



EUROPEAN LEAGUE AGAINST RHEUMATISM

EULAR

Congress News



5th Annual European Congress of Rheumatology • June 9 – 12, 2004 • ICC Building • Berlin



Friday & Saturday Edition
June 11 & 12, 2004

Scientific Programme

Friday, 10:15 – 12:15

Top Abstract Session

Cutting edge in rheumatology 3 Hall 1

Abstract Sessions

Advances in RA therapy Hall 2

Late breaking abstracts Hall 3

Advances in back pain and rehabilitation Hall 7

Advances in genetics - a molecular basis of

inflammatory diseases Hall 14.2

Advances in osteoporosis Hall 15.2

Advances in heterogeneity in

cytokine contribution Hall 4/5

Advances in epidemiology Hall 6

Advances in Social Leagues Hall 8

Advances in infection related

rheumatic diseases Hall 9

Advances in scleroderma Hall 10

Advances in RA clinical pictures Hall 11A

Advances in SLE - new and old therapies Hall 11B

Advances in SPA - clinical and

therapeutic challenges Roofgarden

Meet the Standing Committee

Allied Health Professional round table Star 2.1

Friday, 14:00 – 15:30

State-of-the-Art / Best Practice

Systemic rheumatic diseases: treatment related morbidity Hall 1

Clinical Science Hall 2

Healing in RA Hall 2

European clinical trials in SLE Hall 3

Neuro-endocrine-immune interactions

in the rheumatic diseases Hall 15.2

Sjogren's syndrome Hall 11A

Joint Session Clinical / AHP / SL

Rehabilitation in rheumatology Hall 7

Challenges in Clinical Practice

Infectious complications of inflammatory

rheumatic conditions Hall 14.2

Basic Science

Joint destruction Hall 4/5

Int'l Forum for Young Rheumatologists

Discussion forum for young rheumatologists:

lessons from animal models - pathogenesis Hall 10

Translational Science

Citrullination of proteins; a clue to RA? Hall 11B

Invited Special Interest Groups

Current trends in rheumatology outcome

measures Roofgarden

Meet the Standing Committee

Electronic data collection Star 2.1

Practical Skills

How to diagnose osteoporosis 2 Star 2.2

Continued on page 2

Professor Smolen Hosts Minister Bulmahn At Opening Ceremony of the Congress



Professor Josef S. Smolen, MD, President of EULAR, presented a bouquet to Edelgard Bulmahn, Federal Minister of Education and Research, Germany, following her address at the opening ceremony on Wednesday evening. Minister Bulmahn pledged her support in response to Professor Smolen's request for funding of rheumatology research.

EULAR Meritorious Service Awards In Rheumatology



Hans Georg Fassbender, MD, PhD, of the University of Mainz, Germany, and Kimmo Aho, MD, of the National Public Health Institute, Helsinki, Finland, were presented with Meritorious Service Awards.

Similarly High Risk Of MI in Diabetics, Patients With RA

Reports presented at the 5th Annual European Congress of Rheumatology underscore the importance of aggressively managing cardiovascular disease risk among patients with rheumatoid arthritis.

In one study of 1991-2001 data from the Nationwide Inpatient Sample, the largest inpatient database in the USA, Gurkupal Singh, MD, of the Department of Rheumatology at Stanford University in California, USA, and colleagues found that in 1991, patients with diabetes were 70% more likely to die if admitted to a hospital with an acute myocardial infarction (AMI) compared to patients with rheumatoid arthritis. However, by 2001 this difference in fatality rates from AMI had diminished, with 7.6% of RA patients dying from AMI compared with 7.7% of diabetes patients.

Mortality rates from AMI among diabetics had decreased by 30%, from 11% in 1991, Dr. Singh observed, and at the same time rates of AMI requiring hospitalizations in this population had stabilized to about 4%.

Rates of AMI requiring hospitalization

Continued on page 4

Zoledronic Acid Linked to Slowed Bone Erosion in RA

The bisphosphonate zoledronic acid appeared to slow the progression of bone erosions in patients with rheumatoid arthritis, according to findings of a small study from Leeds University, UK.

During Thursday's Cutting Edge in Rheumatology session, Steven Jarrett, MD, unveiled the results of the 6-month trial of zoledronic acid, which is the first in the class of bisphosphonate agents shown to prevent bone damage.

It may become standard for all RA patients to "get an infusion to stabilize bone," lead investigator Paul Emery, MD, FRCP, said in an interview prior to the 5th Annual European Congress of Rheumatology. However, he stressed that this approach is still hypothetical at this time.

In the study, 39 patients were randomized to receive 5 mg of zoledronic acid or a placebo given parenterally at baseline and again at 13 weeks. All patients also received methotrexate 7.5 to 20 mg weekly. Use of intramuscular or intra-articular corticosteroids was re-

stricted and use of other disease modifying agents was not allowed.

Comparisons of MRI studies taken at baseline and again at 26 weeks indicated a 61% decrease in the mean change of hand and wrist erosions among patients in the zoledronic acid group compared with those on placebo, (0.9±1.6 vs 2.3±3.1).

Much of this "difference in mean change was attributable to the reduction of erosion progression observed in the wrist (0.7±1.5 with zoledronic acid and 2.0±3.0 with placebo," according to the investigators.

In addition, 33% of patients on zoledronic acid had evidence of new bone edema compared with 57% of patients on placebo.

Three of the 18 patients (16%) treated with zoledronic acid had a decrease in total number of erosions compared with measures at baseline. None of the patients on placebo showed such improvements.

Tolerability of zoledronic acid was comparable to that seen with placebo.

No renal abnormalities developed in either group.

In six previous trials the bisphosphonates pamidronate, alendronate, and clodronate had no significant effect on RA radiographic scores.

"The combination of methotrexate with a potent bisphosphonate in early RA may be entirely comparable to biological therapy," Walter P. Maksymowych, MB, FRCP, professor of medicine in the Division of Rheumatology at the University of Alberta, Edmonton, Canada, noted in an interview. Such an option would carry "significant cost implications in view of the expense of biologicals," However, "further clinical trials are clearly warranted."

Vienna to Host Congress in 2005

Now is the time to mark your calendars to set aside 8-11 June 2005, the dates of the 6th annual European Congress of Rheumatology, to be held in Vienna. We look forward to seeing you there!

Scientific Programme *continued from page 1*

Basic immunology course for clinicians 2	VIP 1
Detection and identification of crystals in synovial fluid: an introductory course 2	VIP 2
Friday, 16:00 – 17:30	
State-of-the-Art / Best Practice	
Current trends in osteoarthritis	Hall 1
PRES	
Paediatric rheumatology for adult rheumatologists: transition to adulthood	Hall 2
Joint Session Clinical / AHP / SL	
Sleep and fatigue in rheumatic disease	Hall 7
Clinical Science	
Vascular issues in systemic sclerosis	Hall 14.2
Regional musculoskeletal pain	Hall 15.2
Skin and the rheumatic diseases	Roofgarden
Basic Science	
Healing	Hall 4/5
Int'l Forum for Young Rheumatologists	
Discussion forum for young rheumatologists: lessons from animal models - pathogenesis (cont'd) and new therapeutic principles	Hall 10
Challenges in Clinical Practice	
The role of surgery in rheumatology: to cut or not to cut	Hall 11A
Translational Science	
Rheumatoid arthritis: from bench to clinic	Hall 11B
Meet the Standing Committee	
Cutting edge science—from the industrial bench to the patient. Scientists from academia meet colleagues from industry	Star 2.1
Practical Skills	
Practical tools to assess disease outcome and functioning in clinical practice and research 2	Star 2.2
Capillaroscopy and rheumatology 2	VIP 1
MRI in inflammatory joint diseases 2	VIP 2
Saturday, 10:15 – 12:15	
State-of-the-Art / Best Practice	
Spondyloarthritis	Hall 1
Clinical Science	
Early and undifferentiated inflammatory arthritis	Hall 2
Glucocorticoids update 2004	Hall 3
EUSTAR scientific session	Hall 14.2
Back pain - frequent problem, but still difficult to handle	Hall 11A
Atherosclerosis	Roofgarden
Challenges in Clinical Practice	
Myositis and SLE	Hall 15.2
Basic Science	
Gene directed identification of new inflammatory pathways	Hall 4/5
Allied Health Professionals	
Developing guidance for practitioners in the assessment, management and monitoring of biological therapies in inflammatory arthritis	Hall 6
Social Leagues	
Making services more accessible to ethnic minority groups	Hall 8
Translational Science	
Inflammation models in paediatric rheumatology	Hall 11B
Practical Skills	
Pathology 2	Star 2.2
Controversial issues in musculoskeletal sonography	VIP 1
Joint-examination taught by patients with RA; another way of teaching health professionals 2	VIP 2

Services on Offer in the Exhibition Areas

A Business Centre and Message Centre are being operated and sponsored by Pfizer at their exhibit stand 12/41. This site offers a meeting point for attendees where they can make use of such technology services as Internet access and email, fax, photocopying, and computers.

Cyber Café in the Exhibition Area

A Cyber Café is being operated and sponsored by Merck Sharp & Dohme in the exhibition area at their stand 14.1/01. Please visit them.

EULAR Prize, Young Investigator Award Winners

At Wednesday evening's opening ceremonies of the 5th annual European Congress of Rheumatology, EULAR President Josef Smolen presented EUR 180,000 in award prizes.

Awards included the prestigious EULAR Prize 2004, the 3 EULAR Young Investigator Awards, the EULAR/Bristol-Myers Squibb Young Investigator Award as well as the 12 EULAR/Abbott Abstract Prizes for Clinical Medicine (6) and Basic Science (6). Here's a look at some of the winners.

EULAR Prize 2004 (EUR 30,000)

This year's EULAR Prize was presented to Professor **Piet L. C. M. van Riel, MD**, and his group in the Department of Rheumatology at University Medical Centre, Nijmegen, The Netherlands for their ongoing work on the development, validation and use of the Disease Activity Score (DAS) and EULAR response criteria for the clinical assessment of rheumatoid arthritis. The DAS is a continuous composite measure of swollen joints, tender joints, acute phase response and general health, which was designed to provide a more accurate description of RA disease activity than each of the activity variables individually.

The introduction of a number of new effective anti-rheumatic agents has led to the need for a revision of current disease activity assessment tools, Professor van Riel noted in his application for the award. He and his colleagues are currently validating the use of the DAS and the EULAR response criteria in clinical trials.

Young Investigator Awards (EUR 30,000)

Andreas Hofmann, PhD, of the School of Biological Sciences and the Institute of Cell and Molecular Biology at the University of Edinburgh, Scotland, received an award for his work in developing steroid derivatives for the treat-

ment of inflammatory diseases. Specifically, Dr. Hofmann is focusing on the bond between steroid derivatives and the glucocorticoid receptor.

Drugs targeting this protein have been successfully used for treatment of asthma, allergic rhinitis, rheumatoid arthritis, leukaemia, as well as heart conditions such as systemic sclerosis, myocarditis and as prophylactic treatment to protect cardiac function. Recently, a new steroid drug that modifies this receptor has been found to be effective and induce relatively mild side effects.

In order to understand the effects of this drug on the receptor, Dr. Hofmann's team will perform biophysical experiments and create a three-dimensional model of the crystal structure as it binds to the receptor. They will also explore the molecular mechanisms of the receptor itself.

The goal of this work is to form the basis for developing steroid derivatives that maximize efficacy and minimize adverse effects.

Floris Alexander van Gaalen, MD, of the Department of Rheumatology at Leiden University Medical Centre, The Netherlands, received an award for his work in the application of micro-array technol-



ogy in the field of autoimmunity, focusing on how autoantibodies can be used to predict the course of rheumatoid arthritis. Specifically, Dr. van Gaalen says he will use his award "to study the fine-specificity, avidity, and isotopes of the anti-citrulline antibody response."

An in depth analysis of the character-

istics of this antibody reaction in relation to clinical outcome, will open new avenues for the development of novel diagnostic tools and could lead to a better understanding of the processes involved in the emergence and progression of RA.

Albert J.W. Zendman, PhD, of the Department of Autoimmune Biochemistry at the University of Nijmegen, The Netherlands,

received his award for research on the role of citrullinated proteins and the autoantibodies directed to these proteins in the development of rheumatoid arthritis. In this study, he focuses on the peptidylarginine deiminase enzymes (PAD) that are responsible for the production of these autoantigenic triggers. One approach involves studying the effect of overexpression (adenoviral) of PAD in mouse models of rheumatoid. Additionally, PAD mutants are generated for structure and function analysis.

EULAR/Bristol-Myers Squibb Young Investigator Award (EUR 30,000)

Rik Lories, MD, PhD, receives his award for work investigating embryonic signaling pathways in chronic arthritis. Dr. Lories received his medical degree summa cum laude from the University of Leuven, Belgium, in 1996 and then subsequently his PhD in 2003 for his dissertation on "Bone Morphogenetic Protein Signaling in Chronic Arthritis."

