



Health Awareness

New Survey Shows Rheumatoid Arthritis Patients Often Do Not Find Relief



(NAPSA)—According to a new Harris survey, the vast majority of patients suffering from moderate to severe rheumatoid arthritis (RA) still experience frequent, often severe symptoms despite many years of therapy with multiple prescription drugs. RA is an autoimmune disease affecting more than 2 million Americans—predominantly women and often those in their 20s and 30s—in which the immune system mistakenly attacks the joints, causing inflammation and irreversible destruction of cartilage, tendons and bones. In more severe cases of RA, life expectancy can even be shortened by 10 to 15 years.

In the survey, 75 percent of patients reported experiencing daily pain, stiffness, swelling or fatigue related to their RA, and more than 70 percent rated these symptoms as moderate to severe, despite being treated with six different prescription RA drugs over 12 years, on average.

Nearly nine out of 10 patients in the survey said they would consider switching to a newer therapy that could provide longer periods of symptom relief, up to six months. In addition, almost 40 percent of patients who have switched treatments at least once because of lack of symptom relief would have preferred to switch their last treatment sooner. However, many hesitate to discuss inadequate symptom relief with their doctor because they have learned to cope with symptoms or have come to expect they will always have symptoms.

The survey also revealed a wide gap between patient and physician perceptions of the frequency and severity of RA symptoms, as well as satisfaction with some widely used RA therapies, including tumor necrosis factor (TNF) antagonists. For example,

almost 60 percent of patients reported they experience daily pain from RA, yet less than 30 percent of physicians reported that their patients experience daily pain. Additionally, while 45 percent of moderate-to-severe RA patients report they have asked their physician about other prescription RA medications, physicians report less than 20 percent of their patients have done so.

One patient who did not receive adequate symptom relief is Coleen O'Boyle, a 38-year-old schoolteacher and single mother of a 4-year-old daughter. After a visit to her podiatrist 12 years ago, Coleen was diagnosed with RA by a rheumatologist.

Coleen was referred to four different rheumatologists and was treated with anti-inflammatory drugs called NSAIDs (non-steroidal anti-inflammatory drugs). While NSAIDs may work for some patients, they did not give her the symptom control she was hoping for. She tried TNF antagonist therapies but her response was inadequate, as she continued to experience RA symptoms.

In early 2006, O'Boyle was referred to a physician who, after discussing possible risks and benefits, suggested she try Rituxan, an FDA-approved therapy for RA. After treatment with Rituxan and methotrexate, O'Boyle noticed a significant difference in her RA symptoms.

"Since being diagnosed, I've seen five rheumatologists and tried every drug possible," said O'Boyle. "Because I was vocal, I can now spend more active time with my daughter and my students. I strongly urge all RA patients to speak up about their symptoms and ask their doctor about other treatments if their symptoms are

not under adequate control."

Rituxan is approved in combination with methotrexate to reduce signs and symptoms in adult patients with moderately to severely active RA who have had an inadequate response to one or more TNF antagonist therapies. Rituxan may provide efficacy that lasts through six months in patients with persistent, active disease despite TNF therapy.

Unlike other treatments, Rituxan selectively targets only CD20+ B cells—not the entire immune system. Rituxan has more than 10 years of clinical experience across all indications and more than 1 million patient exposures.

Rituxan has an established safety profile. Rituxan can cause the following serious side effects, some of which could be life threatening: infusion reactions, tumor lysis syndrome, severe skin reactions and progressive multifocal leukoencephalopathy. Other serious side effects with Rituxan include hepatitis B virus reactivation, heart problems, infections, and stomach and bowel problems. Common side effects with Rituxan include fever, chills, shakes, itching, hives, sneezing, swelling, throat irritation or tightness and cough. These usually occur within 24 hours after the first infusion. Other common side effects include headache, nausea, upper respiratory tract infection and aching joints.

If you suffer from pain and other symptoms associated with RA, speak to your doctor if your treatment is not providing relief.

Learn More

For more information on RA, or a copy of the Rituxan full prescribing information, including Boxed Warning, please call (877) 474-8892 or visit www.rituxan.com.