Title


Author(s)

Ishikawa, Yuki; Yukawa, Naoichiro; Ohmura, Koichiro; Hosono, Yuji; Imura, Yoshitaka; Kawabata, Daisuke; Nojima, Takaki; Fujii, Takao; Usui, Takashi; Mimori, Tsuneyo

Citation

Clinical rheumatology (2010), 29(5): 563-566

Issue Date

2010-05

URL

http://hdl.handle.net/2433/120949

This is not the published version. Please cite only the published version.

Type

Journal Article

Textversion

author
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Age(yrs) &amp; Sex</td>
<td>44 female</td>
<td>52 female</td>
<td>52 female</td>
<td>57 female</td>
<td>58 female</td>
</tr>
<tr>
<td>RF/CCP</td>
<td>-/-</td>
<td>+/-ND</td>
<td>+/ND</td>
<td>+/ND</td>
<td>+(724.7)+(+ &gt; 100)</td>
</tr>
<tr>
<td>Duration from RA until anti-TNF therapy(Tx.) initiation (yrs)</td>
<td>1 20 33 26 2</td>
<td>26 2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Previous Tx. for RA</td>
<td>HCQ&lt;sup&gt;22&lt;/sup&gt;, MTX&lt;sup&gt;23&lt;/sup&gt;</td>
<td>MTX</td>
<td>MTX</td>
<td>All available DMARDs</td>
<td>BUC&lt;sup&gt;24&lt;/sup&gt;, TAC&lt;sup&gt;25&lt;/sup&gt;</td>
</tr>
<tr>
<td>Anti-TNF therapy</td>
<td>Etanercept</td>
<td>Infliximab</td>
<td>Infliximab</td>
<td>Etanercept</td>
<td>Etanercept</td>
</tr>
<tr>
<td>PM/DM onset from anti-TNF Tx. initiation</td>
<td>6 months 6 months 9 months 6 wks after re-treatment 2 months</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maximum CK&lt;sup&gt;6&lt;/sup&gt; (IU/L)</td>
<td>11,593 &gt; 12,000 3,388 1,067 1,538</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>pre FANA</td>
<td>–</td>
<td>1:320, pattern unknown</td>
<td>1:640, Ho.&lt;sup&gt;67&lt;/sup&gt;/Spe.&lt;sup&gt;68&lt;/sup&gt;</td>
<td>1:160 (1999)</td>
<td>1:320, Ho./Nuc.&lt;sup&gt;69&lt;/sup&gt;</td>
</tr>
<tr>
<td>Pre&lt;sup&gt;10&lt;/sup&gt; anti-disDNA antibody</td>
<td>ND</td>
<td>–</td>
<td>–</td>
<td>ND</td>
<td>–</td>
</tr>
<tr>
<td>Anti-disDNA antibody</td>
<td>ND</td>
<td>1:20</td>
<td>IgM (131U/mL)</td>
<td>ND</td>
<td>– (IgG 11 U/mL)</td>
</tr>
<tr>
<td>Pre Anti-Jo-1 antibody</td>
<td>ND</td>
<td>+</td>
<td>+ (&gt; 500 U/mL) (ELISA)</td>
<td>ND</td>
<td>206.9</td>
</tr>
<tr>
<td>Anti-Jo-1 antibody</td>
<td>+</td>
<td>+</td>
<td>+ (&gt; 500 U/mL) (ELISA)</td>
<td>ND</td>
<td>239</td>
</tr>
<tr>
<td>Electromyogram</td>
<td>ND</td>
<td>ND</td>
<td>ND</td>
<td>Myogenic pattern</td>
<td>Myogenic pattern</td>
</tr>
<tr>
<td>Muscle biopsy</td>
<td>Necrosis, perivascular interstitial infiltration</td>
<td>Diffuse necrosis, inflammatory infiltrates</td>
<td>Size variation, inflammatory infiltrates</td>
<td>Necrotizing myositis</td>
<td>Mild inflammatory infiltrates and necrosis</td>
</tr>
<tr>
<td>Diagnosis</td>
<td>Dermatomyositis</td>
<td>Polymyositis</td>
<td>Polymyositis</td>
<td>Polymyositis</td>
<td>Polymyositis</td>
</tr>
<tr>
<td>Course &amp; types of ILD</td>
<td>Improved; NSIP&lt;sup&gt;11&lt;/sup&gt; ?</td>
<td>Improved; UIP&lt;sup&gt;12&lt;/sup&gt; ?</td>
<td>Improved; NSIP ?</td>
<td>ARDS developed, due to PCP&lt;sup&gt;13&lt;/sup&gt; ?</td>
<td>Improved; NSIP or BOOP&lt;sup&gt;14&lt;/sup&gt;</td>
</tr>
<tr>
<td>Tx. for PM/DM&lt;sup&gt;15&lt;/sup&gt;</td>
<td>High-dose PSL&lt;sup&gt;16&lt;/sup&gt; pulse 1.0 g plus PSL&lt;sup&gt;17&lt;/sup&gt; 150 mg &amp; MTX&lt;sup&gt;10&lt;/sup&gt; 10 mg/wk</td>
<td>MP&lt;sup&gt;18&lt;/sup&gt; pulse 1.0 g plus PSL 1mg/kg</td>
<td>PSL 30 mg plus TAC 3 mg</td>
<td>High-dose PSL plus IVCY&lt;sup&gt;19&lt;/sup&gt; (500 mg/m&lt;sup&gt;2&lt;/sup&gt;)</td>
<td>PSL 1mg/kg plus MP pulse 0.5 g</td>
</tr>
<tr>
<td>Outcome of myositis</td>
<td>Marked improvement</td>
<td>Marked improvement</td>
<td>Marked improvement</td>
<td>Marked improvement</td>
<td>Marked improvement</td>
</tr>
</tbody>
</table>

Table 1. Clinical Characteristics of Reported RA Patients Who Developed PM/DM After Anti-TNF Therapy

<sup>1</sup> ND Not done or Not described  
<sup>2</sup> HCQ Hydroxychloroquine  
<sup>3</sup> MTX Methotrexate  
<sup>4</sup> BUC Bucillamine  
<sup>5</sup> TAC Tacrolimus  
<sup>6</sup> CPK Creatinine phosphokinase  
<sup>7</sup> Ho. Homogenous pattern  
<sup>8</sup> Spe. Speckled pattern  
<sup>9</sup> Nuc. Nucleolar pattern  
<sup>10</sup> Pre value before initiation of anti-TNF  
<sup>11</sup> NSIP Non-specific interstitial pneumonia  
<sup>12</sup> UIP Unusual interstitial pneumonia  
<sup>13</sup> PCP Pneumocystis pneumonia  
<sup>14</sup> BOOP Bronchiolitis obliterans with organizing pneumonia  
<sup>15</sup> All treatment include withdrawal of anti-TNF therapy  
<sup>16</sup> PSL Prednisolone  
<sup>17</sup> AZP Azathioprine  
<sup>18</sup> MP Methylprednisolone  
<sup>19</sup> IVCY Intravenous cyclophosphamide