

Nye behandlingsmuligheter ved leddgikt

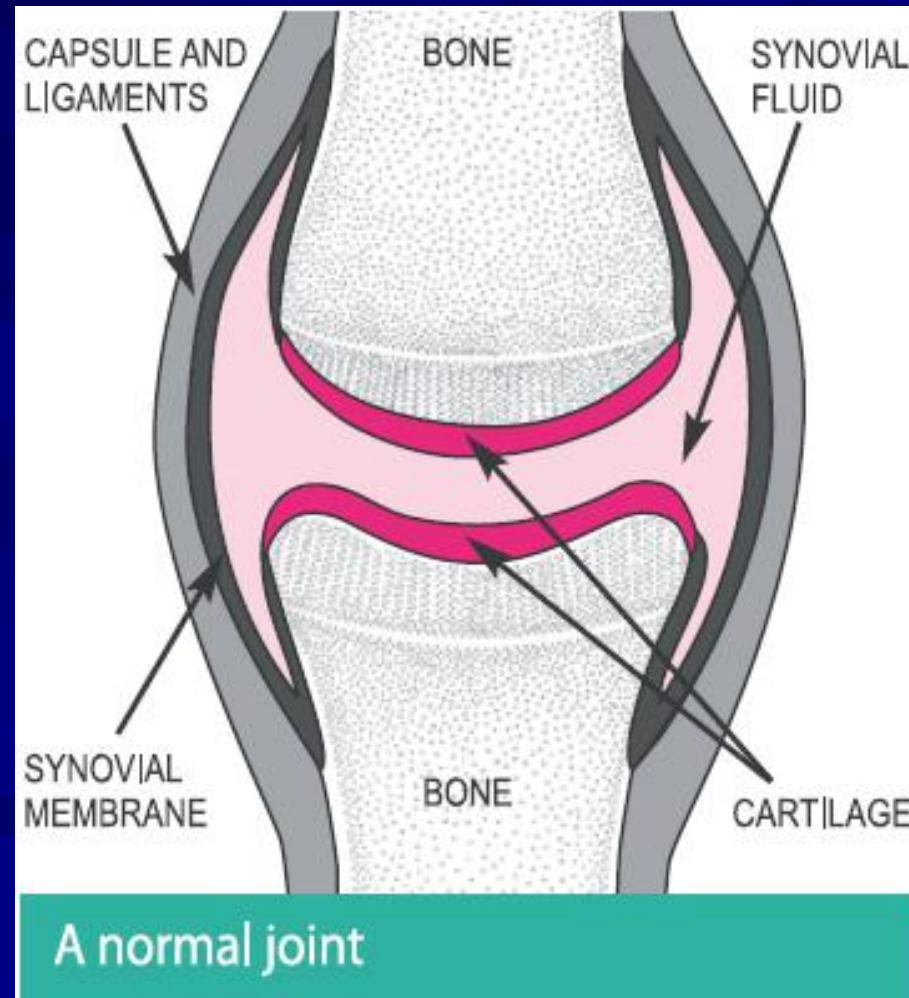
Åpen dag 2011

Hva er revmatoid artritt

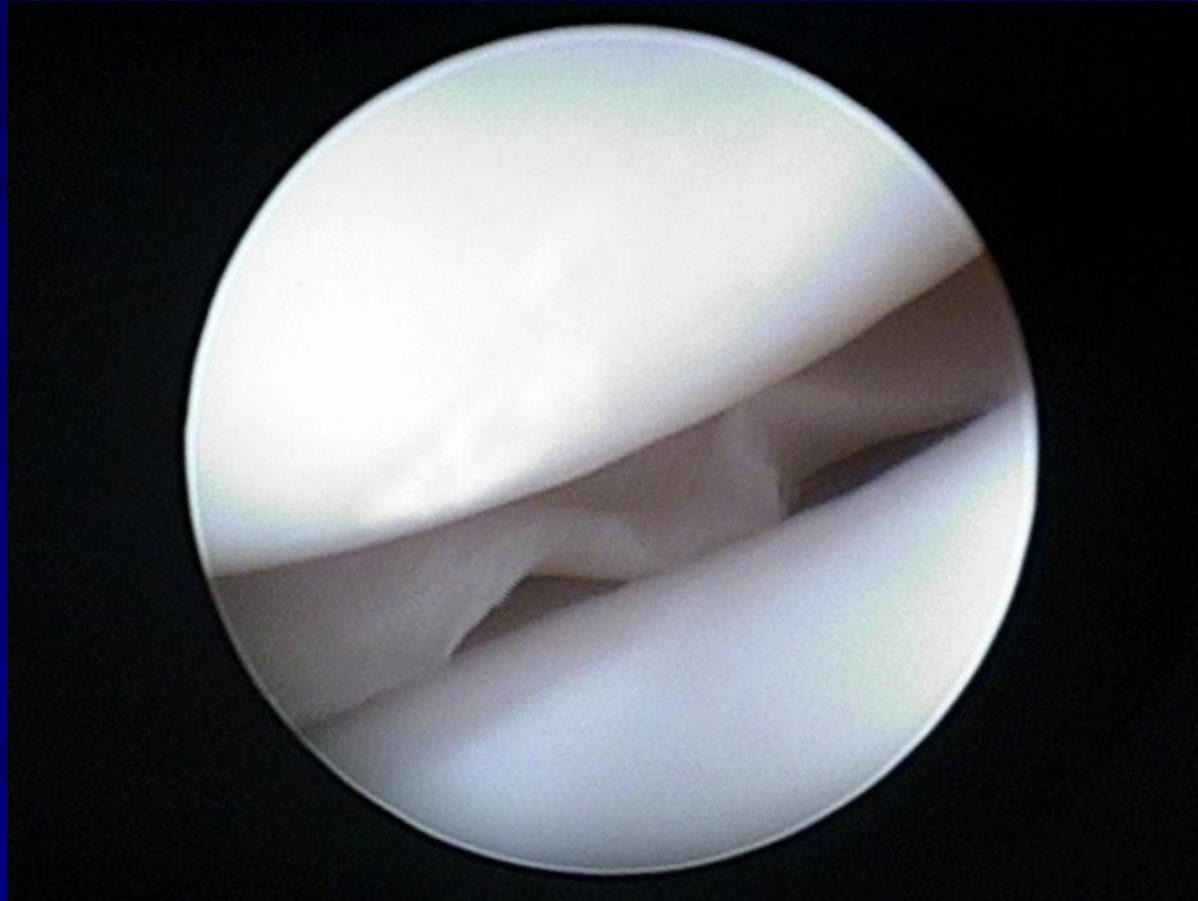
- Leddgikt er en betennelses tilstand som kan angripe mange organ og organsystem.
- Vanligste angrepspunkt er ledd kledd av synovialhinne



