



Overview of the Initiative

WHAT IS THE RA NARRATIVE?

The RA NarRAtive is an international initiative aimed at elevating the important role of the patient in the management of rheumatoid arthritis (RA).

WHAT IS THE RA NARRATIVE ADVISORY PANEL?

The RA NarRAtive initiative is supported by Pfizer Inflammation and Immunology and is directed by a global Advisory Panel comprised of 39 healthcare providers and patient group leaders (many of whom are living with RA) from 17 countries.

WHY IS THE RA NARRATIVE NEEDED?

Despite advancement in the management of RA over the past 20 years, there is still opportunity to improve the patient-physician relationship. The goal of the RA NarRAtive is to help develop solutions that create positive change with the RA community around the management of RA.^{1,2,3,4,5,6,7}

WHAT HAS THE RA NARRATIVE ACCOMPLISHED?

- **Phase 1:** Developed and fielded a [first-of-its-kind patient survey](#) that assessed the quality of physician-patient communication and its relationship to RA disease management in over 3,900 adults living with RA in 15 countries.
- **Phase 2:** Fielded a corresponding survey of more than 1,700 rheumatologists in 15 countries in 2015 that assessed their perspectives. Combined, the survey data demonstrates disconnects between patients and physicians across multiple aspects of RA disease management.
- **Phase 3:** The RA NarRAtive initiative is continuing to focus on developing tools and resources that can bridge these identified gaps to improve patient-physician dialogue and help improve overall management of RA.

WHAT ARE THE KEY FINDINGS?

- Although the physician-patient relationship and a patients' perception of his or her RA can positively impact the management of RA disease,^{8,9} barriers still remain to optimal disease management.
- Despite physicians and patients sharing similar beliefs in setting goals for the management of their RA, there are gaps between belief and practice.^{10,11,12,13}
- There are key disconnects between patients and physicians that may contribute to patients feeling complacent about their treatment and disease status.^{14,15,16}
- Patient advocacy groups appear to be underutilized; less than one quarter of patients surveyed currently participate in a support or patient advocacy group.¹⁷





BASED ON THESE FINDINGS, THE ADVISORY PANEL RECOMMENDS THAT:

PHYSICIANS:

- Continue to encourage their patients to be involved in conversations about disease management decisions
- Work to ensure that their patients are comfortable discussing any topic related to their RA, including fears and concerns about RA's impact on their life
- Dig deeper by asking additional questions, even if their patient's initial response is that they feel "good enough" or are satisfied with treatment

PATIENTS:

- Select a physician they feel comfortable talking with about other aspects of their life – not just their treatment
- Do not settle for simply feeling "good enough," but instead focus on being honest and upfront with their physician about how they feel
- Set goals with their physician and discuss progress toward those goals during each clinical visit

For more information about the specific results of the RA NarRAtive, please visit Pfizer.com/RANarRAtive.

ADVISORY PANEL MEMBERS

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| Argentina | Dr. Maria Celina de La Vega, Rheumatologist, Medica Reumatologa Universitaria, Tini Jordán, Coordinator, Alianza Federal de Asociaciones de Pacientes con AR |
| Australia | Wendy Favorito, Arthritis Australia Consumer Director, Arthritis Australia |
| Brazil | Prof Cristiano Zerbini, Medical Director, CEPIC (Centro Paulista de Investigação Clínica) Adriana Paula de Oliveira, Volunteer, Associação Nacional dos Participantes de Fundos de Pensão (ANAPAR) |
| Canada | Dr. William Bensen, McMaster University Carolyn Whiskin, Pharmacy Program Director at the Charlton Centre for Specialized Treatments Cheryl Koehn, Arthritis Consumer Experts |
| France | Dr. Alain Saraux, University Hospital of Brest Rolande Guastalli, ANDAR (Association National de Défense contre L'Arthrite Rhumatoïde) |
| Germany | Prof Joern Kekow, Otto-von-Guericke University, Madgeburg *Patient Advocacy Group representative not permitted to participate per regulations |
| Hong Kong | Dr. Gavin Lee Ka Wing, Specialist in Rheumatology, Hong Kong Sanatorium and Hospital Michael Kei, Chairman of Hong Kong Rheumatoid Arthritis Association |
| Israel | Dr. Gleb Slobodin, Bnai Zion Hospital Meirav Ghefter, RRT |

