Topical May Be Oral Agent OA Alternative

BY NANCY WALSH

San Diego — A topical pain-relieving cream found to be safe and effective for knee osteoarthritis in a double-blind controlled study may offer a new approach to treatment that avoids the cardiovascular and gastrointestinal hazards of many oral agents, according to Dr. Thomas J. Schnitzer.

Topical civamide cream 0.075% (Winston Laboratories, Vernon Hills, Ill.) was tested in a multicenter study that included 695 patients with radiographically confirmed osteoarthritis who ranged in age from 40 to 71 years.

At baseline, all study participants had a Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) score greater than 9 (out of a total 20), despite treatment with NSAIDs or cyclooxygenase-2 inhibitors.

They were randomized to a regimen of civamide cream 0.075% to be applied three times daily, or a regimen of civamide cream 0.075% to be applied three times daily, or a control cream containing low-dose ketoprofen. Participants were advised to continue with the same dose of NSAIDs.

In the active treatment group, a reduction in their WOMAC joint pain scores was seen at 3 months. After 3 weeks of the active treatment was significant, at 82%, than after placebo, at 3.3%.

Rationale for Use

Studies of the mechanisms of action of a standard dose of rose hip powder showed that it lowered in vivo levels of C-reactive protein, from a mean of 8.25 mg/L to 6.67 mg/L. In addition, it reduced the intravascular migration rate of inflammatory polymorphonuclear lymphocytes (Inflammopharmacology 1999;7:63-8).

A proprietary formulation, Hyben Vital (Hyben Vital International, Lange- land, Denmark), has been available in Scandinavia for a decade. It is imported to the United States by EuroPharma, Green Bay, Wisc., and marketed as LitoZin.

The plants are a specific subspecies, Rosa canina, and are grown in Denmark and Sweden according to good agricultural practice. Com- puterized techniques ensure that temperatures during the drying process do not exceed 40°C. Numerous preclinical trials and clinical trials have demonstrated that Hyben Vital is well tolerated with few side effects among patients with osteoarthritis.

Early OA: The Danish Study

Hyben Vital was evaluated in a double-blind, placebo-controlled, crossover trial that included 94 outpatients with osteoarthritis (OA) who were recruited from the department of rheumatology at Copenhagen County Hospital Glostrup and from the Institute for Clinical Research, Kolding, Denmark.

The 54 women and 40 men were randomized to use of a 5% rose hip powder per day or match- ing placebo. Those who were using NSAIDs were advised to continue with the same dose throughout the trial, but they were encouraged to reduce their intake of analgesics such as acetaminophen (paracetamol) and opioids after the first 3 weeks of each study period.

The primary outcome measures were scores on the Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) and the number of patients that the researchers judged to have improved.

After 3 weeks of active treatment, WOMAC scores for joint pain declined from 33.7 to 29.4, which was a statistically significant result. After 3 weeks of placebo, scores increased from 33.7 to 35.3 (Scand. J. Rheuma- tol. 2005;34:302-8).

Similar, although nonsignificant, results were seen at 3 months.

The percentage of patients who experienced a reduction in their WOMAC joint pain scores after 3 weeks of active treatment was sig- nificantly higher, at 82%, than after placebo, at 49%. This 82% response rate was higher than has been reported in most studies evaluating herbal therapies, according to lead investigator Dr. Kai Winther, of the department of clinical biochemistry, Copenhagen County Hospital Gentofte.

The use of acetaminophen rescue medications after 3 weeks was significantly reduced in the active treatment group. Participants were advised to continue with the same dose of NSAIDs.

In another study, 100 patients with long-standing (2-12 years) OA who were not expected to do a trial,” he said.

BY TIMOTHY P. KIRN

Sacramento Bureau

San Diego — Wedged shoe insoles may do little for medial knee osteoarthritis, according to a recent study involving more than 100 patients.

“A 5-degree lateral wedge insole was not efficacious in people with medial knee osteoarthritis, according to lead investigator Dr. Winther hopes to undertake longer studies and also to investigate rose hip powder as prophylaxis for OA in a large population over a period of 5-10 years.

In an interview, Dr. Winther said he had ini- tiated a long-term follow-up study. Rose hips have long been a popular fruit in Scandin-avia for their vitamin C content, he said.

“My home, we would go out in the au- tumn and pick rose hips and use them in mar- malade for their vitamin C. If you had told me it would help prevent a cold or the flu, I would have believed you, but if you said it would help pain from OA, I wouldn’t have believed you. I heard about this for 5 years before I finally de- cided to do a trial,” he said.

—Nancy Walsh

Shoe Insoles Fail to Ease Osteoarthritis Knee Pain

BY NANCY WALSH

New York Bureau

Sacramento Bureau

In the Danish study, seven patients in each group dropped out of the study. Side effects of rose hip treatment such as diarrhea and constipation were few and comparable with those seen with placebo. The investigators noted that tests on healthy volunteers and patients taking warfarin had shown no involvement or effects on platelet aggregation or on the arachi- donic acid pathway, and suggested that this might explain the lack of adverse effects seen with drugs commonly used for OA.

In the Norwegian study, mild gastrointesti- nal distress in two patients in each group was the only adverse effect reported.

Long-term data are needed to ensure safety, however. Dr. Winther hopes to undertake longer studies and also to investigate rose hip powder as prophylaxis for OA in a large population over a period of 5-10 years.

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