

เอกสารอ้างอิง



1. Sigler JW, Bluhm GB, Duncan H, et al. Gold Salts in the Treatment of Rheumatoid Arthritis : A double blind study. Ann Intern Med 1974;80:21-26.
2. Cohen AS, Calkins E. Controlled Study of Chloroquine as an antirheumatic agent. Arthritis Rheum 1958;1:297-301.
3. Popert AJ, Meijers KE, Sharp J, Bier F. Chloroquine diphosphate in rheumatoid arthritis, A control study. Ann Rheum Dis 1961;20:18-35.
4. Freedman A. Chloroquine and rheumatoid arthritis. Short-term controlled trial. Ann Rheum Dis 1965;15:251-255.
5. Rinehart RE, Rosenbaum EE, Hopkins CE. Chloroquine therapy in rheumatoid arthritis. Northwest Med 1957;56:703-707.
6. Freedman A, Steinberg VL. Chloroquine in rheumatoid arthritis, A double-blind fold trial of treatment for one year. Ann Rheum Dis 1960;19:423-427.
7. Daves MJ, Dawes PT, Fouler PD, Clarke S, Fisher J, Shadforth MF. Should disease - modifying agents be used in mild rheumatoid arthritis? Br J Rheumatol 1991;30:451-454.

8. Kremer JM, Lee JK. The safety and efficacy of the use of methotrexate in long term therapy for rheumatoid arthritis. *Arthritis Rheum* 1986;29:822-831.
9. McConkey B, Amos R, Butler E. Salazopyrin in rheumatoid arthritis. *Agent Actions* 1978;8:438-441.
10. McConkey B, Amos R, Durham S, et al. Salphasalazine in rheumatoid arthritis. *Br Med J* 1980;280:442-444.
11. Bird H, Dixon J, Pickup M. A biochemical assessment of sulphasalazine in rheumatoid arthritis. *J Rheumatol* 1982;9:36-45.
12. Hart LE, Tugwell P. The use of disease modifying antirheumatic drugs in the management of rheumatoid arthritis. *Postgrad Med J* 1989;65:905-912.
13. Adams EM, Yocum DE, Bell GL. Hydroxychloroquine in the treatment of rheumatoid arthritis. *Am J Med* 1983;75:321-326.
14. Fehlauer CS, Carson CW, Cannon GW, et al. Methotrexate therapy in rheumatoid arthritis : 2 years retrospective follow up study. *J Rheumatol* 1989;16:307-312.
15. Weinblah ME, Coblyn JS, Fox DA, et al. Efficacy of low-dose methotrexate in rheumatoid arthritis. *N Eng J Med* 1985;312:818-822.

16. Weinstein A, Marlowe S, Kom J, Farouhar F. Low dose methotrexate treatment of rheumatoid arthritis. Long-term observations. Am J Med 1985;79:331-337.
17. Weinblatt ME, Kaplan H, Germain BF, et al. Methotrexate in rheumatoid arthritis : effects on diseases activity in a multicenter prospective study. J Rheum 1991;18:334-338.
18. Kremer JM, Lee JK. A longterm prospective study of the use of methotrexate in rheumatoid arthritis, update after a mean of fifty-three months. Arthritis Rheum 1988;31:577-584.
19. Kremer JM. Methotrexate therapy in the treatment of rheumatoid arthritis. Rheum Dis Clin North Am 1989;15:533-556.
20. Weinblatt ME, et al. Methotrexate in rheumatoid arthritis, Five-year prospective multicenter study. Arthritis rheu 1994;37:1492-1512.
21. Marrasut P, Goldstein R, et al. Gold sodium thiomalate compared to low dose methotrexate in the treatment of rheumatoid. J Rheu 1989;16(3):302-6.
22. Suarez-Almazor ME, Fitzgerald, et al. A randomized controled trail of parenteral methotrexate compared with sodium thiomalate (myocrisine) in treatment of rheumatoid arthritis, a randomized double blinded 26-week trail. J rheu 1989;16(3):302-6.

23. Rau R, Herborn G, et al. A double blinded randomized parallel trial of intramuscular gold sodium thiomolate in early erosive rheumatoid arthritis. *J Rheu* 1990;18:328-33.
24. Rau R, Herborn G, et al. A double blinded comparison of parenteral methotrexate and parenteral gold in the treatment of early erosive rheumatoid arthritis: An interim report on 102 patients after 12 months. *Seminars in arthritis and rheumatism* 1991;21(2 suppl 1): 13-20.
25. Saag KG, et al. Low dose long term corticosteroid therapy in rheumatoid arthritis: An analysis of serious adverse events. *American J of Med* 1994;96:115-123.