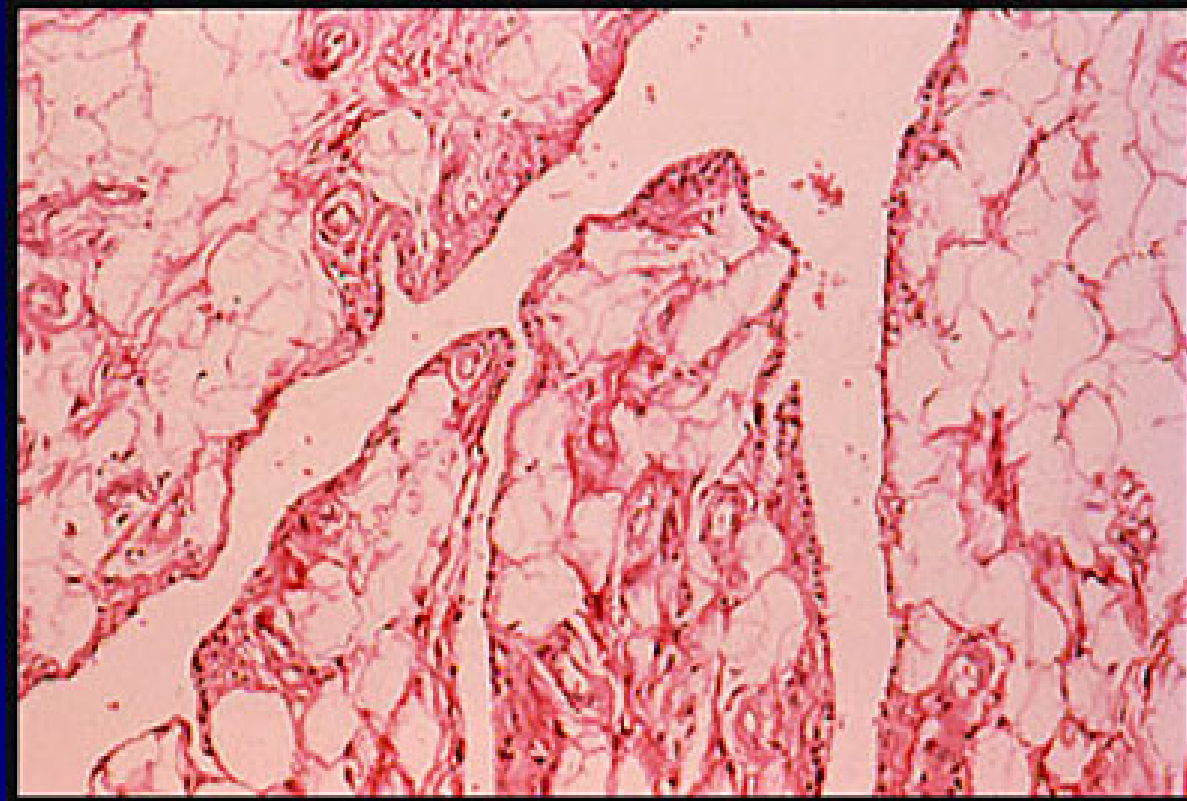
Normal joint



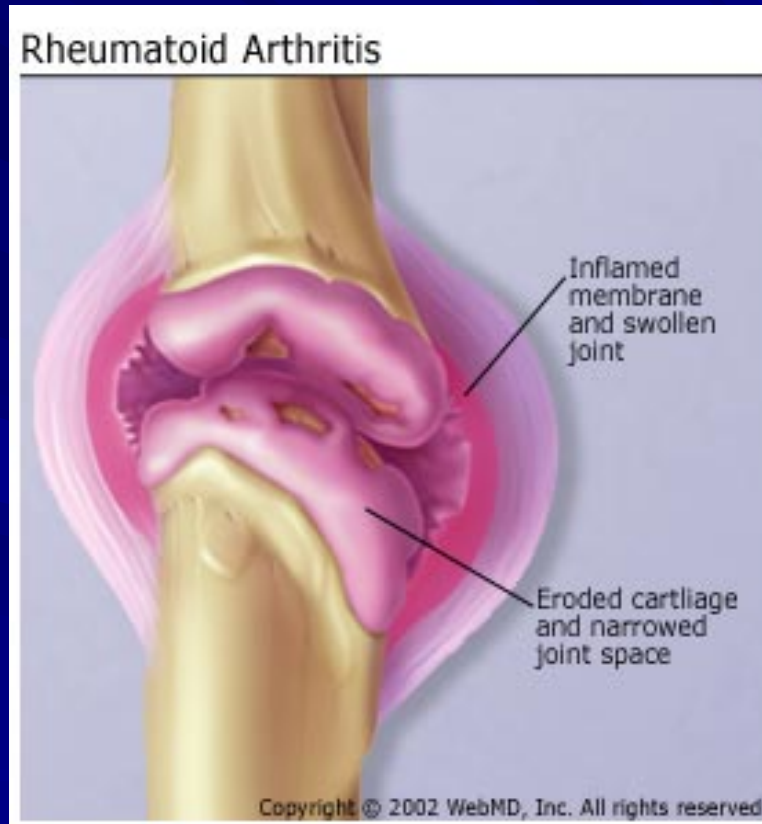
Normalt ledd



Normal leddhinne



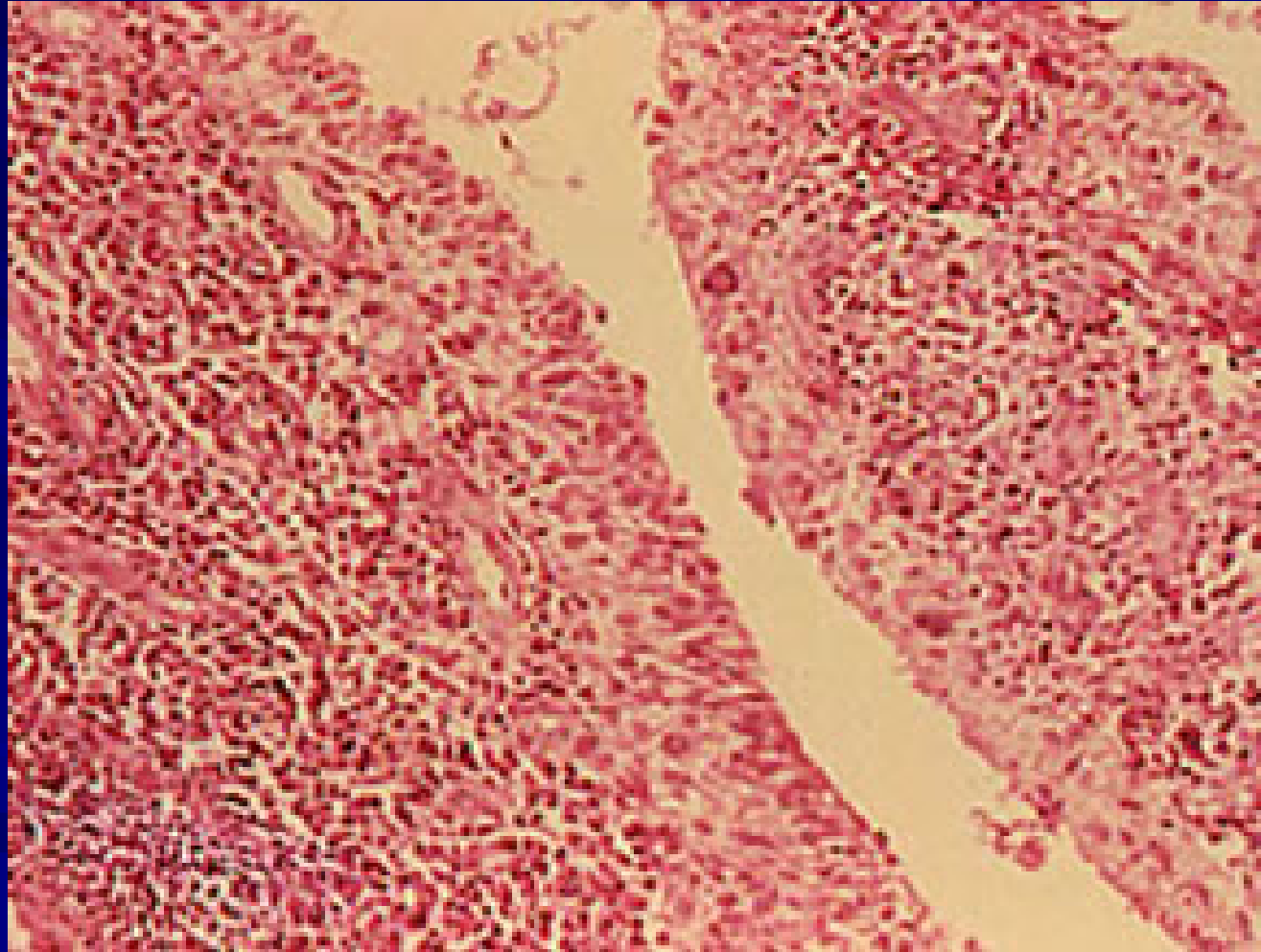
Leddgiktsledd



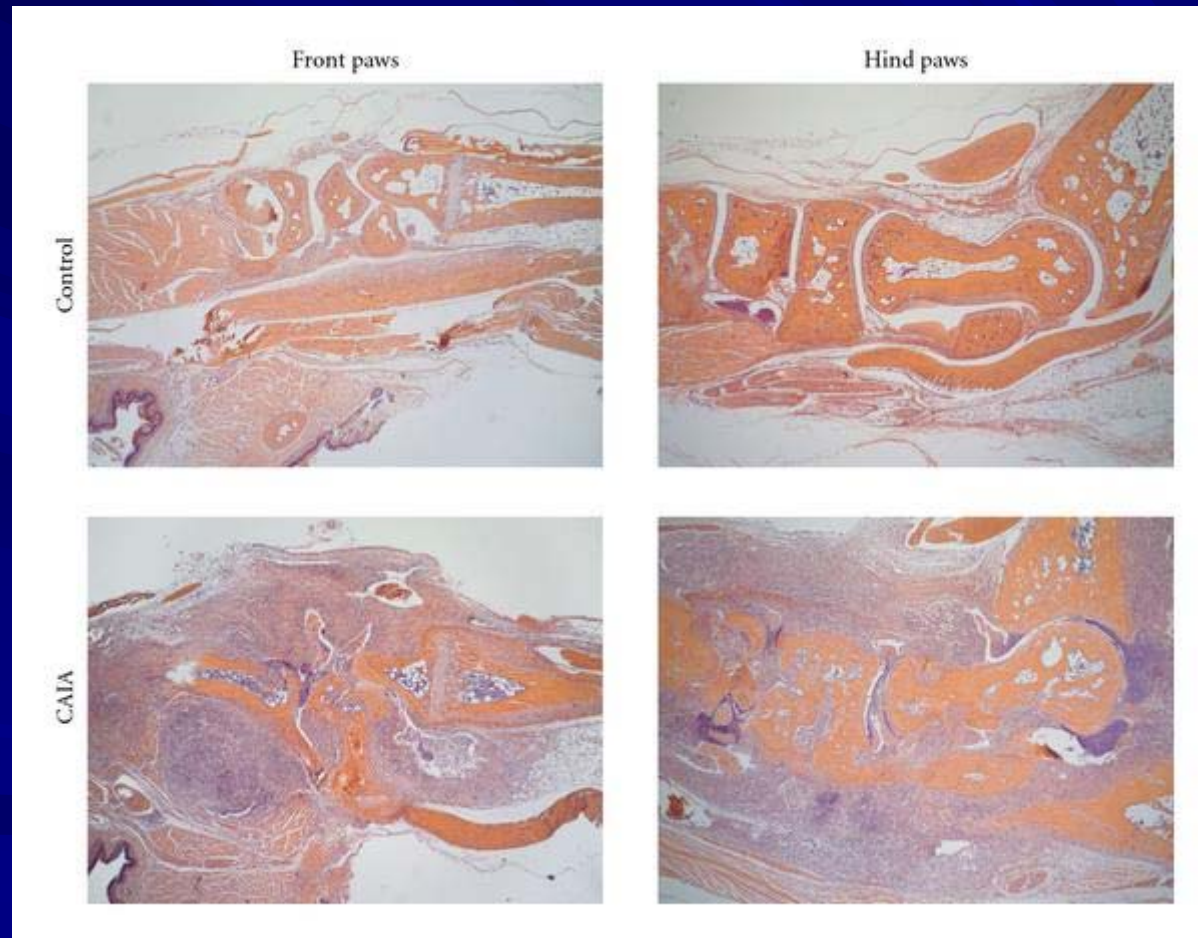
Betent leddhine



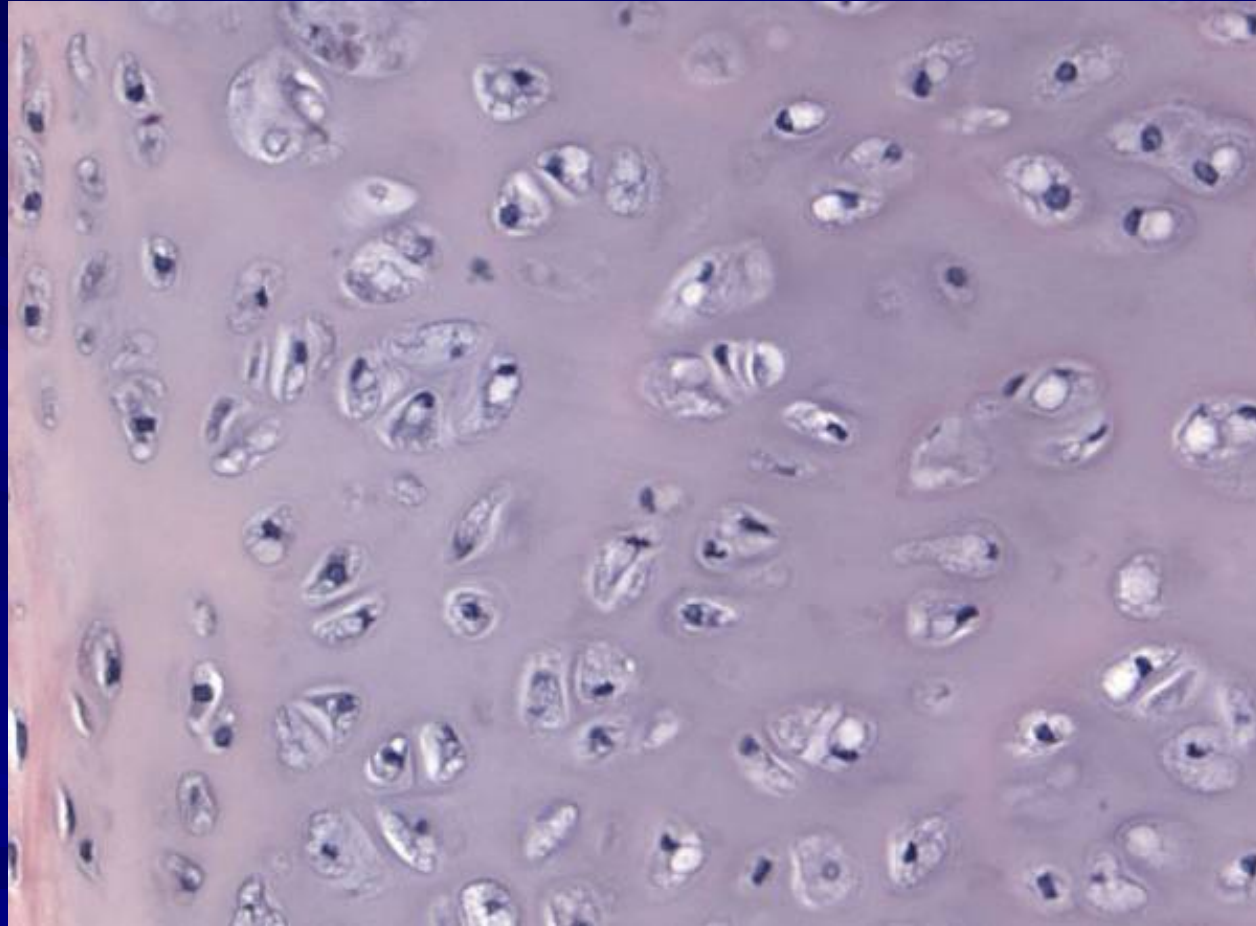