For the 12 Abbott Award Winners, please see page 14 of the Wednesday–Thursday edition of EULAR CONGRESS NEWS.

EULAR Celebrates Award Winners at Opening Ceremony



Edelgard Bulmahn, Federal Minister of Education and Research, Germany, and Professor Josef S. Smolen, MD, President of EULAR, pose with the winners of the EULAR Prize, the EULAR Young Investigator Awards, the EULAR/Abbott Basic and Clinical Science Abstract Awards, and the EULAR Meritorious Service Awards in Rheumatology.

The Power of Protection

- Clinically proven to **heal more** reflux esophagitis **patients** compared to omeprazole^{1,2}, lansoprazole³ and pantoprazole⁴.
- Faster and sustained **freedom from GERD symptoms** in more patients than omeprazole^{1,2}, lansoprazole³ and pantoprazole⁴.
- **More effective acid control** compared to all other PPIs⁵.



Nexium[®]
esomeprazole

ABBREVIATED PRESCRIBING INFORMATION: Nexium[®] (esomeprazole magnesium). See local prescribing information for full details. **PHARMACODYNAMIC PROPERTIES:** Nexium[®] reduces gastric acid secretion through a highly targeted mechanism of action by being a specific inhibitor of the acid pump in the parietal cell. **INDICATIONS AND DOSAGE:** Treatment of erosive reflux esophagitis: Nexium[®] 40 mg once daily for 4–8 weeks. Long-term management of patients with healed esophagitis to prevent relapse: Nexium[®] 20 mg once daily. Symptomatic treatment of gastro-esophageal reflux disease: Nexium[®] 20 mg once daily in patients without esophagitis. Once symptoms have resolved, an on demand regimen of 20 mg once daily can be used when needed, to control subsequent symptoms. *Helicobacter pylori*-associated peptic ulcer disease: Healing of *H. pylori*-associated duodenal ulcer, prevention of relapse of peptic ulcers in patients with *H. pylori*-associated ulcers: Nexium[®] 20 mg, amoxicillin 1 g and clarithromycin 500 mg, all bid for 1 week, USA – Nexium[®] 40 mg once daily, amoxicillin 1 g and clarithromycin 500 mg twice daily, all for 10 days. **CONTRAINDICATIONS:** Known hypersensitivity to esomeprazole, substituted benzimidazoles or any other constituents of the formulation. **WARNINGS AND PRECAUTIONS:** In the presence of any alarm symptoms (e.g. significant unintentional weight loss, recurrent vomiting, dysphagia, haematemesis or melena) and when gastric ulcer is suspected or present, the possibility of gastric malignancy should be excluded before treatment is initiated. **INTERACTIONS:** Due to the decreased intragastric acidity, the absorption of ketoconazole and itraconazole can decrease during esomeprazole treatment. Concomitant administration of esomeprazole resulted in a 45% decrease in clearance of diazepam. Concomitant administration of esomeprazole resulted in a 13% increase in trough plasma levels of phenytoin in epileptic patients; but dose adjustments were not required in this study. In healthy volunteers, combined therapy with esomeprazole and cisapride resulted in a 32% increase in AUC and a 31% prolongation of elimination half-life but no significant increase in peak plasma levels of cisapride. Concomitant administration of 40 mg esomeprazole to warfarin-treated patients showed that, despite a slight elevation in the trough plasma concentration of the less potent R-isomer of warfarin, the coagulation times were within the accepted range. However, as with all patients receiving warfarin, monitoring is recommended during concomitant treatment with esomeprazole. **PREGNANCY AND LACTATION:** Caution should be exercised when prescribing Nexium[®] to pregnant women. Nexium[®] should not be used during breast-feeding. **UNDESIRABLE EFFECTS:** The following adverse drug reactions have been identified or suspected in the clinical trials programme. None was found to be dose related. Common: Nausea/vomiting, diarrhoea, constipation, abdominal pain, flatulence and headache. Uncommon: Dermatitis, pruritus, urticaria, dizziness and dry mouth. From marketed use, there have been rare reports of increased liver enzymes and of hypersensitivity reactions e.g. angioedema, anaphylactic reaction. For further information please contact AstraZeneca, SE-431 83 Mölndal or the local AstraZeneca subsidiary.

Nexium[®] is a registered trademark of the AstraZeneca group of companies.

References: 1. Richter JE et al. Am J Gastroenterol 2001;96:656–65. 2. Kahrilas PJ et al. Aliment Pharmacol Ther 2000;14:1249–58. 3. Castell DO et al. Am J Gastroenterol 2002;97:575–83. 4. Labenz J et al. Can J Gastroenterol 2004; vol 18 Suppl A. 5. Miner P et al. Am J Gastroenterol 2003;98:2616–20.

A Guiding Star in Gastroenterology

www.gastrosource.com

AstraZeneca 

Findings Yield Clues to Risk of Disease Progression in Paediatric CNS Vasculitis

Risk of progression of primary central nervous system vasculitis in children can be predicted using clinical, radiological and histological findings, said Susan Benseler, MD, at the 5th Annual European Congress of Rheumatology.

"Until now, the information we had came from autopsy reports. Therefore, there have been no clinical guidelines for treatment," said Dr. Benseler, of the Department of Paediatric Rheumatology at University Children's Hospital in Bonn, Germany,

Dr. Benseler and her colleagues retrospectively studied 66 children who were diagnosed with primary central nervous system (CNS) vasculitis from 1990 through 2002.

All children had vasculitis confirmed by imaging with conventional angiography and/or mag-

netic resonance angiography, or by brain biopsy. Progressive vasculitis was defined as progression of stenosis at more than 3 months after the initial angiogram.

The investigators stratified the children into three groups: those who were angiography-positive with non-progressive disease (42 children), those who were angiography-positive with progressive disease (20 children), and those who were angiography-negative (4 children).

Children with angiography-positive findings and progressive disease were more likely to present with neurocognitive dysfunction, headaches, multifocal and/or bilateral MR lesions and multiple, bilateral or peripheral stenoses.

Those who were angiography-positive with non-progressive disease were more likely to present with a stroke, unifocal MR lesions, and proximal large vessel stenoses on angiography. ■

Gala Dinner at the Deutsches Technikmuseum

Please join us tonight—Friday, 11 June—for the EULAR Gala Dinner in the German Museum of Technology. Built in 1982, the museum is located on the original site of the Anhalter freight station, where you will find one of the original round train sheds intact. Entry to the engine shed to view this fascinating exhibit requires presentation of your invitation card. The dinner itself will take place in the newer building of the museum. The party starts at 20:15 and is scheduled to last until 23:00. Admission is EUR 130 per person.

Prof. Gross Focuses On Rheumatology Training in Germany

Professor Wolfgang L. Gross, MD, President of the German Society for Rheumatology and President of the EULAR 2004 Local Organizing Committee noted in a press conference on Thursday the challenge



FOTO KIRSCH

of assuring that all rheumatology patients in Germany receive adequate care. Many patients who go to generalists receive inadequate drug therapy; 43% get DMARDs compared to the 91% who go to rheumatologists.

A new government initiative aimed at establishing an independent continuous medical education system in Germany should help to promote standards of care. More focus on rheumatology training also is needed; only 7 of 35 German university clinics have a chair devoted to rheumatology, Professor Gross said. ■

Similarly High Risk Of MI in Diabetics *Continued from page 1*

among patients with RA, meanwhile, increased by 47% from 2,748 to 5,368 cases.

"Significant declines in AMI case-fatality rates have only occurred in patients with [diabetes] perhaps because of early recognition and aggressive preventive and therapeutic measures," Dr. Singh said. He stressed that patients with RA presenting with signs and symptoms of AMI should be stratified as having a risk level similar to that of diabetic patients with AMI.

In a second study, Canadian researchers reported that the use of disease-modifying antirheumatic drugs (DMARDs) was associated with a lower risk of AMI in patients with RA.

Samy Suissa, PhD, Professor of Clinical Epidemiology at Royal Victoria Hospital, McGill University Health Centre in Montreal, Canada, and colleagues conducted a case-control study using two

large health insurance company databases, which included data on 41,885 DMARD users.

Among the DMARD users there were 268 cases of AMI from 1998 to 2001, representing a rate of 5.2 per 1,000 patients per year.

In a comparison of each AMI case with 10 randomly selected controls, current use of all DMARDs, including methotrexate, leflunomide, and anti-TNF-alpha agents was associated with a 40% reduction in the risk of AMI. "We don't know if this is an effect of the [DMARD] itself or an indirect effect," he said. Possibly, the drugs reduce disease activity and this reduction is providing the benefit.

The use of selective COX-2 inhibitors was associated with a 70% increase in AMI risk. This increased risk was not seen with traditional NSAIDs or glucocorticoids. ■

EULAR 2004 Registration Exceeds 9,300

Over 9,300 participants from 93 countries are represented at this year's Congress, according to Ernst Isler, Congress Coordinator. The largest Congress to date additionally features the most extensive content to date with nearly 300 lectures, 187 oral abstracts, and 114 sessions.

EUSTAR Group Announces Initial Data

The 9-month results from the new EULAR Scleroderma Trial and Research group (EUSTAR) will be presented on Saturday from 10:15-12:15 in Hall 14.2, according to Marco Matucci Cerinic, MD, PhD, professor of rheumatology and medicine at the University of Florence, and EULAR General Secretary.

The mission of EUSTAR is to foster the understanding and management of scleroderma throughout Europe. The group reflects the growing spirit of collaboration in research, Professor Matucci Cerinic explained. Initiated in 2003, EUSTAR patient data collection began in September. Of 107 affiliated

centers, there are now 54 active centers with a total of more than 1200 patients. In addition to Professor Matucci Cerinic (chair) the elected members of the EUSTAR group include Alan Tyndal, MD, (secretary), Ulf Muller Ladner, MD, (treasurer), and its four counselors: Chris Denton, Dominique Farge, Otylia Kowal, and Laszlo Czirikjak. A EUSTAR course for assessment of the scleroderma patient is scheduled for January 2005 in Budapest. The final announcement of the meeting will be made at the beginning of October, and registration and additional information will be posted at the group's website, www.eustar.org. ■

Satellite Programme

Friday, June 1, 2004

08.15 – 09.45, Hall 2

The True Picture of Non-Specific NSAID Risk: Seeing is Believing

Pfizer

Introduction

Why Should Rheumatologists Care About GI Risk?

What Problems Do NSAIDs Cause in the Upper GI Tract?

Is Nonspecific NSAID-Related Intolerance Age Specific?

What Problems Do NSAIDs Cause in the Lower GI Tract?

Unraveling the Mystery Of NSAID-Related Small Bowel Disease

08.15 – 09.45, Hall 3

Setting Higher Performance Goals for Patients with Rheumatic Disease

Wyeth Pharmaceuticals

Remission in Rheumatic Disease: Is it a Realistic Goal?

Remission Under the Surface: Assessing and Monitoring Structural Damage in Rheumatic Disease

Raising Patients' Expectations in the Treatment of Rheumatic Disease: How Much Can They Expect?

Improving the Value of Treatment in RA Patients

Summation

Question and Answer Session

08.15 – 09.45, Hall 14/2

Paracetamol plus Tramadol: A New Option in Treating Musculoskeletal Pain

Grünenthal

Chairman's introduction

The Significance of Combining Analgesics in Musculoskeletal Pain

Pain Relief in Osteoarthritis: The Rationale for Combination Therapy

Quality-of-Life in Low-Back Pain: A Relevant Outcome of Pain Therapy

08.15 – 09.45, Hall 7

Osteoarthritis- New Etiologic and Therapeutics Insights

Merckle

New Concepts and New Targets in Pain and Inflammation

Inflammation and Osteoarthritis

Structure Modification and Assessment—Imaging and Biomarkers

Panel Discussion—Question and Answer Session

18.00 – 19.30, Hall 2

Improving Outcomes in the Spondyloarthropathies:

ESSEX Pharma GmbH

What's New? What's Controversial? What's Practical?

Intensive Management of the Spondyloarthropathies: Why We Need To Consider a New Treatment Paradigm?

TNF-Inhibitors for the Treatment of Spondyloarthropathies: What Are The Differences?

Managing Gut and Eye Involvement Related To Spondyloarthropathies: When Is Intensive Treatment Warranted?

Achieving and Maintaining Remission In Psoriatic Disease: How Effective Are Biologics on Joint and Skin Manifestations?

