

EULAR
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UNIFYING TERMINOLOGY FOR DIFFICULT-TO-TREAT RHEUMATOID ARTHRITIS

EULAR proposes a definition for difficult-to-treat RA in the hope of supporting clinical practice, trials, and research in the area.

Rheumatoid arthritis (RA) is an inflammatory autoimmune disease that causes pain, swelling and stiffness in the joints. It can also cause fatigue, and the underlying inflammation may affect other body systems. A significant proportion of people with rheumatoid arthritis (RA) still have symptoms despite receiving treatment according to the current management recommendations. These people can be considered to have 'difficult-to-treat RA'. However, there is no uniform terminology or definitions to decide when this applies. The concept is referred to by many different terms, including severe, refractory, drug-resistant, or established RA. EULAR prefer the term 'difficult-to-treat' because it best capture the possible clinical scenarios. Being clear on terminology is important because people with difficult-to-treat RA may require a different approach.

EULAR intends to create recommendations for this neglected patient group. Agreeing on a clear definition of who has difficult-to-treat RA is an important first step. A task force was set up to draft a definition based on the results of an online survey conducted in rheumatologists to identify the key features of people with difficult-to-treat disease. The taskforce included rheumatologists, nurses, other health professionals, and patients.

Three criteria were agreed as mandatory elements of the definition of difficult-to-treat RA. The first is that before being classed as difficult-to-treat, people should have received treatment according to the EULAR recommendation, and failed to get a response from two or more biological or targeted synthetic disease-modifying antirheumatic drugs (b/tsDMARDs). They must also have at least one of the following: at least moderate disease activity; signs or symptoms of active disease; inability to taper glucocorticoid treatment; rapid radiographic progression; or symptoms causing a reduction in quality of life. The third criteria is that management of signs or symptoms should be perceived as problematic by either the rheumatologist or the patient.

EULAR hopes the proposed definition will enable robust and consistent identification of patients with difficult-to-treat RA. In addition, it can provide a platform to define a group of similar patients for research into difficult-to-treat RA. Further work is underway to provide detailed recommendations for management.

Source

[Nagy G, Roodenrijs NM, Welsing PM, et al. EULAR definition of difficult-to-treat rheumatoid arthritis. *Annals of the Rheumatic Diseases* 2021;80:31-35.](#)

About EULAR

EULAR is the European umbrella organisation representing scientific societies, health professional associations and organisations for people with rheumatic and musculoskeletal diseases (RMDs). EULAR aims to reduce the burden of RMDs on individuals and society and to improve the treatment, prevention and rehabilitation of RMDs. To this end, EULAR fosters excellence in education and research in the field of rheumatology. It promotes the translation of research advances into daily care and fights for the recognition of the needs of people with

RMDs by the EU institutions through advocacy action.

About the EULAR European Congress of Rheumatology

Since its introduction in 2000, the annual EULAR European Congress of Rheumatology has become the primary platform for exchange of scientific and clinical information in Europe. It is also a renowned forum for interaction between medical doctors, scientists, people with arthritis/rheumatism, health professionals and representatives of the pharmaceutical industry worldwide. The EULAR congress is usually held in June in one of the major cities in Europe ([see previous congresses](#)).

The [scientific programme](#) at the congress covers a wide range of topics on clinical innovations, clinical, translational and basic science. Meetings set up by associations of people with arthritis/rheumatism, health professionals and the health care industry complement the programme. The poster sessions, offering lively interaction between presenters and participants, are regarded by many as the heart of the congress.

Over the years, the EULAR Congress has gained a reputation of being a most innovative platform for the practicing physician particularly with respect to the acquisition of information on novel clinical research. The congress attracts more than 18,000 delegates from more than 130 countries.

The aim of the EULAR European Congress of Rheumatology is to provide a forum of the highest standard for scientific, both clinical and basic, educational, and social exchange between professionals involved in rheumatology, liaising with patient organisations, in order to achieve progress in the clinical care of people with rheumatic diseases.

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