. Helland and her coinvestigators received a EULAR/Abbott award honoring their study as one of the six best clinical studies presented at the meeting.

Injectable MTX Better Than Oral Form for RA

Amsterdam — In the first direct comparison of oral versus subcutaneous methotrexate for patients with active rheumatoid arthritis, the injectable formulation was significantly more effective, Dr. Jürgen Braun said at the annual European Congress of Rheumatology.

The multicenter study involved 384 patients, none of whom had previously taken methotrexate (MTX) or biologics. They were predominantly female. Mean age was 59 and mean time since diagnosis was 2 months, said Dr. Braun of Rheumazentrum Ruhrgebiet, Ruhr-University Bochum, Herne, Germany.

They were randomized to 15 mg oral MTX plus placebo injections or injectable MTX in the same dose plus dummy pills, once weekly, for 24 weeks. At week 16, patients receiving oral MTX could be switched to subcutaneous, and those receiving the injectable drug could have a dosage increase to 20 mg, he said.

A total of 78% of patients on subcutaneous MTX met the primary efficacy outcome of ACR20 response at 24 weeks, compared with 67% of those on oral MTX, Dr. Braun reported at the meeting, sponsored by the European League Against Rheumatism. This difference was statistically significant, as was the difference in percentages achieving ACR70 response (43% vs. 31%, respectively).

Remission, defined as a Disease Activity Score 28 less than 2.6, was reached by 34% of patients on the subcutaneous formulation, compared with only 26% of those on the oral drug, a statistically significant difference.

—Nancy Walsh

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