

AMERICAN COLLEGE OF RHEUMATOLOGY RESEARCH AND EDUCATION FOUNDATION-ASP-JUNIOR CAREER DEVELOPMENT AWARD IN GERIATRIC MEDICINE



Award Recipient:

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PROJECT:

CHARACTERISTICS AND OUTCOMES IN SERO-POSITIVE LATE-ONSET RHEUMATOID ARTHRITIS PATIENTS WHO START A NEW DISEASE MODIFYING ANTI-RHEUMATIC DRUG

MENTORSHIP TEAM:

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Rheumatoid arthritis (RA) is an autoimmune disease causing a symmetric inflammatory arthritis of unclear etiology. Approximately one-third of RA patients are above the age of 65 at the onset of the disease. The incidence of RA increases dramatically with age, with a five-fold increase in incidence from the age of 35 to 75 (20 versus 100 per 100,000). Much controversy revolves around clearly delineating older onset RA patients and younger onset RA patients. Some studies have shown that elderly onset RA patients are more likely to have acute onset of symptoms, involvement of large proximal joints, polymyalgia rheumatica (PMR)-like symptoms, equal female and male distribution, more constitutional symptoms, lower frequency of positive rheumatoid factor (RF), and higher erythrocyte sedimentation rate (ESR) and C-reactive protein (CRP) in comparison to their younger counterparts. This suggests that the disease process of the elderly onset RA patient is distinctly different and implies that this subgroup requires different treatment.

However, our preliminary work using a strictly defined, RF positive early RA prospective cohort has suggested that older and younger onset RA patients have similar baseline characteristics, symptom duration, and disease activity when correcting for factors that normally occur during the aging process. This preliminary work suggests that both older and younger RF+ RA cohorts share the same disease process and therefore should not be treated as distinctly different groups. We propose to evaluate RF positive older and younger onset RA patients in large RA cohorts (approximately 15,000 patients total) for baseline characteristics, responses to therapy,

and adverse events. The specific objectives of this study are to:

1. Investigate baseline characteristics of RF positive younger and elderly onset RA patients with the same disease duration after adjusting for age-related processes;
2. compare the treatment outcomes and adverse events of RF positive older and younger onset RA patients with the same disease duration in three large databases.

The American College of Rheumatology Research and Education Foundation-ASP-Junior Career Development Award in Geriatric Medicine will allow me to develop the skills necessary to become an independent investigator who can design and carry out objective and comprehensive clinical studies. There is a need for geriatric rheumatologists interested in the kind of clinical research that will clearly delineate and tailor therapies for the elderly. As a part of my career development, I will be obtaining a Masters in Clinical Research at the University of California, Los Angeles (UCLA) during the time of this award. I will also be participating in the geriatric research seminars as well as attending selected lectures in the geriatric lecture series at UCLA. This award will help me to heighten awareness of geriatric rheumatological issues through development of educational activities for rheumatologists, geriatricians, and fellows in both fields. Ultimately, the T. Franklin Williams Award and the support of my mentors will enable me to build a solid foundation to grow into an independent clinical scientist in the field of geriatric rheumatology.

