EFFECTIVENESS, SAFETY AND ADHERENCE OF BARICITINIB AND TOFACITINIB IN RHEUMATOID ARTHRITIS

R. RODRIGUEZ MAURIZ, C. SEGÚI SOLANES, N. ALMENDROS-ABAD, A. SOSA-PONS, N. RUDI SOLA

PHARMACY DEPARTMENT, HOSPITAL GENERAL DE GRANOLLERS, SPAIN

BACKGROUND AND IMPORTANCE

Janus kinases (JAK) inhibitors, baricitinib and tofacitinib, have emerged as an effective class in the treatment of rheumatoid arthritis (RA), which administered orally offer an alternative to subcutaneous or intravenous biologic drugs, with efficacy and safety results comparable to those of biological therapies.

AIM AND OBJECTIVES

Assess effectiveness, safety and adherence to JAK inhibitors in patients with RA.

MATERIAL AND METHODS

- Retrospective observational study of RA patients who received treatment with JAK inhibitors between 2017-2019 in a secondary hospital.
- Clinical disease activity was assessed (months 0, 6, 12): DAS28-ESR score.
- Safety was evaluated according to adverse effects (AE).
- Adherence was calculated using Medication Possession Ratio (MPR): “percentage of Days' supply obtained/refill interval or fixed interval” obtained from Pharmacy System.

RESULTS

<table>
<thead>
<tr>
<th>Variables</th>
<th>Sex</th>
<th>Age</th>
<th>Time since diagnosis</th>
<th>Previous biologics</th>
<th>Treatment prescription</th>
<th>Concomitant anti-rheumatic drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td>36 patients (4 patients received both treatments)</td>
<td>86%</td>
<td>54 SD9</td>
<td>11 SD7</td>
<td>2 (IQR 0-4)</td>
<td>50% tofacitinib (5 mg BID), 50% baricitinib (4 mg QD except two patients: 2 mg QD)</td>
<td>53% methotrexate 8% leflunomide</td>
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DAS28-ESR before JAK inhibitors: 4.9 SD 0.7
DAS28-ESR at 6 months: 3.4 SD1.1 (22% in remission)
DAS28-ESR at 12 months: 3.4 SD0.5 (0% in remission)

DAS28-ESR was reduced ≥1.2 points (moderate response) in 44% of patients at 12 months.

Mean MPR: 92 SD 0.1% after 6 and 12 months
Two patients had a MPR < 80% at 6 months and 4 at 12 months

CONCLUSION

In our study, the percentage of adherence to JAK inhibitors is high. Despite no patients are at remission at 12 months, almost half showed a moderate response to treatment. However, more than a third of the patients reported AE.

40 treatments: 12 were stopped before 6 months; 3 before 12 months. Main causes of discontinuation:

- AE primary treatment failure 40%
- Secondary treatment failure 33%
- Infections 20%

AE (44% OF PATIENTS)

- Headache: 14%
- Infections: 14%
- Gastrointestinal disorders: 8%
- Other: 11%