Question and Answer Session

18.00 – 19.30, Hall 3

Selective Co-Stimulation Modulation: An Emerging New Strategy in Rheumatoid Arthritis Therapy

Bristol-Myers Squibb

Chairman's Opening

Underlying Immune Mechanisms in RA

Targeting T-Cell Activation Through Selective Co-Stimulation Modulation

Evolving Clinical Profile of the First in Class Selective Costimulation Modulator for RA Therapy

Closing Remarks

New Data For Abatacept Show Promising Results For Treatment Of Rheumatoid Arthritis

(BERLIN, GERMANY, June 2004) – Researchers at the European League Against Rheumatism (EULAR) scientific meeting presented clinical data from a phase II study of abatacept (also known as CTLA4Ig or BMS-188667), a novel investigational agent for the treatment of rheumatoid arthritis currently in phase III development by Bristol-Myers Squibb Company.

Rheumatoid arthritis is an autoimmune disease with inflammatory consequences. T-cells play an important role in an immune response. T-cells require a primary as well as a secondary, or co-stimulatory, signal for full activation. Activated T-cells orchestrate the inflammatory processes and function of multiple cell types implicated in rheumatoid arthritis.

Researchers are currently conducting studies to investigate whether abatacept, the first in a new class of selective co-stimulation modulators, can be used to treat rheumatoid arthritis by interrupting the co-stimulatory signal required for full T-cell activation. Because of the important role of the T-cell in an immune response, selective co-stimulation modulation may reduce the downstream inflammatory cascade and the resulting joint damage and destruction.

Eight scientific presentations involving studies of abatacept are scheduled for EULAR. The data were primarily generated from a phase II study recently published in the *New England Journal of Medicine*, which reflected six-month study results. The data presented at EULAR are based on the 12-month results from this study which included 339 patients with rheumatoid arthritis.

One percent of the world's population suffers from rheumatoid arthritis. The condition, which leads to joint swelling, pain, and often disfigurement, is more common in women than in men. Three out of four patients diagnosed with rheumatoid arthritis are women.

Rik Lories Receives Inaugural EULAR/Bristol-Myers Squibb Young Investigator Award

(BERLIN, June 2004) – The European League Against Rheumatism (EULAR) announced that Dr. Rik Lories of the University of Leuven in Belgium is the inaugural winner of the EULAR/Bristol-Myers Squibb Young Investigator Award.

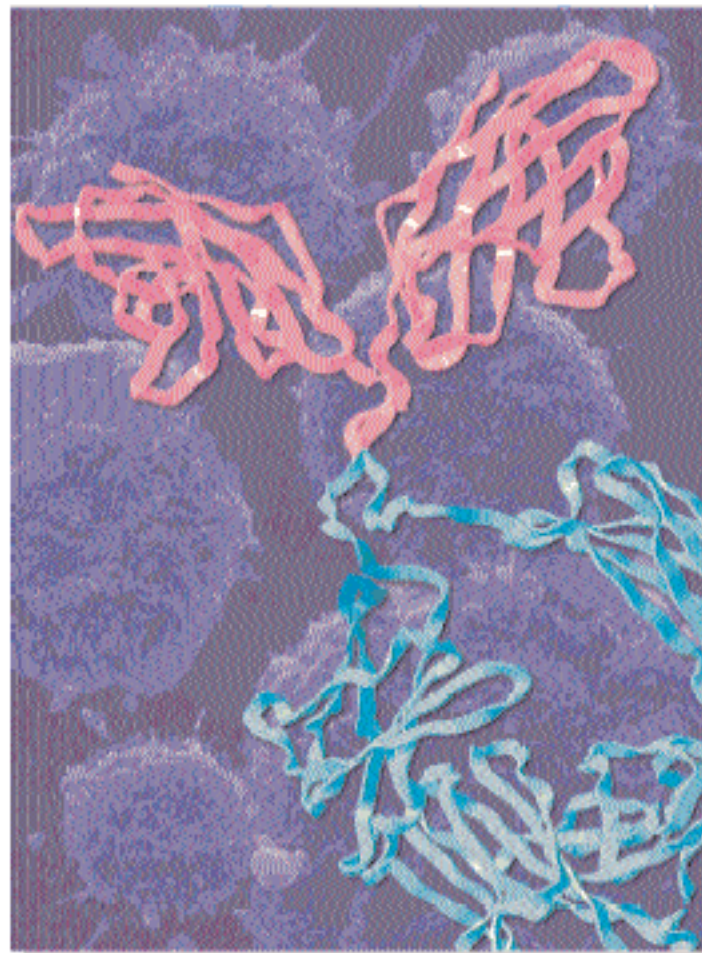
Dr. Lories received the honor based upon his research project entitled, "Bone morphogenetic protein signaling in rheumatoid arthritis." By being selected for the award, Dr. Lories will receive 30,000 Euro to support his research efforts.

"I am gratified that the selection committee has recognized my research in this way," said Dr. Lories, who is a rheumatologist in the Department of Rheumatology and the Laboratory for Skeletal Development & Joint Disorders at the University of Leuven. "For young investigators, opportunities such as this are important to spark groundbreaking research in rheumatoid arthritis that is trying to bridge the gap between basic science and clinics. This is also recognized by EULAR as demonstrated by the introduction of translational research sessions into the EULAR scheme."

Dr. Lories earned his medical degree and Ph.D. at the Catholic University, Leuven, Belgium. His original research work has been published in a number of international

rheumatology journals, in addition to presentations at international medical meetings.

"We are pleased to be able to provide these types of awards to young investigators and to encourage innovative research," said Professor Josef Smolen, EULAR President and Professor of Internal Medicine and Chairman of the Department of Rheumatology at Vienna General Hospital, Medical University of Vienna, Austria. "We are appreciative of our corporate partners who work with us to spotlight the novel research taking place in the field of rheumatoid arthritis."



Bristol-Myers Squibb is a global pharmaceutical and related health care products company whose mission is to extend and enhance human life.

2004 Exhibitors

AAG 12/11
c/o Professor Anthony Woolf, Royal Cornwall Hospitals NHS Trust, Truro TR1 3LJ, United Kingdom — The aim of Arthritis Action is to raise the profile, awareness and understanding of musculoskeletal conditions (arthritis and pain) and their impact on people in Europe. The initiative is driven by a group of leading physicians and academics specialising in the management of musculoskeletal conditions. Its Patient Partners effort is the only global, patient-led education programme of its kind. The programme involves more than 600 people with arthritis who are specially trained to educate medical students and physicians on conducting musculoskeletal examinations.

ABBOTT LABORATORIES 15.1/06
200 Abbott Park Road, Abbott Park, IL 60064, USA — Abbott Laboratories is marketing Adalimumab (Humira), a fully human Anti-TNF alpha monoclonal Antibody, for the treatment of rheumatoid arthritis (RA). Humira has shown impressive as well as sustained clinical effects in an extensive clinical development programme. In addition, Humira provides convenience to the patients with a ready-to-use syringe and every-other-week dosing. Humira is indicated in EU for the treatment of moderate to severe, active RA in adult patients when the response to disease-modifying antirheumatic drugs including MTX has been inadequate. To ensure maximum efficacy, Humira is given in combination with MTX. Humira can be given as monotherapy in case of intolerance to MTX or when continued treatment with MTX is inappropriate.

ACTELION PHARMACEUTICALS 15.1/05
Gewerbestrasse 16, 4123 Allschwil, Switzerland — Actelion Ltd, a biopharmaceutical company, is a leading player in innovative science related to the endothelium—the single layer of cells separating every blood vessel from the blood stream. With a focus on the discovery, development, and marketing of innovative drugs for unmet medical needs, Actelion's first drug, Tracleer, an oral dual endothelin receptor antagonist, has been approved for the treatment of pulmonary arterial hypertension.

ALMIRALL 17/21
General Mitre 151, 8022 Barcelona, Spain — ALMIRALL the first Spanish multinational pharmaceutical company with large experience in R&D, provides society with innovative drugs to combat disease, thus helping to improve health and quality of life. One of its drugs is aceclofenac, a NSAID launched in over 60 countries and used by more than 75 million people worldwide since its launch. Many international clinical trials with aceclofenac demonstrate an equal efficacy to other NSAIDs but with an improved tolerability profile.

AMERICAN COLLEGE OF RHEUMATOLOGY 17/29
1800 Century Place, Suite 250, Atlanta, GA 30345, USA — The American College of Rheumatology (ACR) is the professional organisation of physicians, health professionals, and scientists that advances rheumatology through programmes of education, research and advocacy. Stop by the ACR's exhibit stand for information on the 68th Annual Scientific Meeting, Oct. 16-21, 2004, San Antonio, Texas. The ACR's website is www.rheumatology.org.

AMGEN EUROPE B.V. 12/06
Minervum 7061, 4817 ZK Breda, Netherlands — The world's largest biotechnology company, Amgen Inc. strives to dramatically improve people's lives. The company discovers, develops, and delivers important human therapeutics based on advances in cellular and molecular biology including Epoetin (Epoetin alfa), Aranesp (darbepoetin alfa), Neupogen (Filgrastim), Neulasta (pegfilgrastim), Enbrel (etanercept), and Kineret (anakinra). Amgen's dedication to science and innovation is driven by a commitment to serve patients.

ANAMAR MEDICAL AB 12/09
Rapskatan 7, 75174 Uppsala, Sweden — AnaMar was founded in 1998. The company currently employs 13 people and is situated in Uppsala and Lund, Sweden. During its first years of operation AnaMar focused on the development of a biomarker (COMP), which currently is marketed worldwide through leading resellers such as Inova, Abbott and Pharmacia. AnaMar has also an ongoing drug development programme. The company has so far developed two drug concepts and has identified a first lead structure within each of these concepts.

ANIKA THERAPEUTICS, INC. 12/13
160 New Boston Street, 1801 Woburn MA, USA — Anika Therapeutics develops, manufactures, and commercializes therapeutic products intended to repair, protect, and heal bone, cartilage, and soft tissues. OrthoVisc is a noninflammatory, highly pure, high-molecular-weight, highly concentrated, high-viscosity, non-cross-linked hyaluronan for intra-articular injection. It serves as a viscoelastic supplement or as a replacement for synovial fluid in human joints. OrthoVisc is intended to relieve pain and improve joint mobility in patients who are suffering from osteoarthritis.

APLAR 2004 17/39
Kangnam St. Mary's Hospital, 505 Banpo-dong 137-701 Seoul, South Korea — The 11th Asia Pacific League of Associations for Rheumatology congress (APLAR 2004) will take place at Jeju Island, Korea from September 11-15, 2004. The theme of this year's congress is "Future in rheumatology: from bench to bedside," and more than a hundred well-known speakers from around the world will attend. Also, there will be the chance to contribute to the advancement of rheumatology by exchanging your ideas and clinical experiences with other members. The organizing committee looks forward to meeting many delegates on the beautiful island of Jeju on the occasion of the 11th APLAR Congress. Official website: www.aplar2004.com

ASTRAZENECA 17/01
Pepparedsleden 1, 431 83 Mölndal, Sweden — AstraZeneca is an international pharmaceutical company with research focused on areas of disease in which its proficiency can satisfy important medical needs. The current portfolio of products in AstraZeneca's prioritised areas (gastrointestinal, cardiovascular, respiratory, pain/anaesthesia/infection, oncology, and CNS) bears testimony to the AstraZeneca Way in R&D. Important gastrointestinal products are Nexium, the first proton pump inhibitor (PPI) developed as an isomer; Entocort; and Losec.

AVENTIS 15.1/10
20 Avenue Raymond Aron, 92160 Antony, France — As a global pharmaceutical company, we offer a range of leading brands for therapeutic areas such as diabetes, oncology, cardiovascular disease, allergy/respiratory, bone, and human vaccines. We have a commercial presence in approximately 85 countries and our products are available in more than 170. Arava (leflunomide) is an oral disease-modifying antirheumatic drug indicated for the treatment of active rheumatoid arthritis in adults. Arava has a unique mode of action and has demonstrated a high and sustained efficacy for up to 5 years. Actonel (risedronate sodium) is the only osteoporosis treatment that consistently provides rapid efficacy and offers fracture protection within 1 year—a primary goal of osteoporosis treatment according to the International Osteoporosis Foundation.

AXIS-SHIELD PLC 12/02
The Technology Park, Dundee DD2 1SW, United Kingdom — Axis-Shield is a global manufacturer of in-vitro diagnostic kits with a focus on new markers in cardiovascular, rheumatoid, infectious and alcohol-related diseases, diabetes, dementia, and near patient testing to facilitate improved patient management. Axis-Shield has introduced the Diastat Anti-CCP (cyclic citrullinated peptide) ELISA test. This novel marker has been shown to be present very early in the disease, very specific (98%) and as sensitive as the RF(IgM) test (80%). Furthermore, antibody presence has been shown to be correlated to disease severity. News releases and other company information are available at www.axis-shield.com.

BIONICHE PHARMA GROUP 12/15
Unit 6, Casla Ind. Est, Casla, Galway, Ireland — Suplasyn md is a sterile sodium hyaluronate solution uniquely designed for viscoelastic supplementation of the small synovial joints. Available in prefilled syringes (7 mg/0.7 mL). Suplasyn is a sterile sodium hyaluronate solution for synovial fluid replacement therapy in larger joints such as the knee. Available in prefilled syringes (20 mg/2 mL). Suplasyn and Suplasyn md have been shown to be beneficial in osteoarthritis for the management of pain and improvement in physical function of joints.

