

RA patients with prior malignancy under treatment with biologics

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Conclusion

RA patients in daily rheumatologic care seem to receive biologic agents irrespective of prior malignancies and time that had passed since. Compared to patients under conventional DMARD treatment the rate for recurrent malignancies was similar in patients treated with biologic agents.

Objective

To investigate to which extent RA patients with a history of cancer receive biologic agents in 'real life'. To investigate which factors influence the treatment decision and analyse the safety of the different therapies regarding recurrences.

Patients

RA patients enrolled into the long-term observational prospective cohort study RABBIT between May 2001 and December 2006.

Inclusion criteria:

- age between 18 and 75 years
- age of onset of RA at least 16 years
- new prescription of etanercept, adalimumab, infliximab, or anakinra at study entry
- change of therapy (new DMARD or addition of another DMARD) after at least one DMARD failure (= control group)

Methods

At inclusion the treating physician completed a list of comorbidities for every patient. Current as well as prior malignancies were reported. For prior malignancies the date of occurrence was completed.

Results

Among 3446 patients included in the register with a start of a biologic agent and 1774 control patients a prior malignancy was reported in 123 patients. Patients with and without prior malignancy did not differ with regard to the activity of the disease at baseline. Nonetheless, patients with prior malignancy were older, had significantly less functional capacity, and had less often been treated with biologics before being included in the register (Tab. 1).

	Patients with a prior malignancy	Patients without prior malignancy	p
N	123	4997	
Age (mean SD)	63.6 (8.4)	54.4 (12.1)	<0.0001
Females (%)	70.7	78.4	0.047
DAS28 (mean SD)	5.6 (1.2)	5.5 (1.3)	0.282
FFbH (mean SD)	55.5 (22.6)	60.4 (22.9)	0.025
CRP (median (IQR))	18 (8 – 42.3)	15.0 (7 – 34)	0.146
BSG (median (IQR))	32 (17 – 50)	27 (14 – 44)	0.080
Disease duration (median (IQR))	9 (4 – 16)	8 (4 – 15)	0.286
Observation time (median (IQR))	2.4 (1.3 – 3.1)	2.4 (1.1 – 3.1)	0.611
Smoker	31.7	27.0	0.259
Ever treated with biologics (%)	7.6	14.0	0.045
Included in RABBIT with (%)			
Etanercept	23.6	24.4	0.835
Infliximab	4.9	11.7	0.019
Adalimumab	19.5	28.0	0.032
Anakinra	7.3	1.5	<0.0001
conv. DMARD	44.7	34.4	0.018