Betent leddhinne



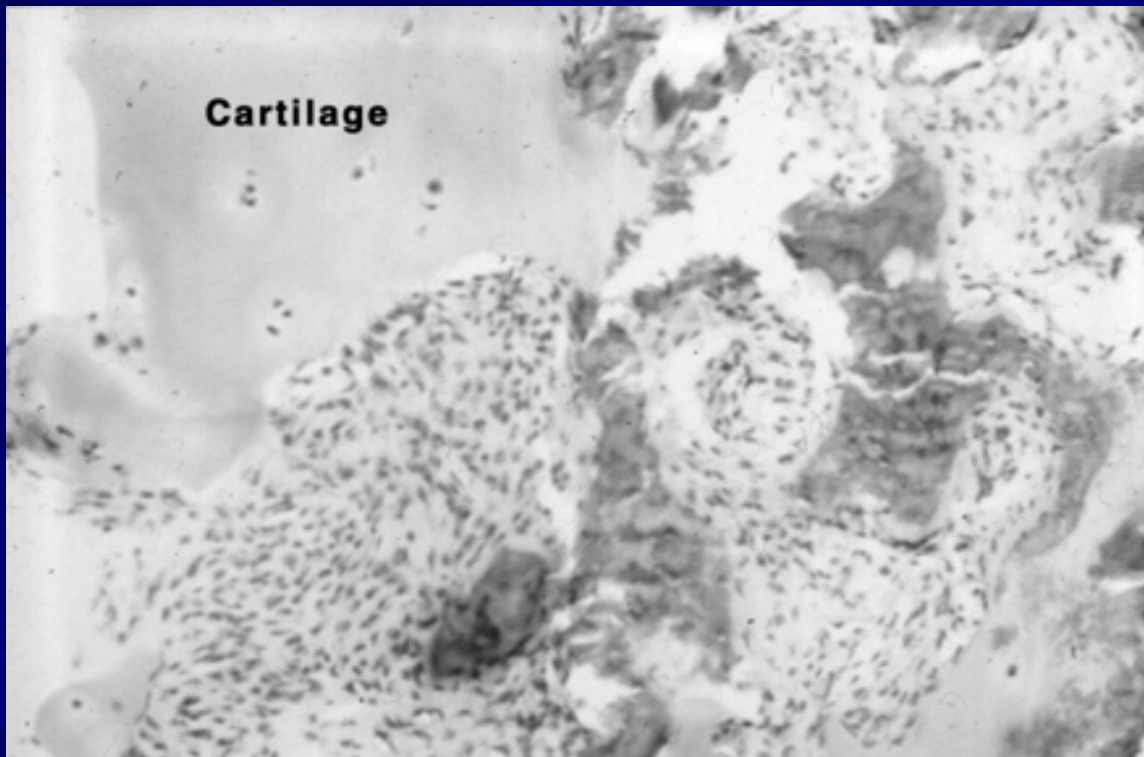
Inflammasjon



Brusk



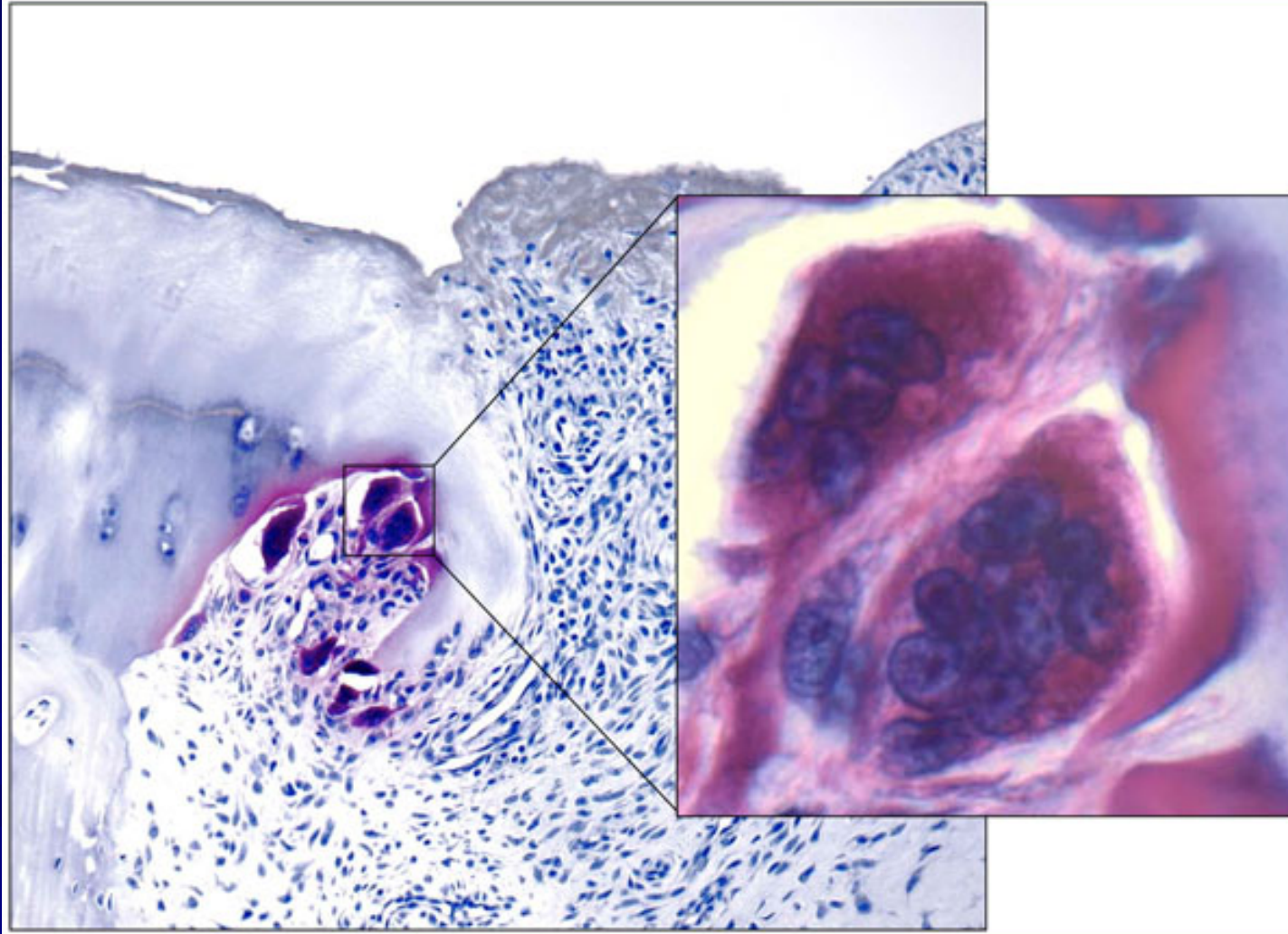
Celler fra leddhinnen infiltrerer leddbrusken



Osoklaster

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Source: Arthritis Res Ther © 2007 BioMed Central, Ltd.