BIOSCIENCE EDIPRINT INC. 12/08
16 rue A.-Gavard, 1227 Geneva, Switzerland — Bioscience Ediprint Inc. is an international publisher specializing in medical publications for hospitals, universities, clinics, and research centers. Special attention is given to official institutions (governmental and nongovernmental) and to pharmaceutical companies. Please visit our stand no 12/08 and ask for the latest samples of our publications.

BOEHRINGER INGELHEIM 15.1/09
Binger Straße, 55216 Ingelheim am Rhein Germany — Mobic (meloxicam), a nonsteroidal anti-inflammatory drug indicated for symptomatic treatment of painful osteoarthritis, rheumatoid arthritis, and ankylosing spondylitis. Contraindications: hypersensitivity; cross sensitivity to acetylsalicylic acid and other NSAIDs; asthma, nasal polyps, angio-oedema or urticaria following the administration of acetylsalicylic acid or other NSAIDs; active peptic ulceration; severe hepatic or renal insufficiency; pregnancy or breastfeeding; children under 12 years.

BRISTOL-MYERS SQUIBB 17/03
3 Rue Joseph Monier, 92506 Rueil Malmaison France — Bristol-Myers Squibb makes a significant contribution to rheumatoid arthritis therapy through its pain management and innovative research. Bristol-Myers Squibb leads Europe with its paracetamol brands: Efferalgan, Dafalgan, and Perfalgan. The company is evaluating T-cell costimulation modulation with abatacept as a unique therapeutic strategy in rheumatoid arthritis. Bristol-Myers Squibb is a global pharmaceutical and related health care products company whose mission is to extend and enhance human life.

BRITISH SOCIETY FOR RHEUMATOLOGY 17/38
41 Eagle Street, London WC1R 4TL, United Kingdom — BSR is the UK professional organisation for those working in rheumatology, with 1400 members (including 450 international). BSR publishes a wide range of information on service, guild, and clinical issues, in addition to its journal "Rheumatology," and it maintains an extensive website. The society also manages its flagship project, the Biologics Register, which monitors the treatment of patients on anti-TNF alpha drugs. Visit the BSR's stand for copies of our literature and information about the journal "Rheumatology."

CSC PHARMACEUTICALS HANDELS GMBH 17/13
Gewerbestrasse 18-20, 2102 Bisamberg, Vienna, Austria — CSC Pharmaceuticals Handels GmbH is a pharmaceutical company based in Austria with operations in Central and Eastern European countries. Rheumatology is one of the main therapeutic areas of our interest. Information about products will be available at our stand: Aulin nimesulide, DayRun oxaprozin, FlexodonA glucosamine + chondroitine sulphate, Hyalgan hyaluronic acid, Hyalograft cartilage engineering, Piascledine ASU, Prontoket ketoprofen spray, viatromb heparin liposomal spray.

DEUTSCHE RHEUMA-LIGA 17/32
Maximilianstrasse 14, 53111 Bonn, Germany — Help and self help organisation for people with all kind of rheumatic diseases. 250,000 individuals are member in the organisation that works for the benefit of patients all over Germany. The organisations website is www.rheuma-liga.de and its 2004 campaign is "Die erste Liga, wenn's um Rheuma geht," or "Approaching people with arthritis/rheumatism in age of 35-50."

DEUTSCHE VEREINIGUNG MORBUS BECHTEREW 17/35
Metzgergasse 16, 97421 Schweinfurt, Germany

DS MEDICA SRL 17/31
Viale Monza 133, 20125 Milano, Italy

Instruments include the Videocapillaroscopic Videocap—an optical probe and polarized light videocapillaroscopy in microvascular clinical practice and research—and the Videocap Net—the first digital handheld immersion and polarized light capillaroscopy for specialized medicine. The company also publishes the Atlas of Capillaroscopy. The aim of this atlas is to provide a gallery (676 high-quality colour pictures) of the most representative capillaroscopic pictures in patients with rheumatic diseases.

ELI LILLY & COMPANY 15.1/08
Lilly Corp. Center, D.C. 5016, Indianapolis, IN 46285, USA

Evista (Raloxifene HCl), the first SERM, acts through the estrogen receptor in bone and affects bone-signaling molecules, resulting in decreased osteoclast activity. Evista provides protection for postmenopausal women, without vasomotor symptoms, who have had a vertebral fracture or are at risk for experiencing a vertebral fracture. Forsteo (Teriparatide rDNA origin injection), the first approved bone formation agent, increases the number and activity level of osteoblasts to form new bone. Forsteo is indicated for patients with established/severe osteoporosis or at high risk for experiencing another vertebral or nonvertebral fracture.

ESAOTE 12/32
Via Siffredi 58, 16153 Genova, Italy — Esaote, part of the Bracco Group, is a global leader in research, production, and marketing of medical diagnostic equipment and related services. Ultrasound is the core business of Esaote with products ranging from highly portable devices to high-end digital multi-application units and dedicated systems for contrast ultrasound scanning. Esaote is a market leader in dedicated MRI with a focused attention on the application of MRI in rheumatology. Esaote is actively supporting research on MRI for rheumatology pathologies in collaboration with major institutes mainly in Europe.

ESSEX PHARMA GMBH 15.1/07
2000 Galloping Hill Road, K-1-3/3040, 7033 Kenilworth, NJ, USA — Remicade is a monoclonal antibody that targets and binds to TNF-alpha. It is the only biologic indicated for Crohn's disease, rheumatoid arthritis, and ankylosing spondylitis. Remicade is the most well characterized TNF-alpha, with over 10 years of clinical and safety data and more than 500,000 patients treated. It is unique among available anti-TNF therapies in that it provides the convenience of in-office treatment. Schering-Plough markets Remicade in all countries outside of the U.S., except Japan and parts of the Far East, where Remicade is marketed by Tanabe

Seiyaku, Ltd. Centocor Inc. a wholly owned subsidiary of Johnson & Johnson, has marketing rights to the product in the U.S.

EULAR 15.1/02
Wittikonstrasse 15, 8032 Zürich, Switzerland — The aims of EULAR are to reduce the impact of rheumatic diseases on the individual and society and to improve the social position of people with rheumatic diseases in Europe. Therefore EULAR shall stimulate, promote, and support the research, prevention, treatment, and rehabilitation of rheumatic diseases. For this purpose, rheumatic diseases shall be defined as diseases of connective tissue and medical disorders of the musculoskeletal or locomotor system.

EUROIMMUN 15.1/04
Seekamp 31, 23560 Lüneburg, Germany — EUROIMMUN produces an extensive range of indirect immunofluorescence, microplate ELISA, immunoblot (Euroassay, Euroline, Westernblot), and radioimmunoassay test systems for laboratory diagnostics in the areas of autoimmunity, infectious serology and allergology. Numerous patented technologies have been developed, among them Biochip technology and Titerplane technique, which considerably simplify and standardize immunological analyses. EUROIMMUN supplies its products and services to over 2,000 laboratories worldwide.

EYELED GMBH 17/23
Stuhlsatzbauweg 69, 66123 Saarbrücken, Germany — Eyeled GmbH offers information solutions for PDAs, Smart Phones, and Web Pads. We develop customized and user-oriented applications of the very highest quality. The wide-ranging technological expertise of our specialists enable them to create streamlined solutions which are then integrated in the existing IT environment. Our activities include strategy, technology, and innovation counselling; company solutions; communication solutions; and visitor information systems for exhibitions, congresses, and museums.

FIDIA FARMACEUTICI S.P.A. 17/13
Via Ponte della Fabbrica 3/A, 35031 Abano Terme PD, Italy — Fidia and its associated companies operate worldwide to develop and market innovative health care products mainly based on naturally occurring hyaluronic acid (HA) and its derivatives. Fidia has developed proprietary breakthrough technology in the field of human tissue regeneration—from skin and cartilage to connective tissue—for treating severe pathologies such as knee OA with its worldwide available i.a. injectable product Hyalgan/Hyalart.

FÖRDERVEREIN BERLINER SCHLOSS E.V. 17/48
Postfach 560220, 22551 Hamburg, Germany — The Berlin Castle was the centre of the city of Berlin for many centuries. Dating back to the 15th century, it was turned into a remarkable baroque castle over time, and it served as the residence for various royal dynasties. In February of 1945, a fire following an air raid almost completely destroyed the building. The government of the GDR later tore down the ruins to form a large square in the centre of East Berlin. After the fall of the Berlin Wall, plans came up to reconstruct the original Berlin Castle. Despite the support of the German Parliament, the Senate of Berlin, and other political and cultural organisations, the funding of this plan remains critical. The "Foerderverein Berliner Schloss" is one of the fund-raising initiatives for this project.

FRESENIUS MEDICAL CARE DEUTSCHLAND GMB 15.1/01
Else-Kroener-Strasse 1, 61352 Bad Homburg Germany — Fresenius Medical Care recently incorporated adsorber therapy into its business. Immunoabsorption therapy using ProSORBA offers new perspectives to patients with moderate to severe, active rheumatoid arthritis unresponsive or contraindicated to standard drug therapies. ProSORBA fulfills the requirements of "evidence based medicine". A clinical trial has shown that in 42% of patients who do not respond to medication, the ProSORBA therapy resulted in significantly reduced symptoms.

GE HEALTHCARE LUNAR 12/14
Kouterveldstraat 20, 1831 Diegem, Belgium — Visit GE Healthcare Lunar at booth 12/14 to learn about our complete line of bone densitometers: Prodigy Advance, the high-end densitometer with Direct Digital Technology; DPX Bravo, a compact solution with high quality performance; Achilles Insight, a reliable ultrasound. In addition, GE Ultrasound Imaging systems offer excellent musculoskeletal imaging as well as a sensitive color and power Doppler feature.

GELITA HEALTH INITIATIVE 17/26
Uferstrasse 7, 69412 Eberbach, Germany — GELITA CH alpha® is a liquid nutritional supplement offered in 25 mL-ampoules for daily intake. The product contains highly purified collagen hydrolysate (CH alpha) that provides the collagen specific amino acids proline and glycine and stimulates the synthesis of the cartilage matrix. It is beneficial to those individuals suffering from degenerative joint wear and tear and helps to regenerate stressed joint cartilage. The effects are shown in numerous laboratory experiments and clinical trials.

GENESIS DIAGNOSTICS LTD 17/24
Eden Research Park, Henry Crabb Road, CB6 1SE Littleport, Cambridgeshire, United Kingdom — Genesis Diagnostics is a specialist company in autoimmune kit production and are the first company to offer a citrullinated flagrin antibodies (CPA) test panel. Genesis have pioneered the development of class specific CPA-IgG, CPA-IgM, CPA-IgG and CPA Screening kits. Since some RA patients do not have IgG antibodies, the importance of measuring CPA-IgM and IgA is clear. The Genesis CPA kits have high sensitivity and specificity for the early detection of rheumatoid arthritis. The tests are easy to use and can be automated for high throughput volumes.

GENZYME BIOSURGERY 12/12
4620 Kingsgate, Cascade Way, Oxford Business Park South, OX4 2SU Oxford, United Kingdom — Practice your intra-articular injection technique on our interactive hip simulator and discuss the benefits of Synvisc for your OA patients on Stand 12/12. One Synvisc treatment course can relieve the pain and immobility of knee OA for up to 12 months and the product is also clinically proven and approved for use in the hip. Effective in all disease stages, viscosupplementation with Synvisc is ideal when patients' symptoms are not controlled by pharmaceutical therapies, when NSAIDs are contraindicated, or when surgery should be delayed or avoided.

GRAPHNET <THE XML PEOPLE> 17/43
 Graphnet has a proven track record in providing information solutions to meet specific clinical, financial and technical challenges that healthcare faces today. Harnessing over 10 years experience of working with the National Health Service in the UK, Graphnet applies leading-edge XML technology and consultancy to help healthcare organisations reap real benefits. Healthcare is evolving fast. Graphnet solutions are flexible and easy to migrate, delivering benefits today and paving the way for the future.

GRÜNENTHAL GMBH 12/03
Zieglerstraße 6, 52078 Aachen, Germany — Grünenthal GmbH is a research-oriented European pharmaceutical company based in Germany. Core activities are the development of new analgesic medicines and the improvement of pain management by quality initiatives and educational tools. Grünenthal GmbH is the originator of the centrally acting analgesic tramadol (Tramal), which occupies a key role in the treatment of moderate to severe cancer and non-cancer pain. With Transtec, an innovative buprenorphine patch, and Zaldiar, a rationale analgesic combination, Grünenthal en-

riches the armamentarium to treat acute and chronic pain of different aetiologies. Over the years, the company has set up affiliates and strategic alliances worldwide.

