

Postoperative infection rate similar across biologics in RA

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abatacept. For the one-year cumulative incidence of prosthetic joint infection (PJI), the predicted incidence ranged from 0.35 percent with rituximab to 3.67 percent with tocilizumab compared with 2.14 percent with abatacept. For all outcomes, glucocorticoids correlated with a dose-dependent increase in postoperative risk. Compared with no use, use of more than 10 mg of glucocorticoids per day resulted in a predicted risk for hospitalized [infection](#) of 13.25 versus 6.78 percent and a predicted one-year cumulative incidence of PJI of 3.83 versus 2.09 percent.

"Minimizing glucocorticoid exposure before surgery should be a primary focus of perioperative medication management," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

(HealthDay)—For patients with rheumatoid arthritis (RA) undergoing arthroplasty, the risk for postoperative infection is similar across biologics but is increased with glucocorticoid use, according to a study published online May 21 in the *Annals of Internal Medicine*.

Michael D. George, M.D., from the University of Pennsylvania Perelman School of Medicine in Philadelphia, and colleagues compared the risk for [postoperative infection](#) among biologics and the risk associated with glucocorticoids in patients with RA undergoing arthroplasty. Data were included for 9,911 adults with RA treated with biologics who underwent 10,923 elective inpatient total knee or hip arthroplasty procedures.

The researchers found that patients who received different biologics had similar outcomes. For hospitalized infection, the predicted risk from propensity-weighted models ranged from 6.87 percent with adalimumab to 8.90 percent with rituximab compared with 8.16 percent with

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