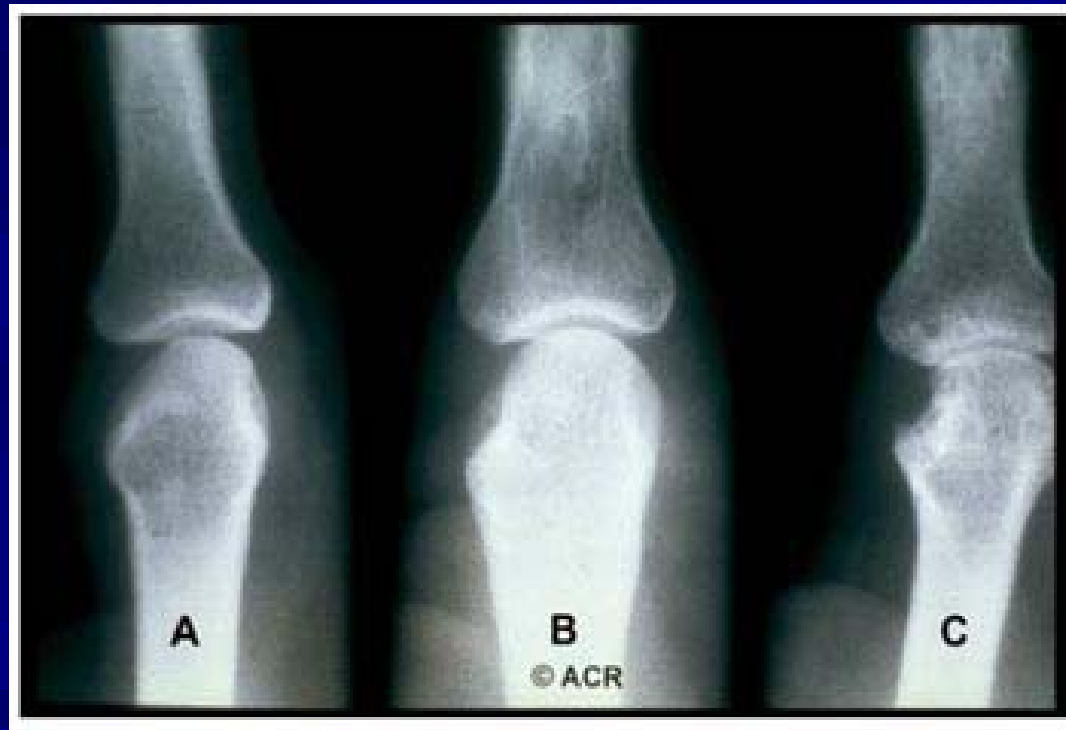
Hvor mange har leddgikt

	Prevalence of rheumatoid arthritis (%)		
	Overall	Female	Male
France [17]	0.62	0.86	0.32
Italy [18]	0.33	0.51	0.13
Norway [19]	0.47	0.63	0.30
Spain [21]	0.5	0.8	0.2
Sweden [22]	0.51	0.46	0.56
Yugoslavia [23]	0.18	0.29	0.18

