

JAK Inhibitors Improve Rheumatoid Arthritis Outcomes Regardless of Comorbidities: Study

Researchers have found in a new study that patients with rheumatoid arthritis treated with JAK inhibitors showed significant reductions in disease activity and improvements in patient-reported outcomes over 12 months. Treatment effectiveness and safety did not differ significantly according to type 2 diabetes status, cardiometabolic multimorbidity, or age, supporting the use of JAK inhibitors across these patient groups. The study was published in the *Clinical Rheumatology* journal by Daniela I. and colleagues.

To examine safety and treatment efficacy in practice, an observational multicenter study lasting for 12 months was conducted in the GIRRCS (Gruppo Italiano di Ricerca in Reumatologia Clinica e Sperimentale) model. The trial included 440 adults suffering from RA, who received treatment by means of JAK inhibitors. Clinical activity scores, PROs and adverse events were analyzed during a 12-month follow-up period.

Subjects were divided into analytical subgroups taking into account such cardiometabolic conditions as presence of type 2 diabetes, age of 65 years and more, and cardiometabolic multimorbidity (coexistence of two or more metabolic conditions such as hypertension, type 2 diabetes or dyslipidemia). Statistical analysis of these variables was aimed at detection of possible influence of these conditions on clinical response and adverse drug reactions.

Key findings:

- The 12-month longitudinal observation of the 440 RA patients provided particular quantitative data regarding demographics, efficacy, and safety.
- A group of 440 patients on JAK inhibitors (82.9% females; mean age 61.0 ± 11.0 years) participated in the research. High blood pressure was noted among 41.4% of the subjects, obesity – among 39.0%, dyslipidemia – among 28.4%, type 2 diabetes – among 14.3%, and cardiovascular disease history – among 3.2%.
- Statistically significant improvements were achieved in all disease activity measures and patient-reported outcomes regardless of the presence of T2D, cardiometabolic multimorbidity, and age ≥ 65 .
- A cumulative incidence of adverse events was 18.9%, and the majority of the events was classified as mild and reversible, and no serious events took place.
- Adverse event-associated treatment discontinuation rate was 7.7% in the analyzed patients (or 34 drug discontinuations in total).
- Statistical comparison proved that there was no significant influence of type 2 diabetes, cardiometabolic multimorbidity, and age ≥ 65 on safety outcomes.

JAK inhibitors are highly effective and safe to use in patients with rheumatoid arthritis despite their metabolic status. It should be noted that the results of the study conclude on the basis that although there is a lower rate of events, the existence of type 2 diabetes, cardiometabolic multimorbidity or increased age does not affect treatment efficacy or increase the general risk of medication use.

Reference:

Iacono, D., Raimondi, M., Marino, V. *et al.* Effectiveness and safety of Janus Kinase inhibitors in patients with rheumatoid arthritis, results from a multicenter observational “real-life” GIRRCS (Gruppo Italiano di Ricerca in Reumatologia Clinica e Sperimentale) study. *Clin Rheumatol* (2026). <https://doi.org/10.1007/s10067-026-08373-8>

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