HELSSINN HEALTHCARE 17/13
PO Box 357, 6915 Pambio-Noranco, Switzerland — Helsinn Healthcare SA is a licensing Swiss-based pharmaceutical company. Its main focus is to develop and license innovative and valuable pharmaceutical compounds from early clinical stages of development up to the highest quality standards (European and the U.S. requirements). Helsinn Healthcare organises its international network of competent and distinguished partners by offering continuous and professional support. Our main products are Nimesulide, Oxaprozin, Palonosetron, Gelclair, Fentiazac, Klean-Prep, Melatonin, and Rapolyte. www.helsinn.com.

IBSA - LABORATOIRES GENEVRIER 12/18
Via del Piano, PO Box 266, 6915 Pambio-Noranco, Switzerland — IBSA is an international pharmaceutical company fully committed to tailored therapeutic solutions for osteoarthritis, including a full range of formulations and strengths of oral chondroitin sulphate (Condrosulf/Chondrosulf/Condra), an intra-articular hyaluronic acid (Sinovial), and an innovative, patented epolamine salt of diclofenac (Flector EP). Laboratoires Genevrier is IBSA's French sister company. Osteoarthritis focused, it is a market leader in the domestic chondroprotection market.

ILAR 17/44
 International League of Associations for Rheumatology.

INOVA DIAGNOSTICS, INC. 17/10
10180 Scripps Ranch Blvd, 92131 San Diego CA, USA — INOVA Diagnostics, Inc. develops, manufactures, and sells a complete menu of autoimmune disease diagnostic kits and components for screening and specific autoantibody determinations. Product lines include Quanta Lite ELISA, Nova Lite IFA, Nova Gel Ouchterlony, Quanta Chek Validated Reference Panels, Quanta Plex multiplexing reagents as well as related microwell, IFA and multiplexing instrumentation systems. Product groups include kits and components for rheumatoid arthritis, connective tissue disease, coagulation, gastrointestinal, vasculitis, endocrine, and autoimmune liver disease.

INSTITUTE OF HEALTHCARE RESEARCH 17/28
The Boatouse, The Embankment, Putney SW15 1LB, United Kingdom — IHR is a data collection agency that is involved in long-term studies. Our aim is to develop relationships with physicians in the UK, Germany, France, Spain, and Italy. Data are collected continuously, in strict confidence, to the highest standards in the industry. In return, Physicians are rewarded through our Medical Incentives Plan - attendance at conferences, a selection of gifts, savings plans, donations to charity. You decide!

INTERNATIONAL JOURNAL OF ADVANCES IN RHEUMATOLOGY 12/01

JOINT AND BONE.ORG 17/07

KYPHON 12/24
Cluster Park, Leuvensteenvweg 369, 1932 Zaventem, Belgium — Kyphon focuses its energy in revolutionising spine therapy. Balloon Kyphoplasty is a minimally invasive procedure to treat vertebral body compression fractures. The technique is designed to reduce and stabilize the fracture in a controlled way, to correct spinal deformity, to prevent new fractures and to provide immediate pain relief and improved quality of life.

LABORATOIRES EXPANSIENCE 17/11
10 Avenue de l'Arche, La Défense, 92419 Courbevoie, France — EXPANSIENCE Laboratories offer unique pharmaceutical specialities in rheumatology: Piasclidine 300, the leader in the osteoarthritis treatment as a SYSADOA; Fixical and Fixical vitamine D3, for calcium deficiencies and osteoporosis; and Takadol 100 mg, tramadol for pain control. As a leader in the treatment of osteoarthritis, Expanscience Laboratories can offer doctors and their patients training and information resources of very high scientific quality.

LEICA MICROSYSTEMS 17/30
Ernst-Leitz-Straße 17-37, 35578 Wetzlar, Germany — Leica Microsystems is a leading global innovator, manufacturer, and supplier of high-precision optical solutions for the analysis of microstructures. Leica Microsystems manufactures a comprehensive portfolio of products used in a wide variety of applications requiring microscopic vision, measurement, analysis, and lithography, including applications in the life sciences (such as biotechnology research and medicine), the materials sciences, industrial inspection, and the semiconductor manufacturing industry.

LUPUS ERYTHEMATODES SELBSTHILFEGEMEINSCHAFT E.V. 17/40
Düppersberg 20, 42103 Wuppertal, Germany — Being active across Germany, our self-help association is concerned with the symptomatology of lupus erythematoses and is engaged in supporting patients suffering from this disease. We organise symposiums and workshops held by physicians and other experts. Our more than 85 groups care for our patients on a regional level. In addition, we initiate and participate on vast medical studies. Our patroness is Mrs. Karin Clement, wife of the German Minister of Economy and Labour.

MAGNEVU 17/42
2225 Faraday Ave, Suite F, Carlsbad, CA 92008, USA — The Magnevü MV1000 MRI provides high-resolution images from a compact and rugged office-based system. The system is used by rheumatologists at the point of care to identify the presence of erosive and inflammatory joint disease, track disease progress, and monitor response to treatment. The MV1000 helps differentiate between synovitis, osteitis (or bone edema), and bone erosions, and it helps determine which patients require more aggressive treatment with RA biologics. The system is easy to operate, measures 3 ft square, plugs into normal wall power, and requires no special office set-up.

MEDAC 12/10
Theaterstrasse 6, 22880 Wedel, Germany — Metoject/Metex (methotrexate pre-filled syringes) registered in Germany and several European countries offer the following advantages: indications (RA, PsA, Psoriasis and JIA); applications (IM, IV, and subcutaneous—enclosed s.c. cannula); and concentration (10 mg/mL). Use Metoject/Metex and combine the advantages of the parenteral MTX route: better bioavailability, fewer GI side effects, avoiding weekly visits of the patient.

MEDISPEC 17/25
12850 Middlebrook Rd, Suite 1, Germantown, MD 20874, USA — Founded in 1990, Medispec develops, manufactures, and markets high-tech medical equipment for the fields of orthopedics, traumatology, urology, and urogynecology. Medispec provides advanced, high-quality products that comply with the worldwide standards of today's marketplace. Medispec has a proven track record of delivering high performance Shock Wave Therapy products to international medical institutions. We customize solutions that meet our client's specific medical and business requirements, ensuring that they receive the highest quality, reliability, and cost efficiencies available.

MENARINI 17/10

MERCK SHARP & DOHME 14.1/01, 14.1/05, 14.1/06
One Merck Drive, Mailstop WS2C36B, 08889-0100 Whitehouse Station, NJ, USA — Vioxx (rofecoxib, MSD): Rofecoxib is a powerful, once-daily COX II inhibitor proven to relieve pain and inflammation for osteoarthritis, rheumatoid arthritis and acute pain. Arcoxia (etoricoxib, MSD): Etoricoxib is a new agent for rapid and long lasting treatment of pain and inflammation to relieve osteoarthritis, rheumatoid arthritis and acute gout. Before prescribing, consult the product circular for information.

MERCKLE GMBH 17/04 & 17/05
Graf-Arco-Straße 3, 89079 Ulm, Germany — Licofelone is a novel analgesic and anti-inflammatory agent in late phase III development by Merckle GmbH and its partners in the Euro Alliance: Alfa Wassermann SpA of Bologna, Italy, and Lacer SA of Barcelona, Spain. Licofelone is a LOX/COX inhibitor that offers an unrivaled safety profile and long-term efficacy in a broad spectrum of OA patients.

NEGMA-LERADS 12/22
Avenue de l'Europe, Toussus-Le-Noble, 78771 Magny-Les-Hameaux, France — Diacerein (ART50, Negma-Lerads) is a disease-modifying osteoarthritis drug (DMOAD) inhibiting IL-1. Diacerein has beneficial effects on the symptoms of osteoarthritis (OA) such as pain and functional disability. The onset of action of the drug is delayed (4 weeks after treatment start with an effect comparable with that of NSAIDs). Furthermore, Diacerein has beneficial structural effects in OA, as shown by the 3-year randomized, placebo-controlled ECHODIAH trial in 507 patients with hip OA. Indeed, the results of this trial have demonstrated that diacerein significantly reduces the progression of OA measured by radiography (see legal specifications), with a good safety profile.

NEUROCHEM INC. 12/35
1375 Transcanada Hwy, suite 530, H9P 2W8 Dorval, Quebec, Canada — Neurochem is focused on the development and commercialization of innovative therapeutics for neurological disorders. Fibrillex, designated an orphan drug, is in a Phase II/III clinical trial for AA amyloidosis. Alzhemed has completed a Phase II clinical trial for the treatment of Alzheimer's disease. Cerebril is in a Phase II trial for the prevention of hemorrhagic stroke caused by amyloid.

NOVARTIS PHARMA 17/22
Lichtstrasse 35, 4056 Basel, Switzerland — Novartis AG (NYSE: NVS) is a world leader in pharmaceuticals and consumer health. In 2003, the group's businesses achieved sales of USD 24.9 billion and a net income of USD 5.0 billion. The Group invested approximately USD 3.8 billion in R&D. Headquartered in Basel, Switzerland, Novartis Group companies employ about 78,500 people and operate in over 140 countries around the world. For further information, please consult <http://www.novartis.com>.

OARSI 17/36
17000 Commerce Parkway, Suite C, Mount Laurel, NJ 08054, USA — The OsteoArthritis Research Society International (OARSI) is a nonprofit scientific organisation formed to promote and advance research for the prevention and treatment of osteoarthritis. Visit us at www.oarsi.org.

OXFORD IMMUNOTEC LTD 17/49
91 Milton Park, Abingdon OX14 4RY, United Kingdom — The Oxford Immunotec in-vitro diagnostic test for tuberculosis will replace the tuberculin skin test as it is more sensitive and more specific. It can be used to screen patients for TB prior to anti-TNF alpha therapy. The modified Elispot methodology identifies individual effector T cells that release interferon gamma when challenged by specific M. tuberculosis antigens. The presence of these T cells indicates TB infection even when there are no clinical symptoms of the active disease. The test has great sensitivity as it can identify a few T cells sensitive to M. tuberculosis antigens. The test is highly specific due to the use of specific antigens that are not found in the BCG vaccine or most environmental mycobacteria.

PARE MANIFESTO 17/34
c/o Arthritis Care, 18 Stephenson Way, London NW1 2HD, United Kingdom — The PARE Manifesto has been developed by people with arthritis/rheumatism in Europe representing: Arthritis & Rheumatism International (ARI), International Organisation of Youth with Rheumatism (IOYR), and EULAR Social Leagues (EULAR). The aim of the PARE Manifesto is to raise greater awareness of arthritis/rheumatism and to empower people with arthritis/rheumatism in Europe to become involved in the development of policies, health care provision, and social and community services that affect the quality of their lives.

PFIZER 12/16 + 12/17 + 12/41
c/o Parexell-MMS Ltd, 3 Liverpool Gardens, Wotbing, West Sussex BN11 1TF, United Kingdom — The Pfizer Celebrex (celecoxib), Bextra (valdecoxib tablets), and Dynastat (parecoxib sodium) exhibit features a business center, a message center, a live quiz, and a series of scientific panels with an associated quiz contest. In addition, interactive PC modules contain scientific panels, abstracts, and animations. These introduce delegates to the latest data on the COX-2 specific inhibitors, Celebrex, Bextra, and Dynastat. Visit the booth for more product information.

PHARMACIA DIAGNOSTICS 17/45
Munziger Strasse 7, 79111 Freiburg, Germany — Pharmacia Diagnostics develops, manufactures, and markets complete blood test systems for diagnosis and monitoring of allergy and autoimmune diseases. Around 1,000 people are employed by Pharmacia Diagnostics, which has subsidiaries in 18 countries. The highest-quality autoimmune diagnostics has been always a demand of Pharmacia Diagnostics. The production of autoantigens strictly follows cGMP guidelines. The high standard of diagnostic kits made Pharmacia Diagnostics the European leader in its field.

PIERRE FABRE 12/25
29 avenue du Sidobre, Les Fontaines, 81106 CASTRES, France — Structum 500 mg, a slow-acting drug for osteoarthritis, provides an overall management of the chondrocyte, supplies the key component of the cartilage matrix, and makes up a global pharmaceutical approach. Structum 500 mg perfectly demonstrates that it is the disease-modifying treatment with a significant improvement in pain relief, functional impairment, decrease in NSAID intake and patient's quality of life. The dosage regimen of Structum 500 mg is simple: two capsules a day.

PURDUE / MUNDIPHARMA / NAPP INDEPENDENT ASSOCIATED COMPANIES 12/19 + 12/29
Cambridge Science Park, Milton Road, CB4 0GW, United Kingdom — The Purdue/Mundipharma/Napp Independent Associated Companies are determined to assist physicians in improving the functionality and quality of patients' lives. Using innovation in the development of potent opioids and educational partnerships, these independent companies aim to break down the barriers blocking the path to effective pain management and to encourage the appropriate use of opioid analgesics.