Hevelse i håndledd, grunnledd eller midtleddl,
Symmetrisk hevelse i ledd



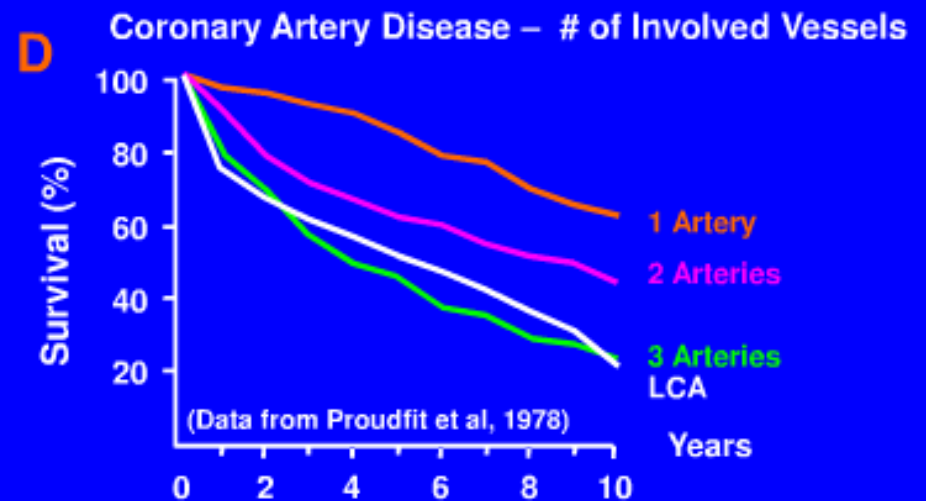
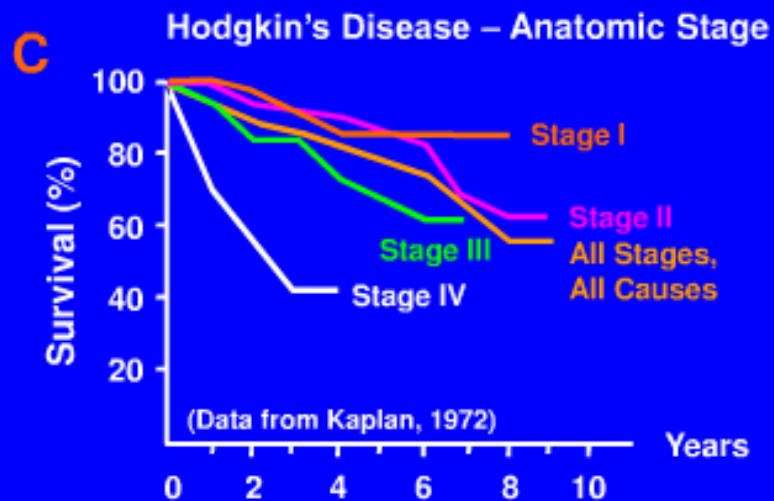
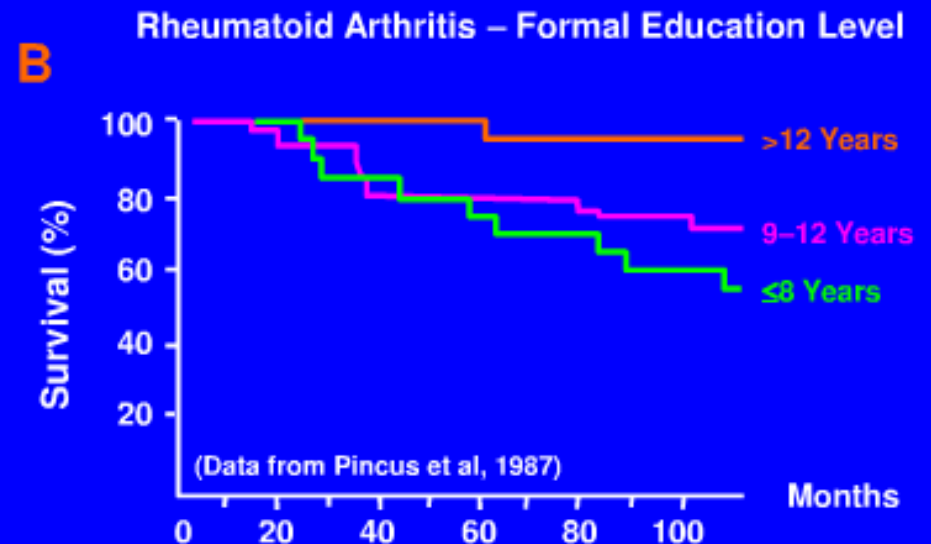
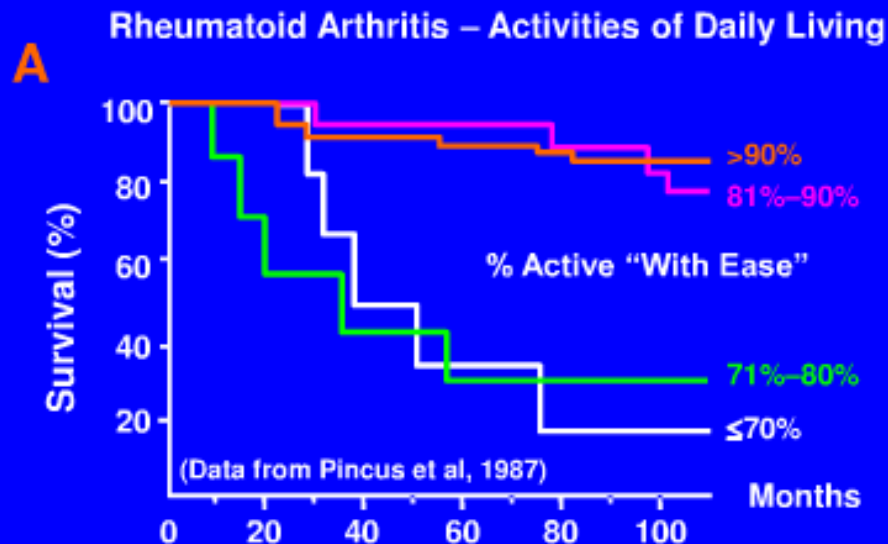
Leddgikt and røntgen



Leddødeleggelse

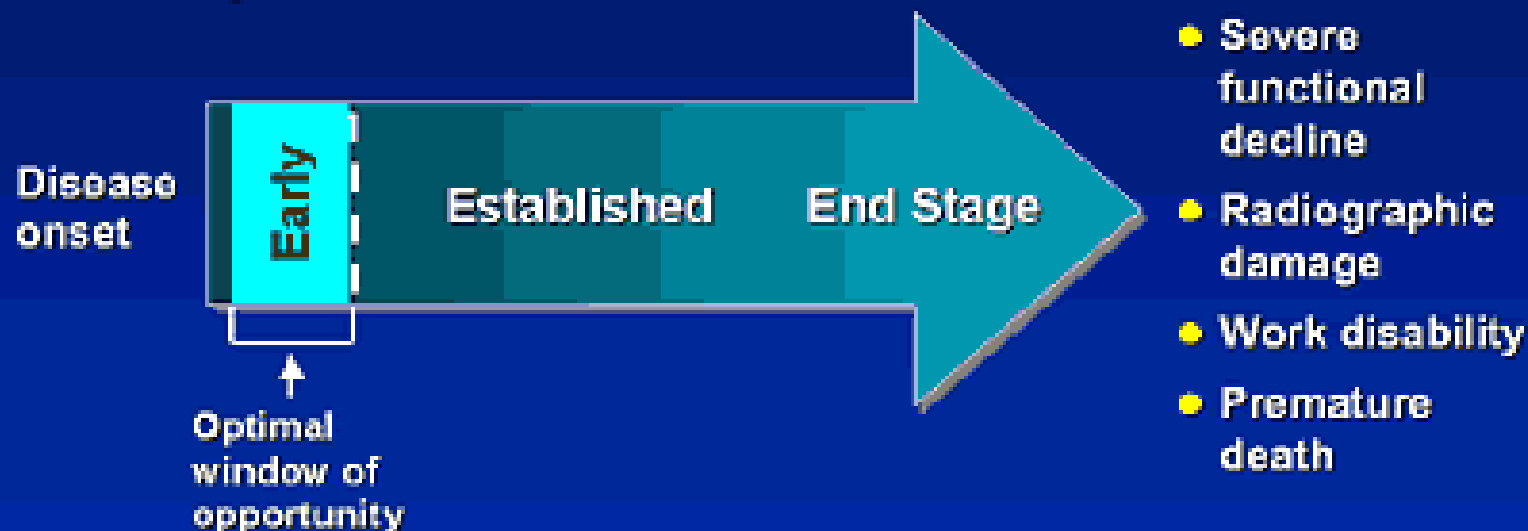


9- to 10-Year Survival According to Quantitative Markers in Three Chronic Diseases

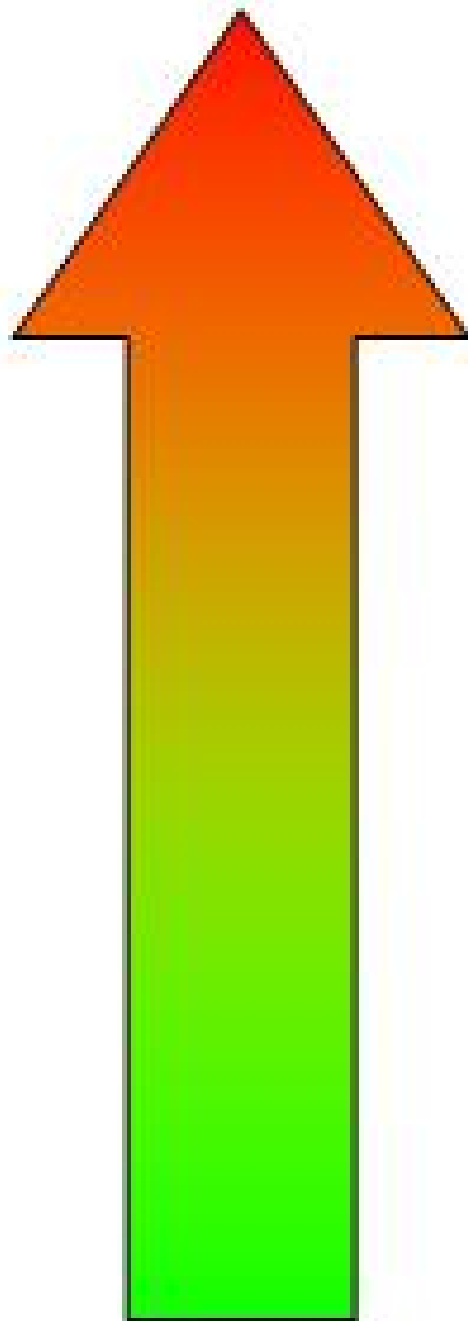


Optimal Window for Treating RA

- Radiographic progression occurs early and continues over the lifetime of a patient
- 70% of patients have radiographic damage within the first 3 years



O'Dell JR. *Arthritis Rheum.* 2002;46:203-205 [Editorial]. Landewe RDM, et al. *Arthritis Rheum.* 2002;46:347-356.
van der Heijde DM, et al. *J Rheumatol.* 1995;22:1792-1796.