ประวัติผู้ทำวิทยานิพนธ์

ชื่อ

แพทย์หญิง จิราภา ดีวัฒนาภูล

การศึกษา

แพทยศาสตร์บัณฑิต จาก มหาวิทยาลัยเชียงใหม่ จบ ปีการศึกษา 2532

พ.ศ.2532-2536 แพทย์เชี่ยวชาญสาขาอายุรศาสตร์ โรงพยาบาลสังชลานครินทร์

พ.ศ.2536-ปัจจุบัน แพทย์ประจำบ้านต่อขอด (Fellow) ในหน่วยโรคข้อและรูมาติก
(Rheumatology) ภาควิชาอายุรศาสตร์
คณะแพทยศาสตร์จุฬาลงกรณ์มหาวิทยาลัย

ກາຄຜນວກ

Gold HN

Other

Clinical Trial in Rheumatoid Arthritis

Date..... Drug

Name Age Sex M F

Medical illness and duration

Duration of Rheumatoid Arthritis years

Previous treatment

Failure partial response, Good response, Allergy

| Pattern of R.A | Articular Symptom | | | Associated Symptom |
|--------------------|-------------------|-------|------|--------------------|
| | Mono | Pauci | Poly | |
| Initial Present | | | | |

Revised American Rheumatism Association criteria for rheumatoid arthritis
Four or more criteria must be present to diagnose rheumatoid arthritis :

| A R A - Diagnostic Criteria | Yes | No |
|--|-----|----|
| 1. Morning stiffness for at least one hour and present for at least six weeks | | |
| 2. Swelling of three or more joints for at least six weeks | | |
| 3. Swelling of wrist, metacarpophalangeal or proximal interphalangeal joints for six or more weeks | | |
| 4. Symmetric joint swelling | | |
| 5. Hand roentgenogram changes typical of rheumatoid arthritis that must include erosions or unequivocal bony decalcification | | |
| 6. Rheumatoid nodules | | |
| 7. Serum rheumatoid factor by a method positive in less than 5 % of normals | | |

Presently on
No. Drug given Left

Duration of morning stiffness (min.)

| 0 | 1 | 2 | 3 |
|-----|---------|----------|------|
| <30 | 30 - 60 | 60 - 120 | >120 |

On set of atigue (hour)

| 0 | 1 | 2 | 3 |
|----|-------|-------|----|
| >3 | 2 - 3 | 1 - 2 | <1 |

Walking - time (25 feet) sec. ESR

Grip strength

LT - hand

RT - hand

Mean 1st 2nd 3rd 1st 2nd 3rd Mean

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

if patient is able to grip, do not subtract from the recorded reading
if patient is unable to grip, record a reading to 20

-3-

Joint Evaluation

\emptyset = None

1 = Mild

2 = Moderate

3 = Severe



Extra articular

- Subcutaneous nodule
- Heart - Pericarditis, Pericardial effusion, Cardiomyopathy, Conduction defect
- Lung - Pleurisy, Plural effusion, Other.....
- Eye - Scleritis, Scleromalacia perforous, Iridocyclitis
- Nervous system
- Vasculitis
- Systemic - Anemia, Generalized osteoporosis, Felty's syndrome, Sjogren syndrome, Amyloidosis, Lymphadenopathy

ARA - Functional class - Evaluation

| | |
|----------------|---|
| 1. Class I : | Complete : ability to carry on all usual duties without handicaps |
| 2. Class II : | Adequate for normal activities : despite handicap of discomfort or limited motion at one or more joints |
| 3. Class III : | Limited : only to little or none of duties of usual occupation or self care |
| 4. Class IV : | In incapacitated, largely or wholly : Bedridden or confined to wheelchair : little or no self care |

ARA Anatomical stage - Evaluation

| | Must be present | May be present | Must be absent |
|--------------|---|---|--------------------------------|
| 1. Stage I | | Osteoporosis | Bone and cartilage destruction |
| 2. Stage II | Osteoporosis | Limitation of motion bone and cartilage destruction Adjacent muscle atrophy nODULES, Tenosynovitis | Joint deformity |
| 3. Stage III | Bone and cartilage destruction joint deformity | Adjacent muscle atrophy, NODULES, Tenosynovitis | |
| 4. Stage IV | Fibrous or bony destruction | | |

Total Evaluation

Investigator

Patient

| 4 Very good | 3 Good | 2 Fair | 1 Poor |
|----------------|-----------|-----------|-----------|
| | | | |

| 4 Very good | 3 Good | 2 Fair | 1 Poor |
|----------------|-----------|-----------|-----------|
| | | | |

Side effect and Toxicity

- Cutaneous - Pruritus, Rash, Exfoliative, Other
- Mucous membrane - Ulceration, bleeding
- Renal - proteinuria, Hematuria, nephrotic syndrome
- Hematologic - Leucopenia (WBC < 3500), Thrombocytopenia (PLT < 100,000), agranulocytosis, Aplastic anemia
- GI - Nausea, Vomiting, Diarrhea, constipation, abdominal pain, bleeding
- Other

Laboratory Test

| | | | | | |
|-------------|----------------------|----------------|---------------------------|------------------------|------------|
| CBC | : Hb | Hct | WBC | N | L |
| | E | Platelet | ESR | M | B |
| Urine | : Alb | Sugar | WBC | RBC | Cast |
| Stool | : Occult blood | Parasite | | | |
| Blood other | : BUN | Cr | FBs | Uric acid | |
| | SGOT | SGPT | AIK PO ₄ | Bil | |
| | R.F | ANF | CH ₅₀ | B ₁ C | |
| | Other | | | | |