

PERSISTENCE OF BIOLOGICAL TREATMENT WITH INFlixIMAB, ADALIMUMAB AND ETANERCEPT IN PATIENTS WITH SPONDYLOARTHROPATHY



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BACKGROUND

Although the use of infliximab, adalimumab and etanercept for the treatment of spondyloarthritis is widespread in clinical practice, there are no studies on its persistence over time.

PURPOSE

Estimate the persistence of treatment with infliximab, adalimumab and etanercept in patients diagnosed with spondyloarthritis receiving first biological treatment.

MATERIAL AND METHODS

Retrospective, observational study

Population

Patients diagnosed with SA who initiating first biological treatment with Infliximab, Adalimumab and Etanercept

Inclusion period

Since its commercialization in 1999, 2003 and 2006 respectively to June 2010

Study period

From first biological treatment to June 2010 (at least 5 years follow-up)

Persistence was defined as time (months) from the start of treatment until their suspension for dispensations periods higher than three months to include optimization.

Variables collected

- ✓ Age
- ✓ Sex
- ✓ Treatment start date
- ✓ Treatment suspension date
- ✓ Reason of suspension

- Failure (no response)
- Intolerance
- Clinical improvement/remission
- Patient preference
- Neoplasms/infections
- Others

Outcome variables

Overall and specific persistence for each treatment (medium y median)

Calculate

Kaplan-Meier survival curves Function

Statistic program: SPSS®

DEMOGRAPHIC VARIABLES (Population = 100 patients)

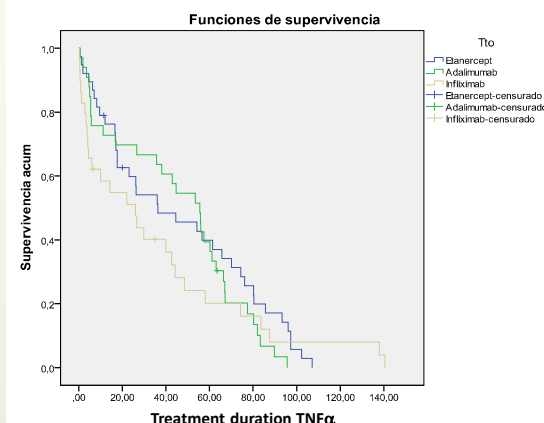
Variable	INFlixIMAB	ADALIMUMAB	ETANERCEPT
Patients (N)	29	33	38
Sex (men)	44,83 %	60,61 %	63,16 %
Age	50,57 (95%CI: 45,90-55,25)	54,63 (95%CI: 49,54-59,73)	52,58 (95%CI: 48,36-56,80)

OUTCOME VARIABLES: Persistence

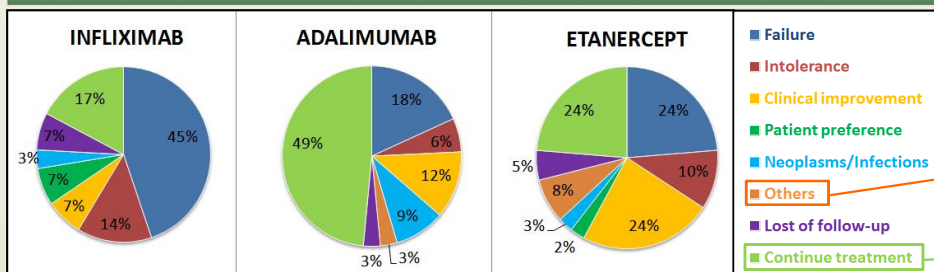
Median (months)	INFlixIMAB	ADALIMUMAB	ETANERCEPT
OVERALL persistence:	40,04 months (95%CI: 23,35-56,74)		
SPECIFIC persistence	25,99 (95%CI: 4,98-47,00)	55,49 (95%CI: 40,75-70,23)	36,33 (95%CI: 4,22-68,44)

RESULTS

Survival curves were compared using the log-rank function with no significant differences (p=0.592)



REASON OF SUSPENSION



OTHER REASONS OF SUSP.

Other reasons were chest pain in 1 patient with ADA and alcoholism, heart failure and inflammatory bowel disease in 3 patients with ETA.

CURRENTLY

There are 16 patients who continue treatment with ADA, 9 with ETA and 5 with INF.

CONCLUSION

The high overall persistence of these drugs, more than three years of median, makes us believe they are well tolerated and effective. A marked specific persistence with adalimumab (around 4 and a half years) is observed. However, no significant differences were found between them. The main reason for suspension was failure. Regarding clinical improvement/remission, etanercept had better results.