9.6 - MAX

HØJ - BIOLOGISK BEHANDLING

5.1

MODERAT

3.2

LAV

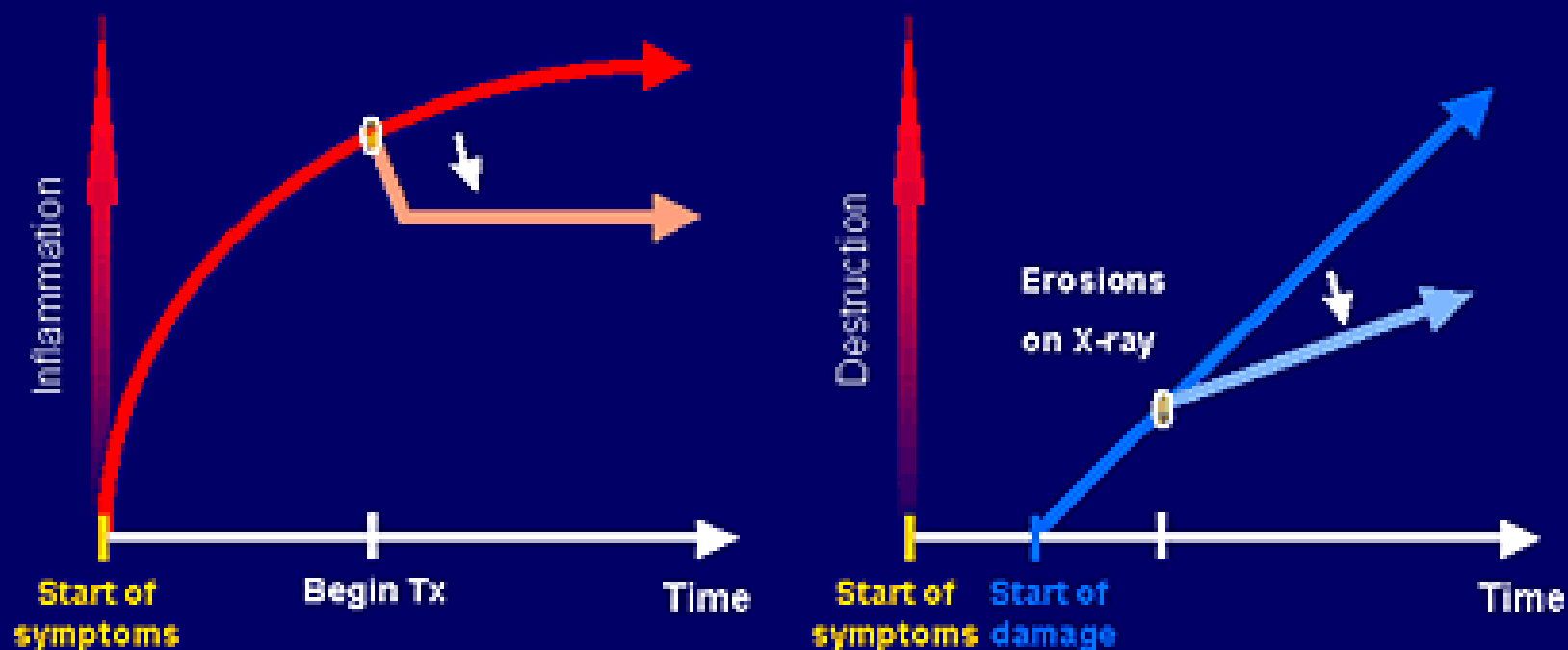
2.6

REMISSION



Yesterday's Approach to Treating RA Has Hidden Consequences

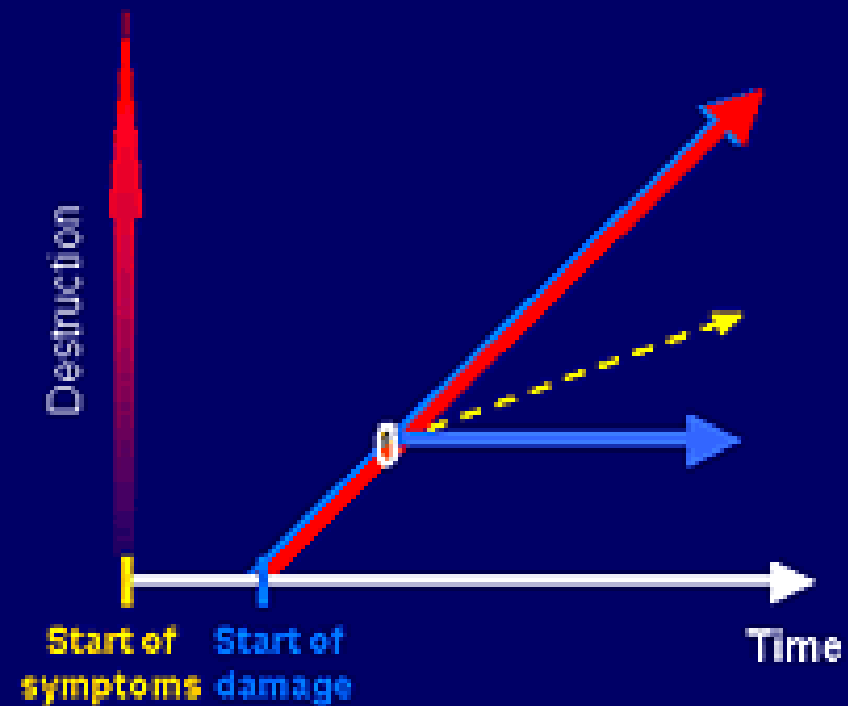
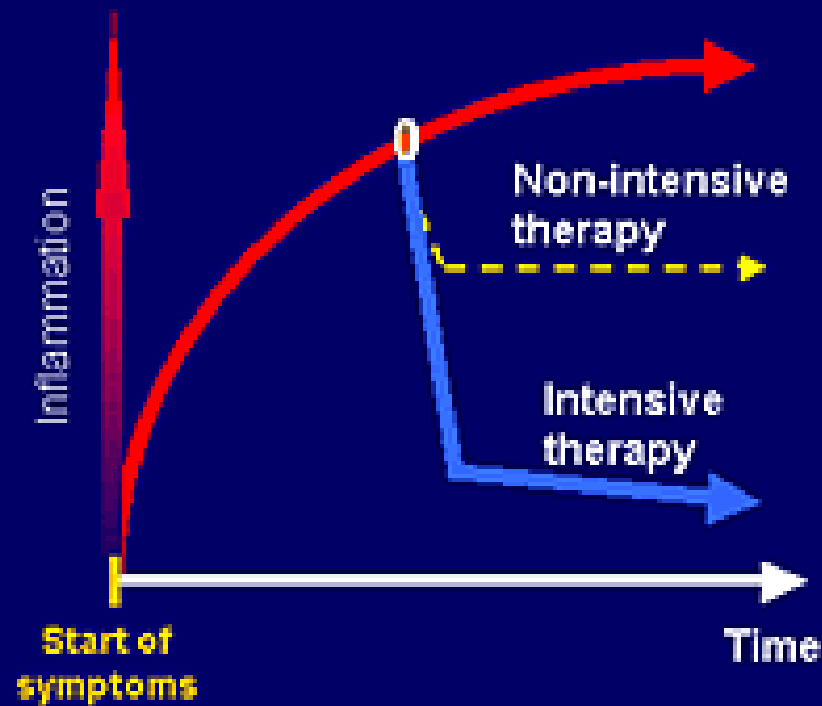
- Control pain and inflammation
- Respond to joint damage only after it is grossly evident



Today's Goals in RA Treatment

Reduce Inflammation AND Prevent Joint Damage

- Treat early
- Strive for remission
- Minimize disease activity
- Prevent destruction



