



# General applicability of a new treat-to-target treatment strategy in Dutch patients with early Rheumatoid Arthritis: *results from the DREAM remission induction cohort II*

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## Conclusion

- Almost 80% of patients achieved their first remission within 12 months of follow-up
- Baseline patient- and clinical characteristics were poorly predictive of time to remission
- Together with the high proportion of responders, this provides additional evidence for the general applicability of T2T strategies in patients with early RA.

## Introduction

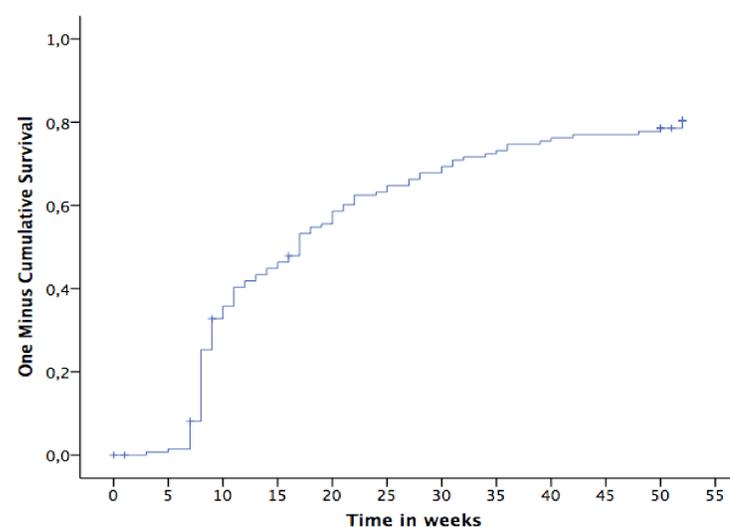
- Despite wide implementation of treat-to-target (T2T) strategies in rheumatoid arthritis (RA), a proportion of patients still fails to achieve early remission.
- This study aimed to identify baseline predictors of reaching remission in Dutch patients with early RA following a T2T strategy.

## Methods

- Baseline demographics, clinical and patient-reported outcome measures and one-year follow-up data were used from patients with early RA
- Survival analyses and simple and multivariable logistic regression analyses were used to examine remission rates and significant predictors of achieving remission.

## Results

- 137 patients from the DREAM registry were included
- After 1 year of follow-up, remission was reached at least once in 77.2% of the patients, and median time to first remission was 17 weeks.



- None of the examined baseline variables were significantly associated with achieving remission within 1 year.
- Lower ESR ( $p=0.007$ ), male gender ( $p=0.057$ ), and fewer tender joints ( $p=0.175$ ) were significantly or marginally associated with achieving fast remission within 17 weeks.
- In multivariable analysis, however, only ESR remained significantly predictive ( $p=0.006$ ).

## Patients in remission in $\leq 17$ weeks

Variable	OR	95% CI	p
ESR	0,978	0,963 – 0,994	0,006
Gender, female	0,506	0,245 – 1,045	0,066
TJC	0,958	0,904 – 1,016	0,153

Nagelkerke  $R^2 = 0.129$

