Adalimumab is a human monoclonal recombinant antibody whose mechanism of action is mediated by binds specifically to tumor necrosis factor (TNF), neutralizing its function, indicated to treat progression of pathologies like rheumatoid arthritis (RA), ankylosing spondylitis (AS) and psoriatic arthritis (PA).

A retrospective study was performed, in which all patients whom initiated treatment with adalimumab were included. Adalimumab’s persistence was calculated in months, since the beginning of the treatment to the last dispensation register. We collect dispensation’s data since January 2007 to May 2019 in order to calculate adalimumab’s persistence until this date. The drug’s survival was calculated using Kaplan-Meier method and Log-Rank test to compare the survival in each of all pathologies. Significant difference was considered with a p value <0.05.

A total of 125 patients initiated treatment with adalimumab between January 2007 and December 2016. A 83,3%, 48,8% and 52,9% were women with current age range of 57,6 ± 43,8 years, 47,1 ± 10,1 and 55,6 ± 14,0 for rheumatoid arthritis, ankylosing spondylitis and psoriatic arthritis.

After analysing data using Kaplan-Meier method we obtained an overall survival of adalimumab in each pathology, being the greatest in PA with 59,9 months (IC95% = 39,6-80,2), followed by RA with 46,8 months (IC95% = 31,5-62,0) and AS with 38,8 months (IC95% = 25,1-52,4). When we compare the different pathologies by Log-Rank test, adalimumab’s persistence was statistically significant regarding to rheumatoid arthritis and ankylosing spondylitis (p<0,00513, p<0,0025 respectively).

Adalimumab is a biologic drug with proven therapeutic efficacy in the treatment of these pathologies. According to the data of our study, adalimumab shows a considerable persistence, being this greater in psoriatic arthritis.

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