RHEUMATOLOGY NEWS 17/27
60-B Columbia Road, Morristown, NJ 07960, USA — Rheumatology News is an independent newspaper that provides the practicing specialist with timely and relevant news and commentary about clinical developments in the field

and about the impact of health care policy on the specialty and the physician's practice. It is distributed in the U.S. to 10,200 physicians. Rheumatology News International, launched in February 2004, reaches 10,800 specialists in the EU and other European countries.

ROTTAPHARM 12/39
Via Valosa di Sopra 7/9, 20052 Monza, Italy — Rottapharm is a multinational pharmaceutical group with a strong presence in Europe; its original drugs are sold worldwide. In the rheumatic field, Rottapharm has developed and patented the original stabilized glucosamine sulfate, the first proven disease-modifying agent for osteoarthritis. 150 preclinical and clinical studies with more than 12,000 subjects and 91 leading institutions confirmed that DONA Glucosamine Sulfate can slow down the progression of osteoarthritis when administered long term.

SCANDINAVIAN JOURNAL OF RHEUMATOLOGY 17/41
Norrebrogade 44, 8000 Aarhus, Denmark — We invite you to visit the exhibit of the Scandinavian Journal of Rheumatology. The journal publishes international, peer reviewed, high quality, original reports of clinical and basic research, as well as editorials, review articles, and informative case reports covering all aspects of rheumatology. Subscribers have the option of free electronic access and supplements to the journal. Detailed information is available on our website: www.scand-jrheumatol.dk.

SCHERING DEUTSCHLAND GMBH 12/04
Max-Dobrn-Strasse 10, 10589 Berlin, Germany — Radiosynoviorthesis is indicated principally for the treatment of patients with rheumatoid arthritis who are well controlled by systemic treatment, but in whom one or few joints remain inflammatory. In this case, radiosynoviorthesis should be chosen as a local treatment (if the joints not respond to local injections of corticosteroids) with a high efficiency about 76% in rheumatoid arthritis. Depending of the size of the joint, there are three emitters used for therapy: Y-90, RE-186, and Er-169.

SKLERODERMIE SELBSTHILFE E.V 17/47
Am Wollhaus 2, D-74372 Heilbronn, Germany — The Sklerodermie Selbsthilfe ie.V. is a self-help organisation for scleroderma patients and their supporters. It was founded in July 1984. In Germany there are about 40 regional groups and more than 1,450 members. The management of the association and the leaders of the regional groups engage themselves on a voluntary basis. Scleroderma has been known for centuries, but the real origin of this orphan disease is still unknown despite a very intensive research in the last two decades. The objectives of the organisation are layed down in the statutes: information and public relations, medical care and social welfare to the patients, arrangement of social help and services, promotion of scientific and research work. The objectives of the management and especially of the regional groups are to help the patients out of their isolation and to inform them how to live, to exchange of views and experiences with other patients, and to give practical advice and help for day-to-day life.

SLACK INCORPORATED 12/05
6900 Grove Road, Thorofare, NJ 08086, USA — SLACK Incorporated invites you to visit Booth 12/05 to get your free issue of Orthopaedics Today International Edition, Global News in Musculoskeletal Health & Disease, the only newspaper serving the global orthopaedic community. It covers news of the latest studies and techniques in orthopaedic surgery and updates from scientific meetings around the world. Also see Orthopaedics and the Journal of Knee Surgery. Sign up for our free news wire service at orthopedicstoday.com.

THE ANNALS OF THE RHEUMATIC DISEASES — THE EULAR JOURNAL 15.1/02
Editorial, BMJ Publishing Group, BMA House, Tavistock Square, London WC1H 9JR, United Kingdom — ARD is the official journal of EULAR - the European League Against Rheumatism, and all (scientific) delegates to the annual EULAR congress receive a complimentary 12-month subscription to the journal. The Annals of the Rheumatic Disease is an international journal committed to promoting the highest standards of scientific exchange and education. It covers all aspects of rheumatology, and publishes basic, clinical, and translational scientific research. Concise scientific communication is encouraged and peer reviewed proceedings of international meetings are featured. The journal was first published in 1939 and has an authoritative global Editorial Board and a growing international readership.

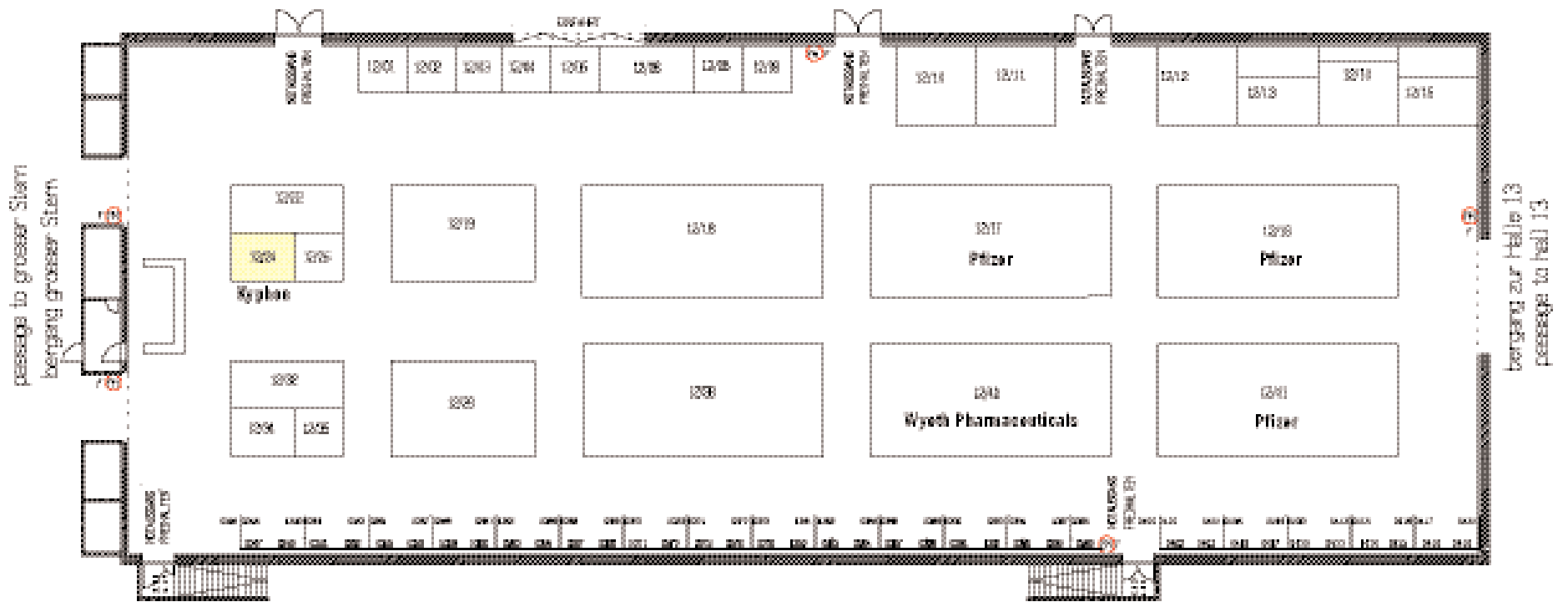
THE PANAMERICAN LEAGUE OF ASSOCIATIONS FOR RHEUMATOLOGY 17/37
Hermilio Hernandez 150, Lima 27, Peru — The Panamerican League of Associations for Rheumatology (PANLAR) was established in 1943. PANLAR is organizing the XIV Pan American Congress on rheumatic diseases taking place in Lima, Peru from 19 to 24 August, 2006. The organizing committee will offer the state of the art of the most important topics in the specialty, an ACR review course and a top-quality closure symposium in Cuzco and Machu Picchu—the fabulous land of the INCAS—giving the visitors the opportunity to contemplate the magnificence of one of the ancient world's most developed cultures. Please come to our booth in order to receive all the information need to participate and to gain special advantages as one of the first registered members.

TRB CHEMEDICA INTERNATIONAL SA 17/08
12 rue Michel Servet, P.O. Box 352, 1211 Geneva 13, Switzerland — Diacerein is an interleukin-1 inhibitor with anti-osteoarthritic and cartilage matrix stimulating properties. The beneficial effects of diacerein on joint pain and function have a slow onset of action, becoming significant 30-45 days after the beginning of the treatment. The structural activity of diacerein has been shown in vitro and in animal models of osteoarthritis. A long-term clinical study was conducted to investigate the structure-modifying effects of diacerein. This study suggests a slowing effect of diacerein on the joint-space narrowing in hip osteoarthritis and the good long-term safety profile of diacerein. Diacerein is marketed in several European countries.

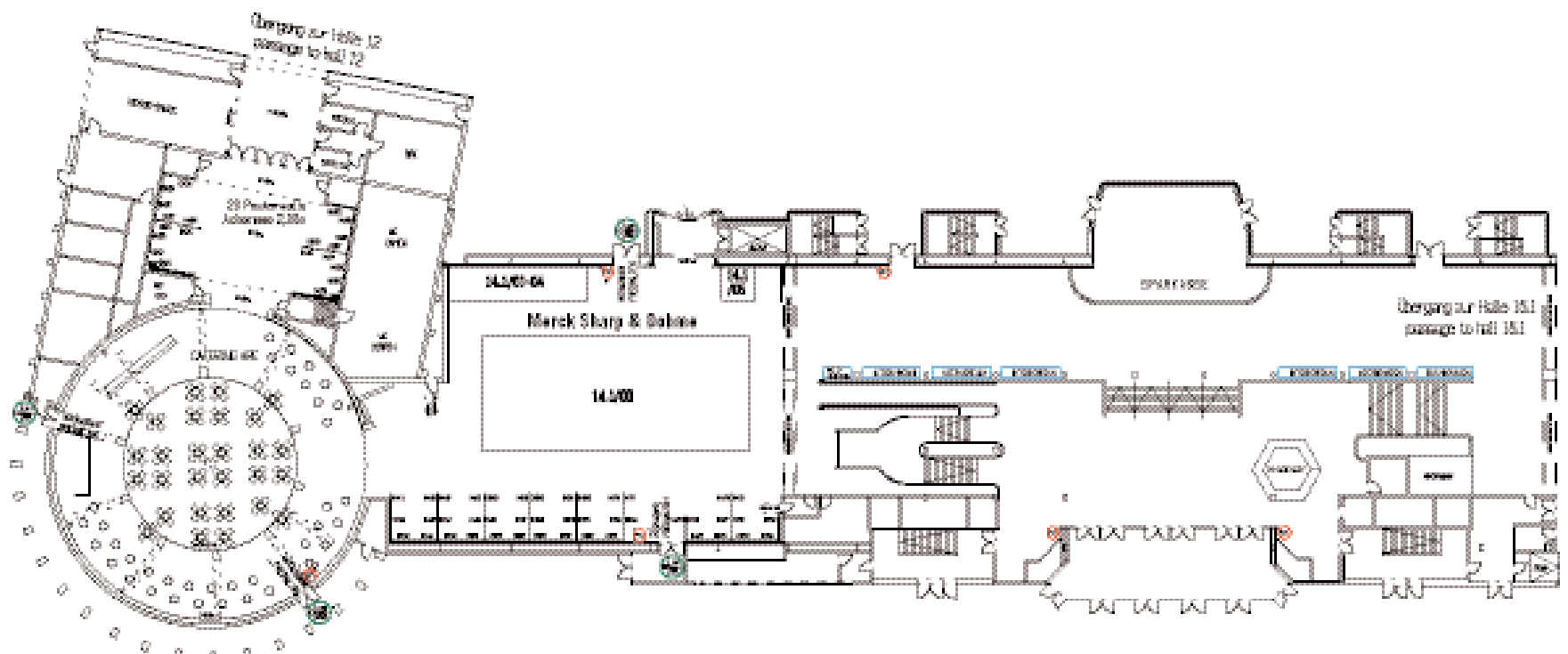
WISEPRESS ONLINE BOOKSHOP LTD 12/34
The Old Lamb Works, 25 High Path, Merton Abbey, SW19 2JL London, United Kingdom — Wisepress Online Bookshop Ltd is pleased to present a display of publications chosen especially for EULAR 2004 from the world's leading publishing houses. All the books on display can be ordered/bought directly at the stand. We can also order you free sample copies of the journals on display and take subscription orders. Whatever your book requirements, Wisepress will be happy to help—whether you are an author seeking a publisher or you're having difficulty obtaining a title, our professional staff will assist you.

WYETH PHARMACEUTICALS 12/40
500 Arcola Road, Collegeville, PA 19426, USA — Wyeth Pharmaceuticals has leading products in the areas of women's health care, cardiovascular disease, central nervous system, inflammation, hemophilia, oncology, and vaccines. Wyeth is one of the world's largest research-driven pharmaceutical and health care products companies. It is a leader in the discovery, development, manufacturing, and marketing of pharmaceuticals, vaccines, biotechnology products, and nonprescription medicines that improve the quality of life for people worldwide.

