

**Opinion**

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## DMARDS – Points to Ponder



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### Opinion

DMARDS are well established drugs used in treatment of rheumatoid arthritis. There are few questions to be answered in regard to these drugs. What is the indication to start these drugs? What is ideal duration of these drugs? How do we assess response to these drugs? Extensive review of literature showed no article able to answer these questions specifically. I have come out with a few suggestions which will help in answering the above questions.

- The ideal indications to start DMARD are as follows.
- Young female, severe pain, Joint deformities, High titre of RA factor, High CRP, Extrarticular disease and X-ray features suggestive of joint erosion.
- How do we assess response to drugs?

The following criteria can be used to assess response to the DMARDS.

- No joint pain, No tenderness over the joint, morning stiffness less than 15 minutes duration, Reduces ESR or CRP.
- How long these drugs should be continued?
- All these drugs under the DMARDS category have some amount of serious side effects. Second the time taken for these drugs to produce significant improvement in patient condition is also long.

We shall look into the serious complication caused by these drugs. Methotrexate causes marrow suppression liver toxicity and lung toxicity. Sulphasalazine causes marrow suppression, nephro toxicity and hepato toxicity. Chloroquine causes serious fundal defects. The question arises considering these complications how long should these drugs be continued.

To answer this question we shall look at the average time taken by these drugs to act on the disease. Minimum times needed for the drugs to control the disease are as follows. Methotrexate four to six weeks, Sulphasalazine one to six months, chloroquine three to six months and Leflunamide three to four weeks. When we analyze this data we need the duration of DMARDS to be a minimum of one maximum of six months. The duration of drug therapy can be based on the following facts. If patient shows adequate response as mentioned above, serious side effects of drugs and duration of six months. The patients need to be monitored periodically for serious side effects of drugs and clinical improvement in the disease manifestation.

The purpose of this opinion is to create a more interest in research. More articles to answer the questions asked. I would like to request clinicians to come out with their data and suggestion so that we can arrive at a conclusion to have clear indications to start DMARDS and continuation of therapy.



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