Table 1. Patient characteristics at study entry

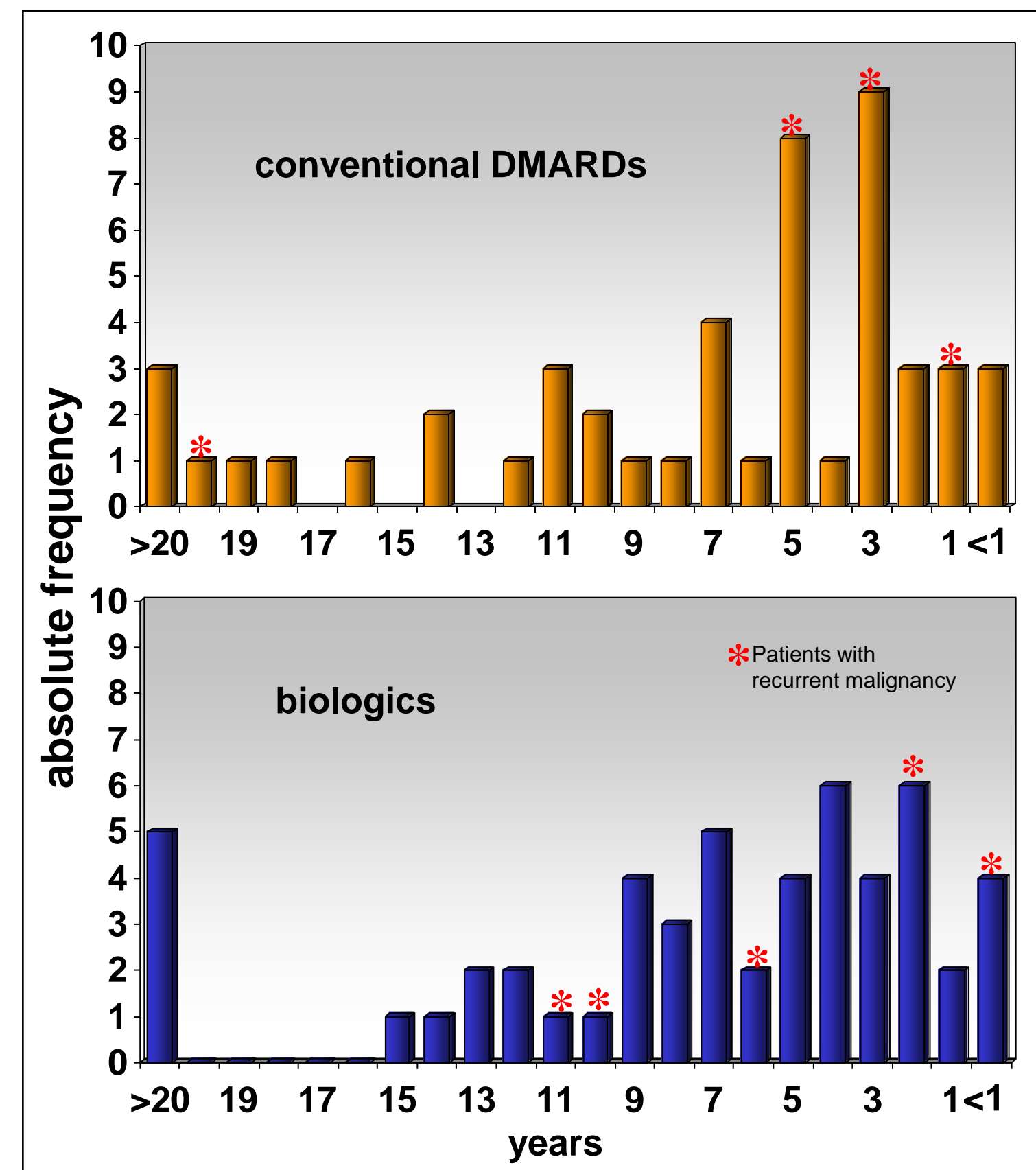


Figure 1. Duration from 1st malignancy until study entry

Time since onset of the prior malignancy did not influence the decision for a biologic treatment: mean time (in years) between prior malignancy and study entry was 7.6 (7.3). There was no significant difference between start of a biologic (median (IQR): 6 (3 – 9.5)) or conventional DMARD treatment (median: 5 (3 – 11)).

Recurrence of prior malignancy was observed in 9 patients (4m, 5f) after a median time of 8 years (IQR: 5 – 12).

Types of recurrent malignancies

Therapy at inclusion	Total	anti-TNF	Anakinra	Conv.DMARD
Recurrent malignancies	10	5 (3f,2m)	1 (m)	4 (2f, 2m)
Breast cancer	3	3 (f)	-	-
Bladder cancer	2	1 (m)	-	1 (f)
Liposarcoma	1	-	-	1 (m)
Signet-ring carcinoma	1	-	-	1 (f)
Lung cancer	1	-	1 (m)	-
Testicular cancer	1	1 (m)	-	-
Metastasis of unknown origin	1	-	-	1 (m)

Table 2. Recurrence of prior malignancy

Mean time (in years) for a recurrence after prior malignancy was 7.4 for patients under anti-TNF treatment, 8.8 for the patients that had received anakinra, and 9.0 for patients in the control group.

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