

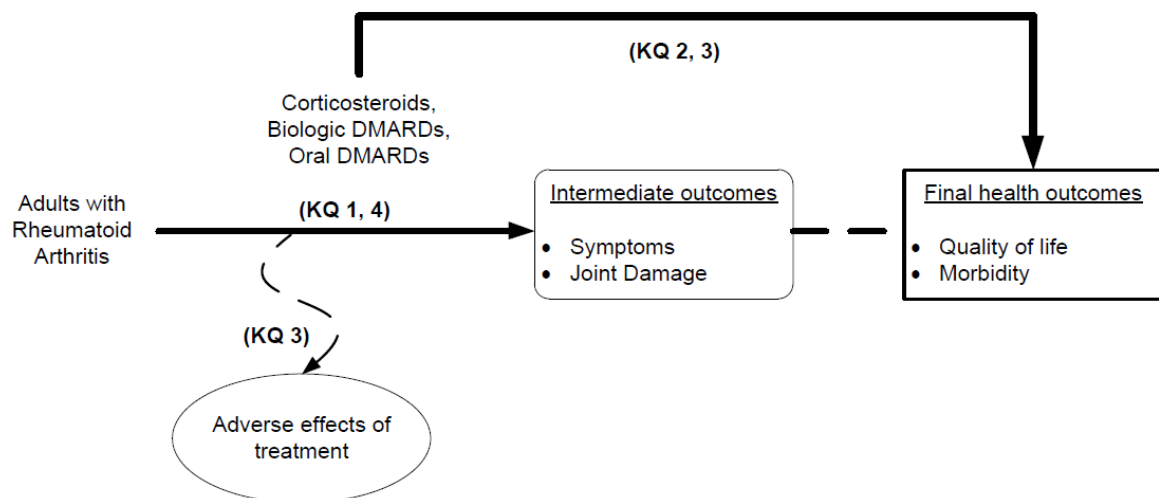
Prior Key Questions from the 2012 Systematic Review on Drug Therapy for Rheumatoid Arthritis in Adults

Scope and Key Questions

The purpose of the review was to compare the efficacy, effectiveness, and harms of corticosteroids, oral disease-modifying antirheumatic drugs (DMARDs), and biologic DMARDs in the treatment of patients with rheumatoid arthritis (RA). The Key Questions were:

1. For patients with RA, do drug therapies differ in their ability to reduce disease activity, to slow or limit the progression of radiographic joint damage, or to maintain remission?
2. For patients with RA, do drug therapies differ in their ability to improve patient reported symptoms, functional capacity, or quality of life?
3. For patients with RA, do drug therapies differ in harms, tolerability, patient adherence, or adverse effects?
4. What are the comparative benefits and harms of drug therapies for RA in subgroups of patients based on stage of disease, prior therapy, demographics, concomitant therapies, or comorbidities?

Figure A. Analytic framework for treatment for rheumatoid arthritis



Questions to Guide the Scoping Discussion

PCORI will be conducting a targeted update of the prior systematic review. One emphasis for PCORI's new Evidence Synthesis Program is on achieving the relatively rapid deployment of rigorous, relevant, and actionable comparative effectiveness research, placed in context, for a wide variety of stakeholders. For this reason we are seeking your assistance in identifying the current highest priority areas from the prior comprehensive review to refine and focus the scope for this update.

1. The prior review evaluated the comparative effectiveness of treatments for patients with all stages and severities of rheumatoid arthritis (i.e., early/established/end-stage, low/moderate/severe). Is there a case to be made for prioritizing the review to specific disease states for this update; that is, are questions surrounding the treatment of any specific subpopulation(s) currently more controversial than others?
2. The prior review provided a comprehensive summary of the comparative effectiveness of the various classes of pharmaceutical agents available to treat rheumatoid arthritis (ie, oral v. oral DMARDS, oral DMARDS combinations, biologic v. biologic DMARDS, biologic DMARD combinations, and biologic v. oral DMARDS). Is there a case to be made for focusing in on certain class comparisons in this review update, rather than all possible combinations? Are some comparisons currently more clinically relevant than others?
3. What would you say represents the most compelling or controversial clinical question related to rheumatoid arthritis right now?
4. Is there anything that is emerging in the area of rheumatoid arthritis treatment since the prior review that you feel needs to be addressed by this update (e.g., new treatments for rheumatoid arthritis, such as the targeted synthetic kinase inhibitor tofacitinib)? Is something critical missing?
5. Do you have any other comments for us on behalf of your organization?

Thank you again on behalf of PCORI for your time and your assistance!