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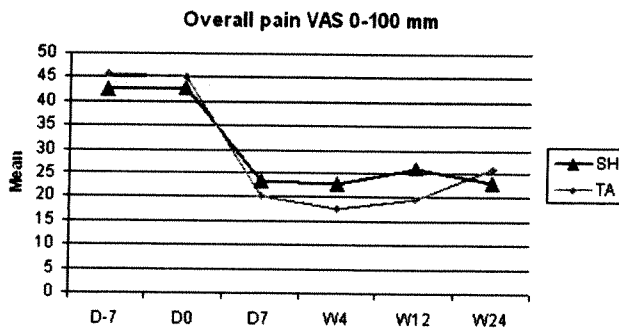
EFFICACY AND SAFETY OF SODIUM HYALURONATE IN THE TREATMENT OF OSTEOARTHRITIS OF THE CARPOMETACARPAL JOINT OF THE THUMB VERSUS CORTICOSTEROID

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Aim of Study: To assess whether one intra-articular (i.a.) injection of sodium hyaluronate (SH) 1.0% would reduce pain and improve function over 6 months in patients with rhizarthrosis compared to corticosteroid.

Methods: This pilot, randomised, masked-observer, controlled study involved patients with symptomatic osteoarthritis of the carpometacarpal joint of thumb. Pain on rotatory movement was required to be >30 mm on 100 mm Visual Analogue Scale (VAS). After an analgesic washout period, patients received a single i.a. injection of either SH 10 mg/1 ml (Ostenil® mini, TRB Chemedica AG, Germany) or triamcinolone acetonide (TA) 10 mg/1 ml. Patients were observed over 6 months with visits at Day 7, Week 4, 12, 24. Paracetamol was available as rescue analgesia. Three dimensions of pain were assessed as efficacy parameters and measured on VAS: overall pain of thumb/on rotatory movement/on joint shifting. Other parameters included VAS pain on pinch (tip, key, palmar), physician's assessment of disease activity (VAS) and Dreiser Algofunctional Index (0-30).

Results: 69 patients (mean age 63 years, 53 women) were randomised; 62 completed the study. Seven failed to complete due to adverse events (2), short efficacy duration (2), lack of efficacy (1), lost to follow up (1) and consent withdrawal (1). The 69 patients (SH=34, TA=35) were analysed as ITT. Mean overall pain values in SH group decreased significantly from 42.7 mm at baseline before injection to 22.9 mm at Week 24 ($p<0.001$) and in TA group from 45.2 mm to 26.2 mm ($p<0.01$). No significant intergroup difference was found.



Similar results were found for pain on rotatory movement, pain on joint shifting, pain on pinch and disease activity.

	Mean VAS values (mm)			
	SH		TA	
	Baseline	Week 24	Baseline	Week 24
Overall pain	42.7 ± 20.5	22.9 ± 19.8	45.2 ± 19.2	26.2 ± 22.3
Pain on rotatory movement	55.4 ± 16.7	28.3 ± 19.4	55.5 ± 15.2	31.6 ± 27.8
Pain on joint shifting	39.7 ± 25.7	21.6 ± 17.8	37.3 ± 20.1	21.6 ± 23.3
Pain on tip pinch	45.1 ± 19.3	25.0 ± 16.5	39.7 ± 21.6	26.0 ± 21.4
Pain on key pinch	37.6 ± 24.8	19.9 ± 18.3	39.5 ± 25.1	24.4 ± 22.3
Pain on palmar pinch	50.5 ± 20.4	23.0 ± 17.9	45.8 ± 23.0	29.1 ± 26.0
Disease activity	55.3 ± 14.2	26.3 ± 20.3	55.5 ± 11.6	22.8 ± 18.0

SH group exhibited a mean baseline Dreiser Index of 10.6 vs 9.5 in TA group ($p=ns$). It decreased in both groups to reach 7.8 in SH group vs 6.8 in TA group ($p=ns$). Two patients dropped out of the study because of adverse events in SH group (acute low back pain and tendopathy of right thumb).

Conclusions: A single injection of SH led to significant improvement in pain and function and was as effective as TA for treating rhizarthrosis. Sustained improvement was demonstrated in both groups at all time points over 6 months.

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CHONDROITIN SULFATE MAY HAVE DIFFERENTIAL EFFECTS ON OA SYMPTOMS RELATED TO DEGREE OF RADIOGRAPHIC INVOLVEMENT

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The Glucosamine/chondroitin Arthritis Intervention Trial (GAIT) was a randomized double-blind placebo- and celecoxib-controlled trial of 1583 OA patients designed to evaluate the efficacy of glucosamine (G), chondroitin sulfate (CS), and combination (G+CS) in improving osteoarthritis (OA) knee pain. GAIT patients had symptomatic and radiographic (Kellgren and Lawrence (KL) Grades 2 or 3) OA. We report a subanalysis of GAIT results based on interaction of KL Grade and CS response relative to placebo.

As expected, baseline characteristics demonstrated that patients with KL3 radiographic disease were significantly older, more obese and had more severe OA in terms of disease duration, baseline WOMAC, patient global and quality-of-life measures. The following table details treatment outcomes by KL Grade. Interactions between treatment group and KL Grade are signif-

Abstract P145 – Table 1

Outcome Measure	KL	Chondroitin Sulfate n=318	Placebo n=313	P values		
				KL Grade 2 vs 3	CS vs Placebo	Treatment group by KL Grade interaction
Percent treatment responders						
Primary (WOMAC 20)	2	72.6%	63.1%	0.0016	0.1046	0.1668
	3	55.3%	56%			
OMERACT-OARSI	2	71.0%	59.8%	0.0015	0.0721	0.1345
	3	53%	53%			
Change in WOMAC Subscales						
Pain	2	-101.5	-90.3	0.0042	0.0907	0.0753
	3	-59.5	-80.4			
Stiffness	2	-40.7	-37	0.0049	0.0271	0.0120
	3	-18.1	-35.7			
Function	2	-289.6	-218.6	0.0617	0.0100	0.0101
	3	-160.3	-239.2			
Change in Swelling	2	10.6	16.7	0.0508	0.0138	
	3	15.0	24.2			