

# IMPLEMENTATION OF A PROTOCOL FOR SELECTION OF BIOLOGICAL THERAPIES IN RHEUMATOLOGY

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## Background

Public health system in our Autonomous Community established a protocol for biological therapies (BT) in rheumatoid arthritis (RA), spondyloarthropathies (SAPs) and juvenile idiopathic arthritis (JIA).

## Purpose

To evaluate the implementation of the protocol of BT and to analyze the use of these therapies.

## Material and methods

### POPULATION ANALYZED:

- Patients who initiated treatment with BT
- Patients who switched the previous treatment with BT

### PERIOD OF STUDING:

12/05/2011 to 29/02/2012

**Collected data:** age, sex, diagnosis, drug used after protocol implementation, previous treatments and reasons for changing.

**Data Source:** medical records, pharmacy database.

**Statistical analysis:** SPSS 15.0.

## Levels of decision

### Rheumatoid arthritis

- 1<sup>st</sup> level → Infliximab or anti-TNF (Etanercept or Adalimumab)  
 2<sup>nd</sup> level → Tocilizumab or Abatacept or Rituximab  
 3<sup>rd</sup> level → Golimumab or Certulizumab

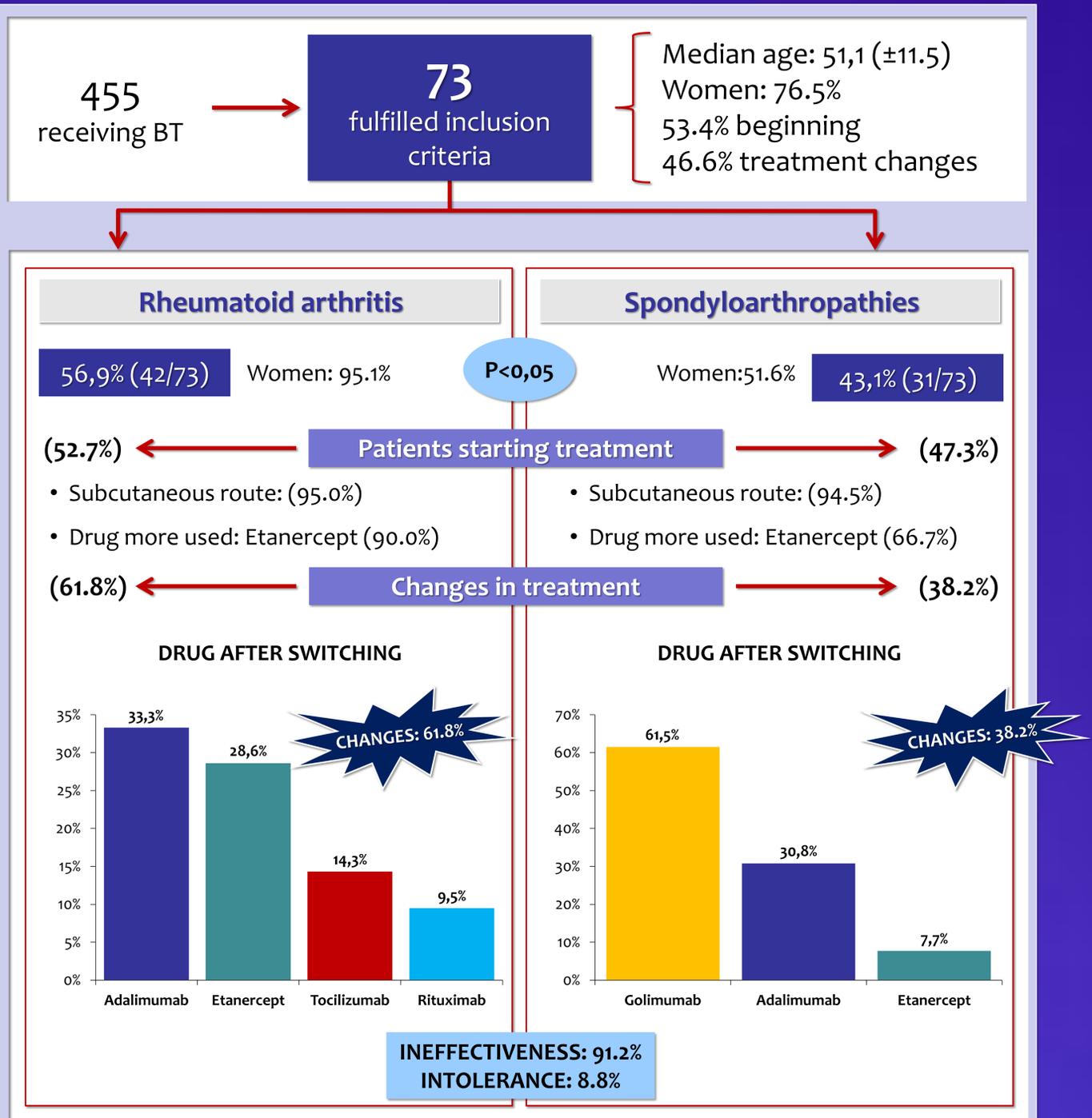
### Spondyloarthropathies

- 1<sup>st</sup> level → Infliximab or Etanercept or Adalimumab  
 2<sup>nd</sup> level → Golimumab  
 3<sup>rd</sup> level → Infliximab

### Juvenile idiopathic arthritis

- 1<sup>st</sup> level → Etanercept  
 2<sup>nd</sup> level → Adalimumab or Abatacept

## Results



## Conclusions

- The overall level of compliance with the protocol was high.
- The most widely prescribed drug in treatment naive patients was etanercept.
- Adalimumab was the most prescribed in patients who switched therapy.
- Lack of effectiveness was the main reason for changing therapy.