

Plain Language Summary

Exploring etanercept treatment breaks for people with early axial spondyloarthritis

Axial spondyloarthritis is a long-term form of arthritis. One form is called non-radiographic axial spondyloarthritis, which is defined as axial spondyloarthritis without evidence of inflammation of the sacroiliac joint on x-ray images. Etanercept is approved for treating people with this condition. In this study, researchers wanted to find out if people could stop etanercept without their axial spondyloarthritis getting worse. 209 people participated in this 3-part study. In Part 1, all 209 people received etanercept for 24 weeks. In Part 2, people with inactive disease stopped etanercept for up to 40 weeks. In Part 3, patients who had a disease flare after stopping the etanercept were restarted on etanercept. Fifty-nine percent of the patients achieved inactive disease after 24 weeks of etanercept. When etanercept was withdrawn, 22% had a disease flare within 28 days without etanercept and 75% within 40 weeks of stopping etanercept. All patients who flared received etanercept when their disease flared and, in 62% of patients, the disease again became inactive. Seventy percent of the patients reported a side effect in the first part of the study. The most common side effect was infection, mainly of the nose and throat, while in one patient there was a serious skin infection. Just under 1 in 4 people reported an infection during Part 1.

Inactive disease was maintained in $\frac{1}{4}$ (25%) of patients for 40 weeks after etanercept was stopped. The majority of the people who flared after stopping etanercept had improvements in their symptoms after restarting treatment.