

Limited benefits from methotrexate in adults with psoriatic arthritis

Clinical Question	Compared to placebo, leflunomide, ciclosporin A, gold, and sulfasalazine, how effective is methotrexate for adult patients with psoriatic arthritis?
Bottom Line	Low-quality evidence suggested that low-dose oral methotrexate might be more effective than placebo when taken for six months in terms of disease response (NNTB=6), function, pain, and patient and physician global assessments of disease activity. The effect size for each of these outcomes was small. There was no clinically important differences with respect to disease response, disease activity, tender and swollen joint counts, or skin disease. Methotrexate was generally well tolerated in this population. One study measured health-related quality of life but did not report these results. The average age of people included in these studies varied from 26 to 52 years. The average duration of psoriatic arthritis ranged from one to nine years. The dose of methotrexate consisted of 7.5 mg to 25 mg orally, but for most studies, 15 mg was given orally per week.
Caveat	With the exception of leflunomide, head-to-head data were inadequate to inform comparison versus other disease-modifying anti-rheumatic drugs. Data comparing methotrexate versus leflunomide were of too low quality to provide clinically meaningful information. Effects of methotrexate on health-related quality of life, radiographic progression, enthesitis, dactylitis, and fatigue; its benefits beyond six months; and effects of higher-dose methotrexate have not been measured or reported in a randomised placebo-controlled trial.
Context	Psoriatic arthritis is an inflammatory disease associated with joint damage, impaired function, pain, and reduced quality of life. Methotrexate is a disease-modifying anti-rheumatic drug commonly prescribed to alleviate symptoms, attenuate disease activity, and prevent progression of disease.
Cochrane Systematic Review	Wilsdon TD et al. Methotrexate for psoriatic arthritis. Cochrane Reviews, 2019, Issue 1. Art. No.: CD012722.DOI: 10.1002/14651858.CD012722.pub2. This review contains eight studies involving 572 participants.

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Systematic review link:

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