WHAT IS A DMARD AND HOW LONG DO I NEED TO TAKE IT?

DMARD Definition:

Disease Modifying
Anti-Rheumatic Drug (DMARD)
is a medication prescribed
by a rheumatology health
care provider to help slow
the progression of several
auto-immune diseases by:

- Reduction of inflammation
- Suppression of an overactive immune system
- Preservation of healthy cartilage and bone structures
- Pain reduction

LIST OF DMARDS:

There are many different DMARDs available. Your health care provider will work with you to find the best one for your disease with the fewest side effects. **All DMARDs require lab monitoring and Hydroxychloroquin requires routine eye exams.** The most commonly used DMARDs used for the treatment of Rheumatoid arthritis (RA) and other inflammatory arthritis conditions include:

- Methotrexate (MTX) Trexall, Otrexup, Rasuvo
- Hydroxychloroquine (HCQ)
 Plaquenil
- Sulfasalazine (SSZ) Azulfidine
- Leflunomide Arava
- Azathioprine (AZA) Imuran
- Cyclosporine Neoral, Sandimmune
- Cyclophosphamide Cytoxan
- Mycophenolate Mofetil CellCept
- Minocycline Minocin
- Doxycycline

Methotrexate is the most commonly used DMARD in the United States, Canada and in Europe and patients can be safely on the medication for their entire life as long as routine laboratory monitoring is done.

All of these medications work a little differently to help your health care provider help you get your disease into remission. Often more than one medication may be used simultaneously to help get the disease symptoms controlled as quickly as possible so that the patient can have the best quality of life.

Treatment strategies for RA are constantly changing. Not all medicines work for all individuals and some medications are contraindicated in individuals with special situations or risk factors.

Although there is no cure for RA *yet*, new research has shown that the earlier the patient's disease gets into remission, the more likely the patient is to stay in remission and the potential damage from the disease will be less. Early aggressive treatment with DMARDs and possibly biologic medications can increase the likelihood that the patient may be able to stay in remission.

