Golimumab for rheumatoid arthritis

Information for the public
Published: 22 June 2011
nice.org.uk

What has NICE said?

Golimumab (Simponi), taken with a drug called methotrexate, is recommended as a possible treatment for some adults with severe active rheumatoid arthritis in the same circumstances as other drugs for the condition\(^1\). They should be able to have golimumab if they have already tried other types of disease-modifying anti-rheumatic drugs (DMARDs), including a DMARD known as a tumour necrosis factor (or TNF for short) inhibitor, but these drugs haven't worked and they cannot take rituximab therapy for medical reasons or because they had a bad reaction to it.

Treatment should be carried out by a specialist rheumatology team. After the first 6 months golimumab therapy can continue only if it is clearly improving the person's rheumatoid arthritis. They should have check-ups every 6 months after that to make sure golimumab therapy is still working.

When assessing your rheumatoid arthritis, healthcare professionals should take into account any disabilities or difficulties in communicating you may have.

What does this mean for me?

If you have rheumatoid arthritis, and your doctor thinks that golimumab is the right treatment, you should be able to have the treatment on the NHS.

Golimumab should be available on the NHS within 3 months of the guidance being issued.
If you are not eligible for treatment as described above, you should be able to continue taking golimumab until you and your doctor decide it is the right time to stop.

The circumstances described in this section are the same circumstances in which NICE recommends adalimumab, etanercept, infliximab, rituximab and abatacept.

Why has NICE said this?

NICE looks at how well treatments work in relation to how much they cost compared with other treatments available on the NHS.

NICE recommended golimumab (in combination with methotrexate) for adults with severe active rheumatoid arthritis who have already tried other DMARDs, including a TNF inhibitor, only if they cannot take rituximab therapy for medical reasons or because they had a bad reaction to it. This is because treatment with golimumab costs more than treatment with rituximab.

The condition and the treatment

Rheumatoid arthritis is a disease in which the body's immune system, which normally fights infection, goes wrong and starts to attack healthy joints. The joints become swollen, stiff and painful, and eventually they can stop working properly. People with 'severe active' rheumatoid arthritis have very swollen and painful joints that can make everyday activities difficult.

People who have rheumatoid arthritis produce too much of a substance called 'TNF-alpha', which is involved in causing inflammation.

Golimumab (also known as Simponi) stops TNF-alpha working in the body, which helps to reduce swelling and joint damage in people with rheumatoid arthritis. When golimumab is used to treat rheumatoid arthritis it needs to be taken in combination with another drug known as methotrexate.

NHS Choices may be a good place to find out more.

Sources of advice and support

- Arthritis Care, 0808 800 4050
  www.arthritiscare.org.uk
NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

ISBN: 978-1-84936-626-7

Accreditation

Health & care information you can trust

The Information Standard Certified Member