DRUG PERSISTENCE OF JAK INHIBITORS COMPARED TO BIOLOGIC DRUGS IN REAL-WORLD PRACTICE IN PATIENTS WITH RHEUMATOID ARTHRITIS

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Background and importance

JAK-inhibitors (JAKi) represent an effective choice to patients diagnosed with rheumatoid arthritis (RA). There is limited data available on real-use of JAKi.
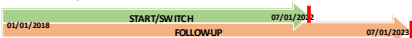
AIM

To compare persistence of JAKi, TNF-α inhibitor (TNFi) and non-TNF-α inhibitor (non-TNFi) drugs in patients with RA and reasons for treatment discontinuation.

MATERIAL & METHODS

Patients diagnosed with RA evaluated at the Rheumatology Interdisciplinary Committee of Biological Drugs that started or switched treatment with JAKi, TNFi and non-TNFi.

01/01/2018 — START/SWITCH — 07/01/2022
FOLLOW UP — 07/01/2023

Variables collected
- Age
- Sex
- Type of drug
- Prior biologics (naïve, second and third or higher line)
- Patient's chronicity level (Chronicity Strategy of Valencian Community ("0"=healthy individual to "4"=chronic patient of high complexity)
- Length of treatment
- Reason for discontinuation.

Outcome variable
Percentage of treatments that reached 12 months persistence estimated form the first to the last drug dispensation.

Data were collected from the electronic health and pharmacy dispensing records. Continuous variables were expressed as mean (SD), and categorical variables as absolute and relative frequency. Chi-square test and logistic regression was used to identify variables associated with persistence. Statistical significance was set at $p < 0.05$. Analysis was carried out with R-411.

RESULTS

Patients (n)	303
Women	75%
Age (years)	53 (16)
Chronicity level (n=177)	0	40 (11,7%)
	1	143 (41,7%)
	2	109 (31,8%)
	3	51 (14,8%)

No difference was found in persistence according to sex, age or chronicity level (p>0.01)

Treatment (n)	623
Treatment line	1st	284 (45,6%)
	2nd	146 (23,4%)
	3 rd or higher	193 (31,0)
Type	JAKi	156 (25,0%)
	TNFi	326 (52,4%)
	Non-TNFi	141 (22,6%)

Treatment line showed persistence differences: naïve 213 (75%), 2nd 81 (55.5%) and 3rd or higher 109 (56.5%). (p<0.01).

No difference was found in persistence among JAKi, TNFi and non-TNFi (p=0.06)

460 (73.8%) treatments finished at the end of follow-up:
- -Secondary failures: 199 (43.3%)
- -Side effects: 100 (21.7%)
- -Primary non-responders: 74 (16.1%)
- -Others: 50 (18.9%). No differences were found among according to type of therapy (p=0,48).

iJAK	TNFi	non-TNFi
69,2% (n=108)	66% (n=215)	56,7% (n=80)

CONCLUSION

In our hospital 12-months persistence and reasons for discontinuation among JAKi, TNFi and non-TNFi in patients with RA showed no difference.

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