3 W INFORMED 17/46

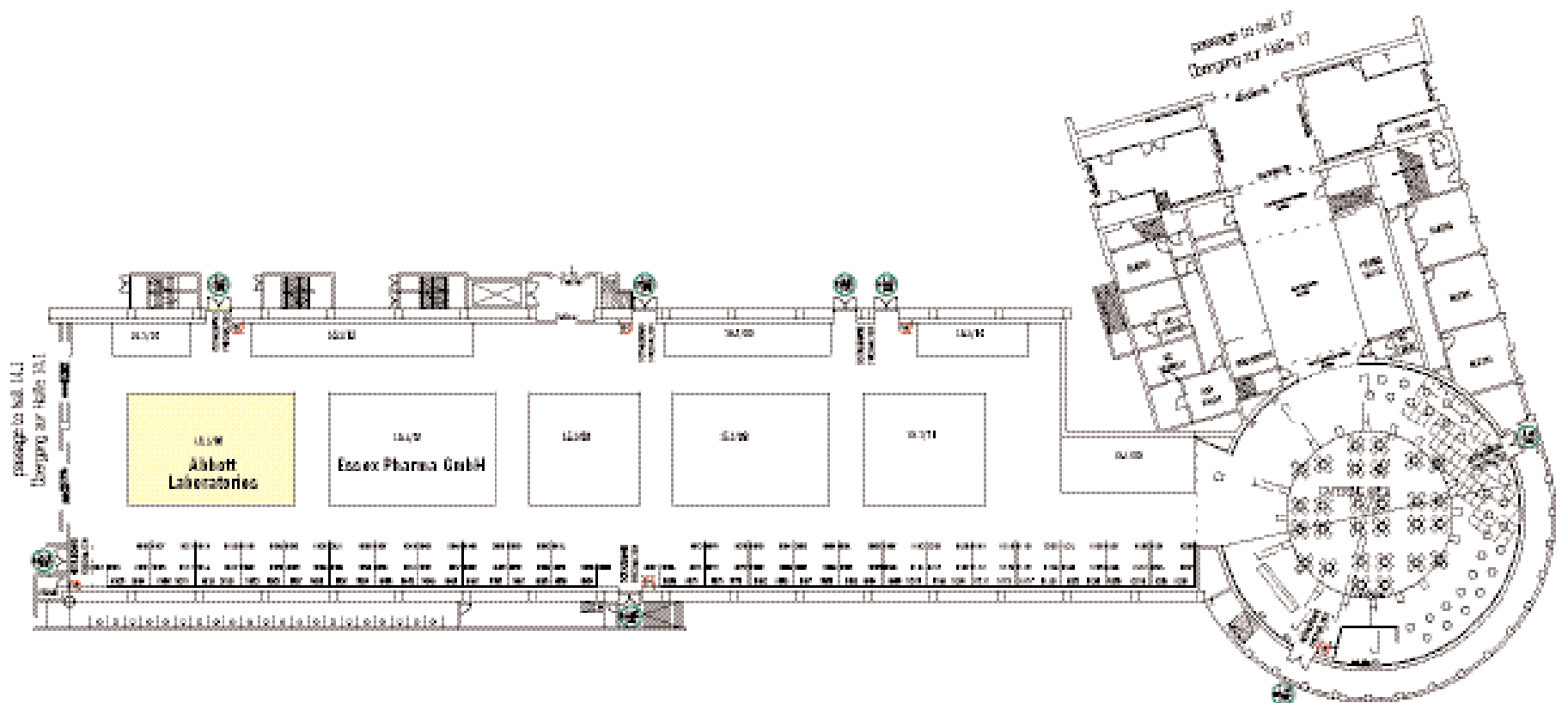


Hall 12



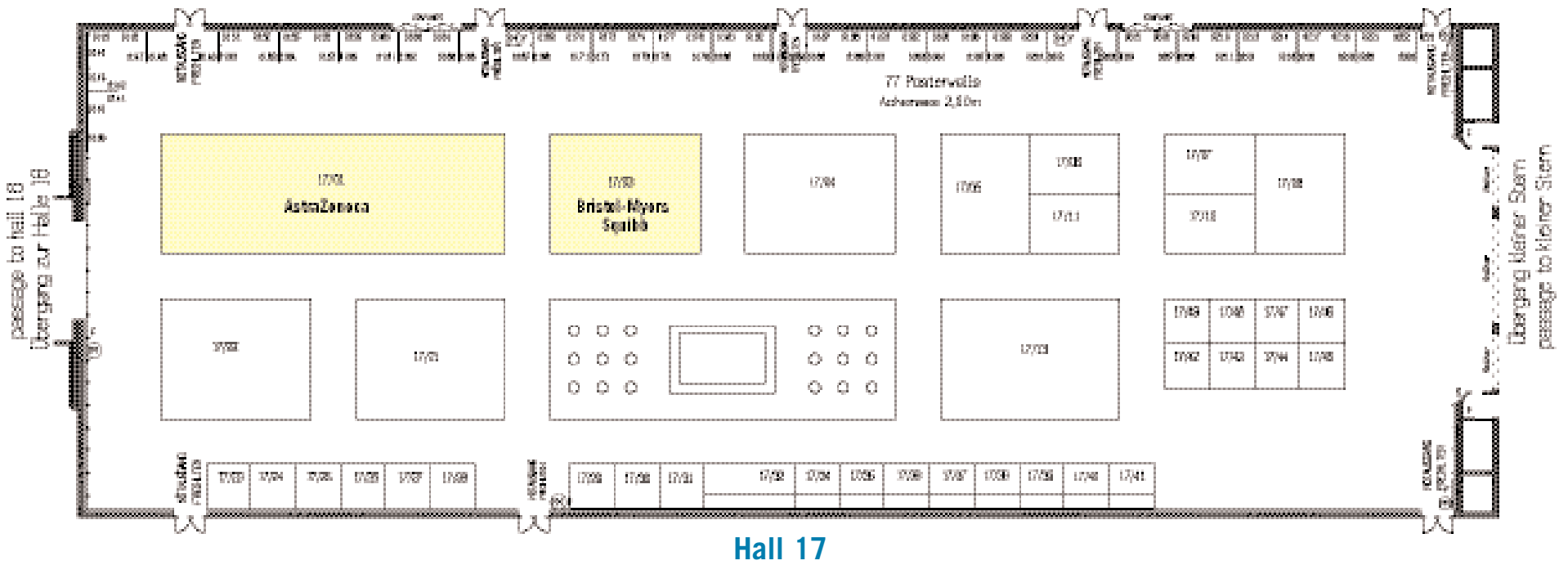
Hall 13

Hall 14



Hall 15

Hall 16



The EULAR 2004 Organising Committee wishes to express its gratitude to all satellite symposia organisers and exhibitors as well as to the following sponsors:

ABBOTT LABORATORIES

EULAR / ABBOTT Abstract Awards, Abstract Book, Final Programme, Palm Information System, Pocket Programme, Congress Bags, EULAR e-Sponsoring, Unrestricted Educational Grant

BRISTOL-MYERS SQUIBB

EULAR/Bristol-Myers Squibb Young Investigator Award

CENTOCOR, INC.

Unrestricted Educational Grant

CHIESI PHARMACEUTICALS

Coffee breaks Wednesday 9 and Saturday 12 June

ESSEX PHARMA GmbH

Coffee breaks Thursday 10 and Friday 11 June

MERCK SHARP & DOHME

Cyber café, Run & Walk for Arthritis, pads & pens

PFIZER

Business Centre & Message Centre

ROCHE / GLAXOSMITHKLINE

Speakers' preview room

WYETH PHARMACEUTICALS

Abstracts-on-Disk



Revolutionising Spine Therapy

Balloon Kyphoplasty is a minimally invasive procedure to treat vertebral body compression fractures.

The technique is designed to reduce and stabilise the fracture in a controlled way, to correct spinal deformity and to provide immediate pain relief & improved quality of life.



WWW.KYPHON-EU.COM

KYPHON
AHEAD OF THE CURVE™

M1047-01ENT

DHEA Improves Well-Being, Libido in SLE

Dehydroepiandrosterone treatment improved well-being and libido in a small study of women with systemic lupus erythematosus, Swedish researchers reported at the 5th Annual European Congress of Rheumatology.

Women with systemic lupus erythematosus (SLE) have below-normal levels of dehydroepiandrosterone (DHEA). Levels are further suppressed with glucocorticoid treatment.

Gunnel Nordmark, MD, of the Department of Medical Sciences at Uppsala Uni-

versity Hospital, Sweden, and colleagues randomized 41 women with SLE to receive either DHEA or placebo treatment for 6 months. Women in the DHEA group received either 20 mg or 30 mg daily, based on their age: Those 46 and older received 20 mg DHEA daily; those 45 and younger received 30 mg DHEA daily. Women in both the placebo and treatment groups also received 5 mg prednisolone daily.

After 6 months, the trial became an open-label study and all 37 continuing participants received DHEA for an additional 6

months. Quality of life was assessed at baseline, 6 months, and one year. At 6 months, the patients' partners also completed a questionnaire assessing mood and behavior.

Normal serum DHEA levels were achieved with treatment. Self-rated measures of mental well-being and libido improved significantly, although self reports of physical function and physical well-being did not improve. The partners reported that study participants "got more done" while on DHEA.

DHEA use was associated with lowered

levels of HDL cholesterol and increased levels of insulin-like growth factor (IGF-I). There were no effects on bone density or disease activity and no serious side effects. Side effects included mild hirsutism, weight gain, and skin changes.

Dr. Nordmark concluded that "DHEA can be offered to women with SLE where mental stress or impaired sexuality constitutes a problem."

EULAR Thanks Its Corporate Members

Abbott Laboratories
Actelion Pharmaceuticals
Almirall
Amgen (Europe) AG
AstraZeneca
Aventis Pharma SA
Boehringer Ingelheim International GmbH
Eli Lilly & Company
Gesellschaft medizinischer
Assistenzberufe für Rheumatologie e. V.
Helsinn Healthcare SA
Hoffmann-La Roche Ltd
IBSA Institut Biochimique SA
Janssen Pharmaceutica N.V.
Kyphon Europe BVBA
Laboratoires UPSA
Merck & Co., Inc.
Merckle GmbH
Novartis Pharma AG
Opfermann Arzneimittel GmbH
Pfizer Pharmaceutical Group, Pfizer, Inc.
Rotta Research Laboratorium SpA
Schering-Plough Pharmaceuticals Servier
TRB Chermidica International SA
Wyeth Pharmaceuticals

8th EULAR Postgraduate Course in Rheumatology Prague, Czech Republic 28 November 2004 – 3 December 2004

Scientific Organising Committee

Prof. José Antonio P. da Silva, Portugal
(Chairperson of the EULAR Standing Committee on Education and Training)
Prof. Joachim R. Kalden, Germany
(Past-President of EULAR)
Prof. Karel Pavelka, Czech Republic
(Immediate Past-General Secretary of EULAR)
Prof. Jiri Vencovsky, Czech Republic
(Member of the Scientific Programme Committee of the annual EULAR Congress)
Mr. Fred Wyss, Switzerland
(Executive Director of EULAR)

Scientific Organising Secretariat

EULAR Executive Secretariat
Witikonstrasse 15
CH-8038 Zurich/Switzerland
Tel: + 41 1 383 96 90 – Fax: + 41 1 383 98 10
E-mail: secretariat@eular.org

Official language

English

The Course venue

Hotel ILF***
Budejovická 14/743
CS-1400 00 Prague 4 – Michle
Tel: + 420 261 092 111 – Fax: + 420 261 261 846
E-mail: rezervace@ipvz.cz

Location

The hotel ILF is conveniently located in a quiet zone of Prague 4 and is linked to the centre of Prague by metro from Budejovická station (opposite the hotel). The trip to the centre of town is about 10 minutes. All rooms have private bathrooms, television and telephone. The hotel belongs partly to the Czech Institute for Postgraduate Medical Training of Czech Ministry of Health and is specialised in organising medical conferences. A library with Internet facilities is available. The hotel also offers a guarded car park.

Access

Arrival on Saturday, 27 November 2004
Every hour, 09.00 – 19.00, buses will leave the airport to the Hotel ILF.

Departure on Saturday, 4 December 2004
Every hour, 08.00 – 17.00, buses will leave the hotel ILF to the airport.

A taxi from the airport to the hotel will cost about Euro 25-30.

The Course

The course fee of Euro 600 includes tuition, accommodation in single rooms and all meals (breakfast, lunch, dinner and coffee breaks). If you wish to be accompanied by your partner/spouse, limited double room accommodation is available for Euro 900, however, your spouse/partner cannot participate at the scientific programme of the course.

Programme of the Course

A draft programme with topics will be on the EULAR website as of 15 May 2004.