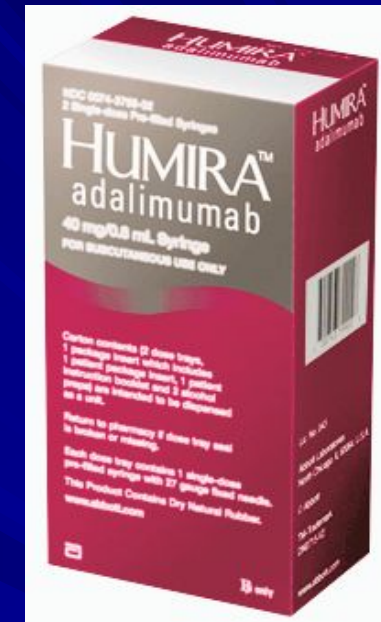
Kortikosteroider i lave til moderat høye doser i tillegg til monoterapi med syntetiske DMARDs (eller kombinasjoner av syntetiske DMARDs) har gunstig effekt som initial kortsiktig behandling, men skal utfases så snart det er klinisk mulig



Methotrexate handling



TNF alfa hemmer



MabThera

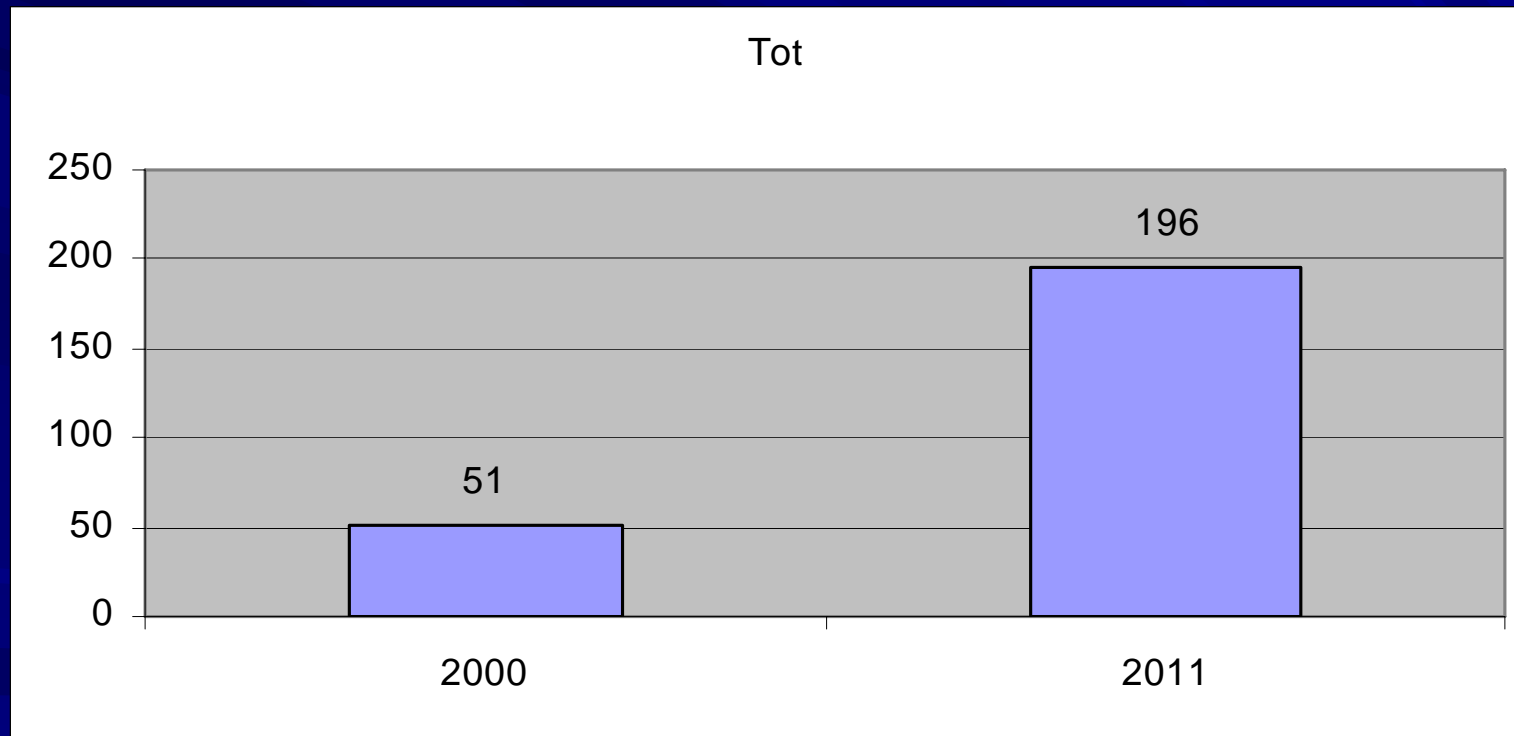




ORENCIA[®]
(abatacept)

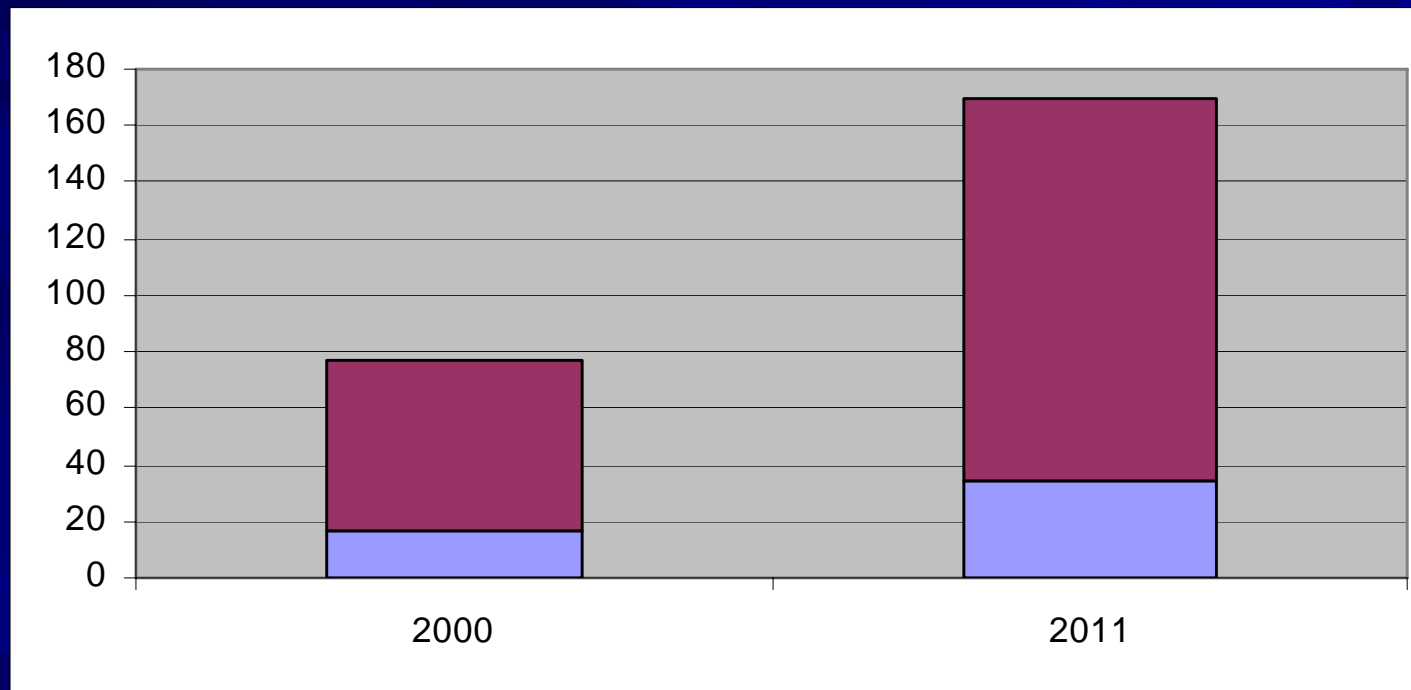
The logo features a stylized bird or flower shape composed of blue and orange brushstrokes to the left of the text.

