Two powerful drugs better than one for some RA patients

By ACSH Staff — August 28, 2013

A new prospective, randomized trial has shown that two-drug therapy for active rheumatoid arthritis (RA) is superior in efficacy to one.

The CAMEO trial, authored by Dr. Janet Pope of the University of Western Ontario in London, Canada, and colleagues, started with 205 RA patients who were on a disease-modifying drug, methotrexate (MTX). The subjects entering the trial had to be free of infection, and could not have taken the immunomodulating drug Enbrel (eternacept, ETN) nor any similar drug in the past. Subjects also had to have active RA as determined by an algorithm known as DAS28 (DAS stands for disease activity score). They were started on Enbrel while continuing to take methotrexate, the combination to last six months. At that point, half were randomly selected to keep on that same 2-drug regimen, while half were taken off MTX, continuing single-drug therapy with ETN.

In summary, those who stayed on the 2-drug protocol did significantly better than those who were on only ETN over the course of the following 6 to 12 month period. The overall DAS28 score fell by about 35 percent during the initial 6-month period; however, over the next 6-12 months, that score increased slightly in the ETN-only group, while the 2-drug group continued to experience a mild decline in activity score, the difference being about 23 percent better in the ETN/MTX group.

ACSH's Dr. Gilbert Ross, who had been a rheumatologist when in practice last century, had this perspective: It was only about 25 years ago, when I was still in practice, that the concept of immunosuppressive therapy in combinations similar to cancer chemotherapy was instituted for active, progressive RA. When active, RA is a cripper of no equal, painfully destroying joints and sometimes other tissues as well. I am glad to see that the combination of MTX and ETN continues to be effective even after months of treatment. Hopefully, more aggressive treatments will continue to reduce the toll of RA and allow patients to lead active and productive lives.