The EULAR Congress News

The Official Newspaper of the 5th Annual European Congress of Rheumatology

EULAR PRESIDENT

Prof. Josef S. Smolen

EULAR PRESIDENT ELECT

Prof. Tore K. Kvien

CHAIRPERSON OF THE SCIENTIFIC PROGRAMME COMMITTEE

Prof. Gerd R. Burmester, Germany

PRESIDENT, LOCAL ORGANISING COMMITTEE

Prof. Wolfgang L. Gross

EULAR EXECUTIVE DIRECTOR

Fred Wyss

PUBLICATION STAFF

GENERAL MANAGER

Alan J. Imhoff

EDITORS

Mary Jo Dales, Kathryn DeMott

WRITERS

Bruce Jancin, Martha Kerr, Diana Mahoney, Peggy Peck, Nancy Walsh

DIRECTOR OF OPERATIONS

James D. Chicca

DIRECTOR OF PRODUCTION/MANUFACTURING

Yvonne Evans

ART DIRECTOR

Louise A. Lynch

ADVERTISING DIRECTOR

Rory Flanagan
(973) 290-8222

© Copyright 2004

European League Against Rheumatism

EULAR Executive Secretariat

Witikonstrasse 15

CH-8032 Zürich

• T +41 1 383 96 90

• F +41 1 383 98 10

• secretariat@eular.org

Produced and distributed for EULAR by INTERNATIONAL MEDICAL NEWS GROUP, Elsevier. All rights reserved. No part of this publication may be reproduced or transmitted in any form, by any means, without prior written permission of EULAR. The opinions expressed in this publication are those of the presenters and authors, and do not necessarily reflect the views of EULAR.

HUMIRA

adalimumab

■ Indicated for the treatment of moderate to severe, active rheumatoid arthritis in adult patients when the response to disease-modifying antirheumatic drugs including MTX has been inadequate

■ To ensure maximum efficacy, HUMIRA is given in combination with MTX. HUMIRA can be given as monotherapy in cases of intolerance to MTX or when continued treatment with MTX is inappropriate



HUMIRA Abbreviated Prescribing Information

HUMIRA 40 mg solution for injection in pre-filled syringe.

[Refer to full Summary of Product Characteristics text before prescribing HUMIRA]

Presentation: Each 0.8 ml single dose pre-filled syringe contains 40 mg of adalimumab.

Indications: Indicated for the treatment of moderate to severe, active rheumatoid arthritis in adult patients when the response to disease-modifying antirheumatic drugs including methotrexate has been inadequate. To ensure maximum efficacy, HUMIRA is given in combination with methotrexate. HUMIRA can be given as monotherapy in case of intolerance to methotrexate or when continued treatment with methotrexate is inappropriate.

Dosage and Administration: 40 mg administered every other week as a single dose via subcutaneous injection. HUMIRA treatment should be initiated and supervised by specialist physicians experienced in the diagnosis and treatment of rheumatoid arthritis. In monotherapy some patients who experience a decrease in their response to HUMIRA may benefit from an increase in dose intensity to 40 mg every week. Data suggest that the clinical response is usually achieved within 12 weeks.

Contraindications: HUMIRA is contraindicated in patients with active tuberculosis or other severe infections such as sepsis, and opportunistic infections; moderate to severe heart failure (NYHA class III/IV) and those with hypersensitivity to adalimumab or any of the excipients.

Precautions and Warnings: Serious infections (including tuberculosis), sepsis, and opportunistic infections, including fatalities, have been reported with HUMIRA. Patients must be monitored closely for infections before, during and after treatment with HUMIRA. HUMIRA should not be prescribed to patients with active infections until infections are controlled. If new infections develop during treatment, patients should be monitored closely. If a new serious infection develops, HUMIRA should be discontinued until the infection is controlled. Caution should be exercised when considering the use of HUMIRA in patients with a history of recurring infection or underlying conditions, which may predispose patients to infections.

Appropriate screening tests, i.e. tuberculin skin test and chest x-ray, should be performed in all patients. Before initiation of therapy with HUMIRA, patients must be evaluated for active or inactive tuberculosis. If active tuberculosis is diagnosed, HUMIRA therapy must not be initiated. If latent tuberculosis is diagnosed, appropriate anti-tuberculosis prophylaxis must be initiated before starting treatment with HUMIRA. Patients should be instructed to seek medical advice if signs/symptoms suggestive of a tuberculosis infection occur during or after therapy with HUMIRA. Monitoring for infections should be continued for five months following treatment. A HUMIRA patient alert card will be available for all patients.

HUMIRA has been associated, in rare cases, with exacerbation of clinical symptoms and/or radiographic evidence of demyelinating disease. Caution should be exercised when considering HUMIRA in patients with pre-existing or recent-onset central nervous system demyelinating disorders.

Serious allergic reactions have not been reported. If an anaphylactic reaction or other serious allergic reaction occurs, administration of HUMIRA should be discontinued immediately and appropriate therapy initiated.

It is not known whether exposure to adalimumab can increase the risk of malignancies and lymphoproliferative disorders.

Concurrent administration of live vaccines and HUMIRA is not recommended.

HUMIRA should be used with caution in patients with mild heart failure (NYHA class I/II). HUMIRA must be discontinued in patients who develop new or worsening symptoms of congestive heart failure.

HUMIRA may result in the formation of autoimmune antibodies.

Interactions: Antibody formation was low (< 1%) when HUMIRA was given together with methotrexate in comparison with use as monotherapy.

Concurrent administration of etanercept and anakinra has been associated with an increased risk of serious infections and neutropenia and no additional benefit compared to these medicinal products alone. Therefore, combination of adalimumab and anakinra is not recommended.

Pregnancy and Lactation: Administration of adalimumab is not recommended during pregnancy. Women of childbearing potential should use adequate contraception and continue its use for at least 5 months after the last HUMIRA treatment. Women must not breast-feed for at least 5 months after the last HUMIRA treatment.

Side Effects: Vary common > 1/10: Injection site pain.

Common > 1/100 ≤ 1/10: Decreased haemoglobin, hyperlipidaemia, headache, dizziness, upper respiratory infection, rhinitis, sinusitis, bronchitis, increased cough, pneumonia, nausea, diarrhoea, sore throat, rash, pruritis, herpes simplex, urinary tract infection, asthenia, clinical flare reaction, flu syndrome, abdominal pain, infection, injection site reaction, injection site haemorrhage, injection site eruption, abnormal laboratory tests.

Uncommon > 1/1000 ≤ 1/100: Skin benign neoplasm, granulocytopenia, increased coagulation time, antinuclear antibody present, leukopenia, lymphadenopathy, lymphocytosis, decreased platelet count, purpura, hypercholesterolaemia, increased BUN, hyperuricaemia, peripheral oedema, weight gain, increased creatinine phosphokinase, abnormal healing, hypokalaemia, increased lactic dehydrogenase, depression, somnolence, insomnia, agitation, paraesthesia, vertigo, hyperaesthesia, neuralgia, tremor, conjunctivitis, eye disorder, otitis media, taste perversion, abnormal vision, blurred vision, dry eye, ear disorder, eye pain, hypertension, vasodilatation, chest pain, migraine, ecchymosis, pharyngitis, dyspnoea, lung disorder, asthma, abnormal liver function test, increased SGPT and SGOT, mouth ulceration, oesophagitis, vomiting, dyspepsia, constipation, gastrointestinal pain, tooth disorder, gastritis, gastroenteritis, tongue disorder, oral moniliasis, aphthous stomatitis, dysphagia, stomatitis, ulcerative stomatitis, skin disorder, herpes zoster, maculopapular rash, nail disorder, dry skin, sweating increased, alopecia, fungal dermatitis, urticaria, skin nodule, skin ulcer, eczema, subcutaneous haematoma, arthralgia, muscle cramps, myalgia, joint disorder, synovitis, tendon disorder, vaginal moniliasis, haematuria, cystitis, menorrhagia, proteinuria, increased urinary frequency, fever, mucous membrane disorder, pain in extremity, face oedema, back pain, cellulitis, chills, sepsis, surgery, allergic reaction.

Overdose: Multiple intravenous doses of 10 mg/kg have been administered without observation of dose limiting toxic effects. No clinical experience of overdose.

Package Quantities: Each carton contains two single use pre-filled syringes (type I glass) for patient use and two alcohol pads.

Storage Conditions: Store at 2-8°C. Keep in the outer carton, do not freeze.

Legal Category: POM.

Marketing Authorisation Number: EU/1/03/296/003.

Further information is available from Abbott Laboratories Ltd, Norden Road, Maidenhead, Berkshire SL6 4XE.

PI/126/001

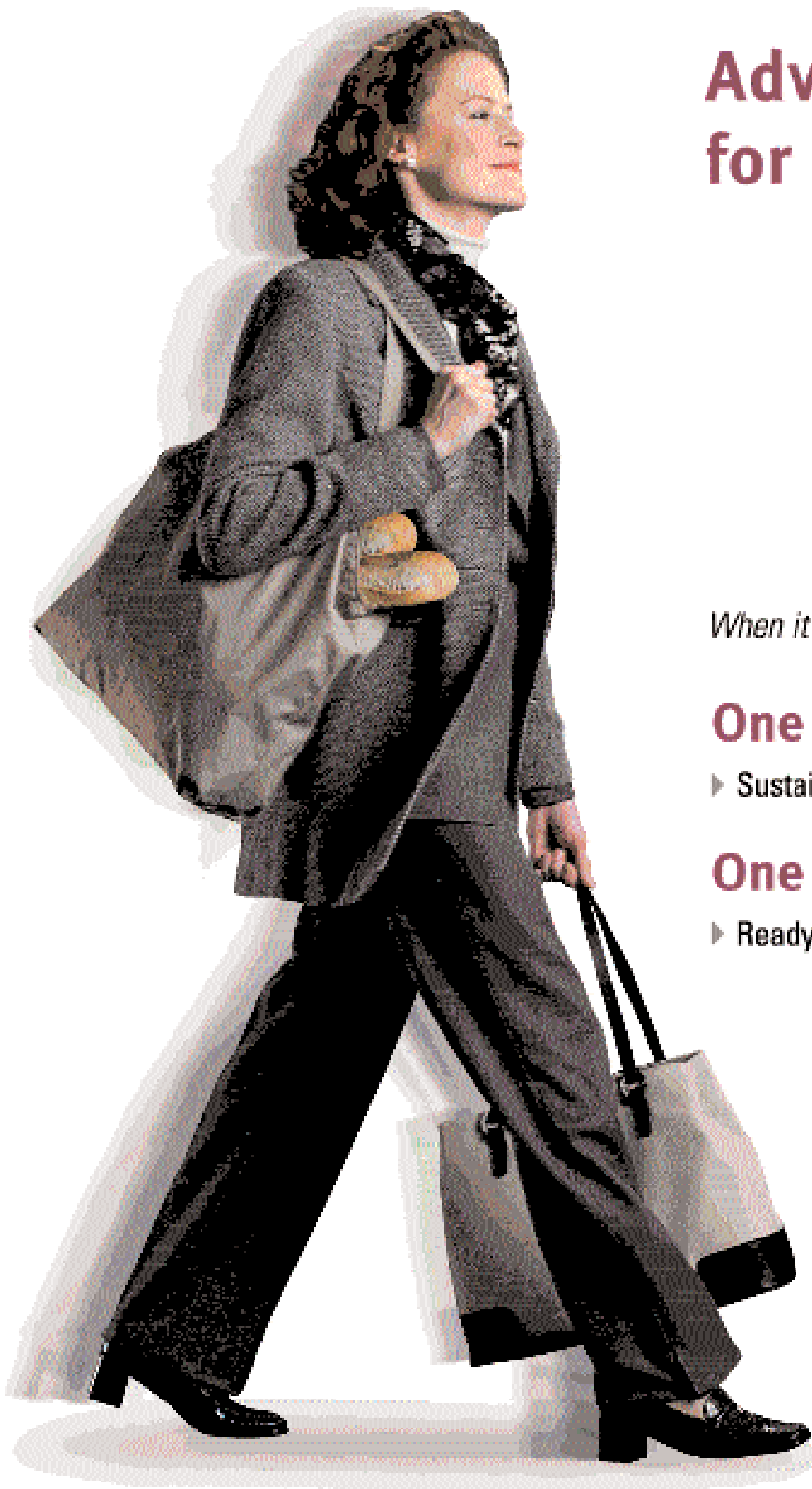
Reference:

1. Data on file, Abbott Laboratories.



HUMIRA

adalimumab



Advancing RA Control for More Normal Living

When it's time for a biologic, consider:

One Lasting Solution

- ▶ Sustained efficacy and tolerability over 5 years¹

One Simple Choice

- ▶ Ready-to-use syringe and every-other-week dosing

First data from the **ReAct** trial has arrived at the **HUMIRA** booth.



HUMIRA
adalimumab

Please see brief summary of prescribing information on adjacent page.