ENBRELBEHANDLING



Enbrel

Kvinner/menn



New Therapeutic Possibilities for RA – Remission Is a Realistic Goal

■ Tools

- Optimized MTX
- Combination therapy
- Biological response modifiers

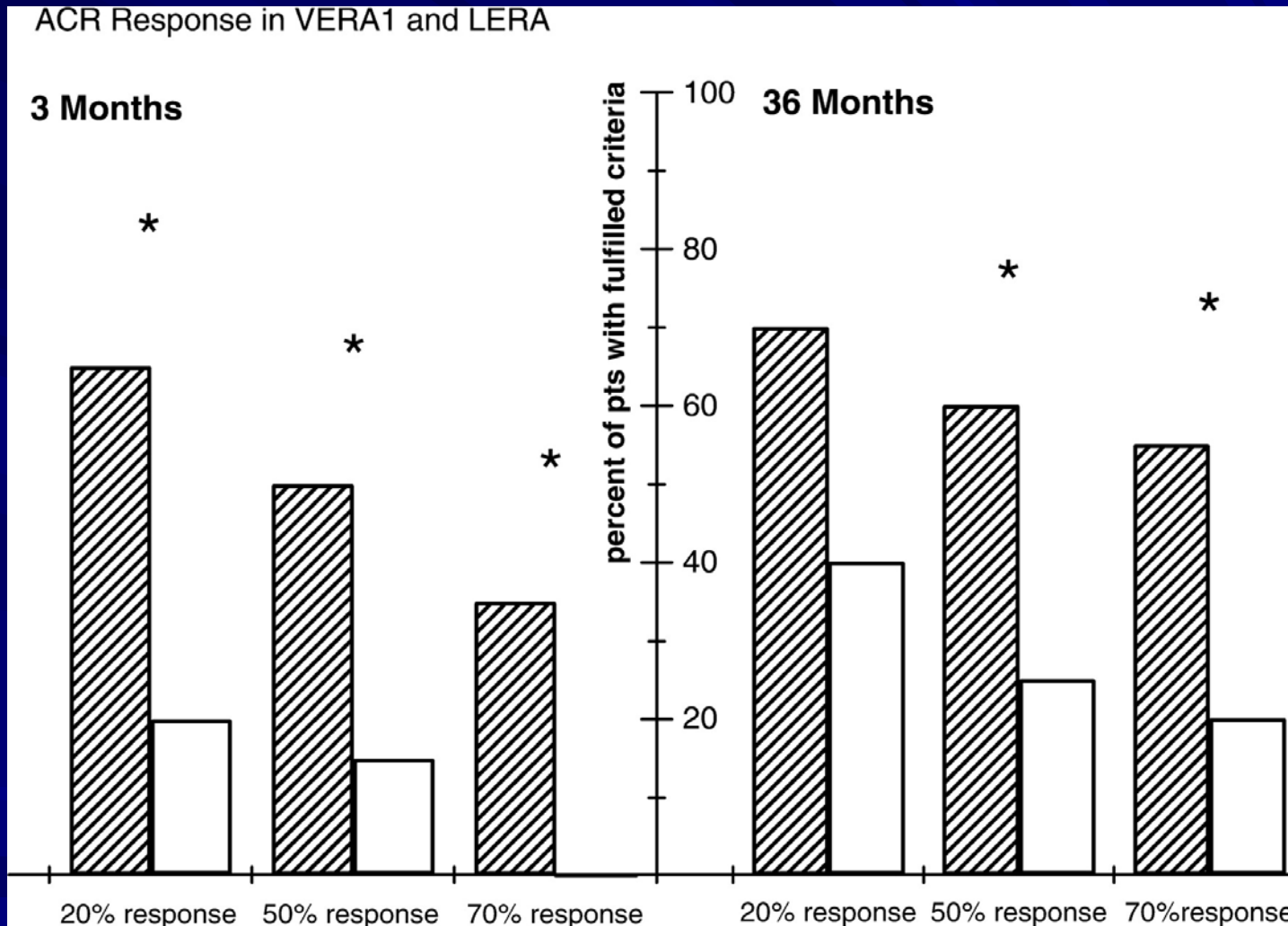
■ Processes

- Early treatment
 - Avoid treatment delay
 - Take advantage of “window of opportunity”
- Patient monitoring

Behandlingsstrategi mot leddgikt

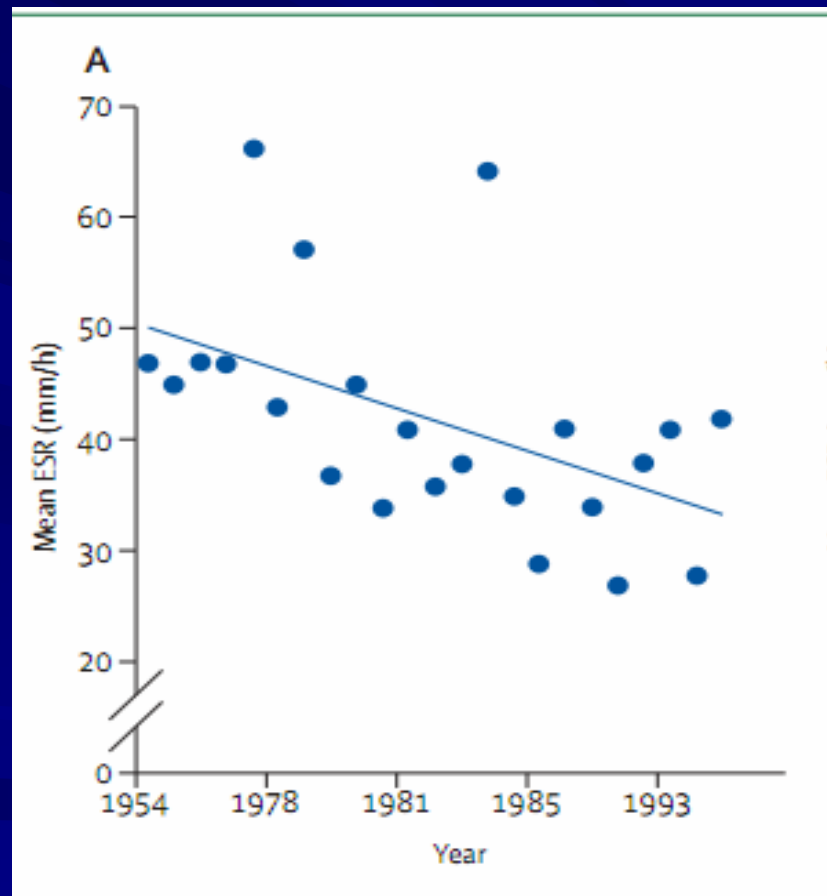
- Tidlig diagnose
- Start med MTX så raskt som mulig
- Målet er remisjon
- Bruk kortison som vente medisin til annen behandling virker
 - Sjelden behov for større dose enn 10mg
 - Forebygg benskjørhet
 - Lavest mulig dose

Per cent of patients fulfilling ACR response criteria after 3 (left panel) and 36 months (right panel) of follow-up.



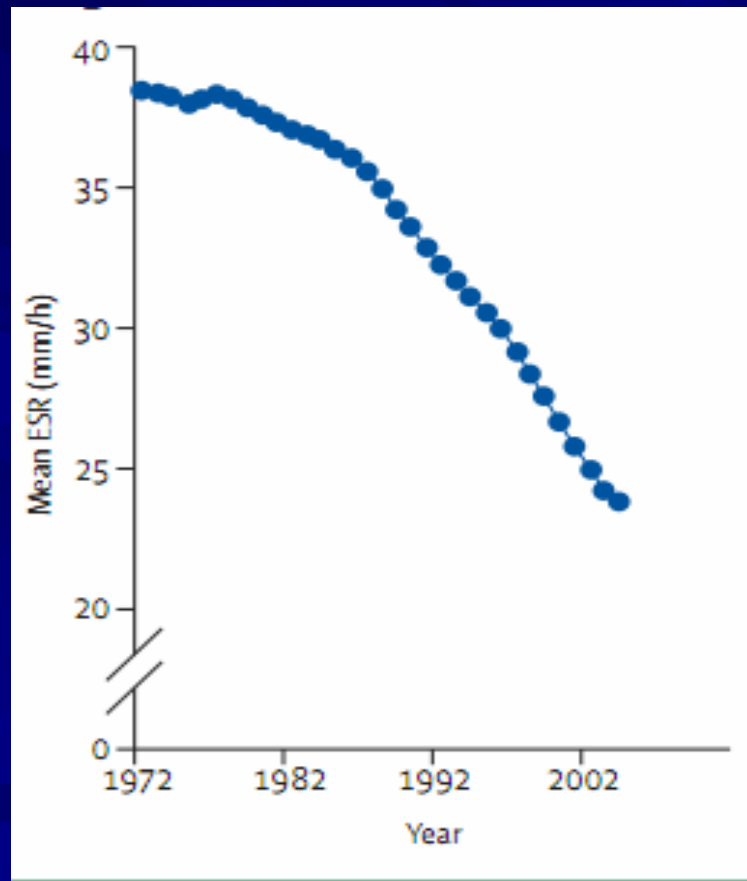
Nell V P K et al. Rheumatology 2004;43:906-914

Hvordan går det med leddgiktspasienter SR i en gruppe Europeiske pasienter



Hvordan går det med leddgiktspasienter

SR i en gruppe pasienter fra USA



2000-2011 er det forskjell ?