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| Italy | Prof. Maurizio Cutolo, Director of Research Laboratories, Rheumatology, University Medical School of Genova Antonella Celano, President, Association of People with Rheumatic Diseases (APMAR) Serena Mingolla, Association of People with Rheumatic Diseases (APMAR) |
| Japan | Dr. Tsukasa Matsubara, Hospital Director, Matsubara Mayflower Hospital Mieko Hasegawa, President, The Japan Rheumatism Friendship Association |
| Romania | Catalin Codreanu, Carol Davila University of Medicine and Pharmacy Ovidiu Constantinescu, The Romanian League Against Rheumatism |
| South Korea | Dr. Eun-Young Lee, PhD, Division of Rheumatology, Seoul National University College of Medicine Jin-Hee, President, Penguin Korea |
| Spain | Raimon Sanmartí Sala, Coordinator of Arthritis Service of Rheumatology and Head of Research, Hospital Clinic of Barcelona Torralba Gomez-Portillo, President, CONARTRITIS |
| Taiwan | Hsiao Yi Lin, Professor at the Veterans General Hospital, Taipei Huang Chang, Ling-Yuan, Director-General of Rheumatoid Arthritis Aid Group (RAAG) |
| Turkey | Prof Nurullah Akkoc, Dokuz Eylul University |
| UK | Dr. James Galloway, Clinical Lecturer and Honorary Consultant, King's College Hospital Dr. Lyndsay Hughes, Guy's Hospital Clare Jacklin, Director of External Affairs, National Rheumatoid Arthritis Society (NRAS) |
| US | Co-Chair- Dr. Ara Dikranian, Rheumatologist, San Diego Arthritis Medical Clinic Co-Chair- Dr. Alan Gibofsky, Rheumatologist, Hospital for Special Surgery Cindy McDaniel, Vice President of Consumer Health, Arthritis Foundation |

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- ¹ Pharmaceutical Research and Manufacturers of America. Medicines in Development: Arthritis (A Report on Arthritis and Related Musculoskeletal Diseases). July 2014.
 - ² Wiederkehr D, Harnett J, Gerber R, et. al. Evaluation of real world experience with non-biologic DMARD in the treatment of RA in an electronic health record database [abstract]. In: ACR 2014; November 14-19; Boston, Massachusetts. [68356C]
 - ³ Curtis J and Singh J. The Use of Biologics in Rheumatoid Arthritis: Current and Emerging Paradigms of Care. *Clin Ther.* 2011; 33(6):679-707.
 - ⁴ Duclos M, Gossec L, Ruysse-Witrand A, et al. Retention rates of tumor necrosis factor blockers in daily practice in 770 rheumatic patients. *J Rheumatol.* 2006; 33:2433-2438.
 - ⁵ Van den Bemt. Medication adherence in patients with rheumatoid arthritis: a critical appraisal of the existing literature. *Expert Rev Clin Immunol.* 2012.
 - ⁶ Barton JL. Patient preferences and satisfaction in the treatment of rheumatoid arthritis with biologic therapy. *Patient Prefer Adherence.* 2009;3:335-344.
 - ⁷ Rheumatoid Patient Foundation. Unmasking Rheumatoid Disease The Patient Experience of RA. 2013.
 - ⁸ Pfizer Data on file. RA NarRAtive Patient Survey Banner 6. Question 700. P7
 - ⁹ Pfizer Data on file. RA NarRAtive Patient Survey Banner 6. Question 941_3. P115
 - ¹⁰ Pfizer Data on file. RA NarRAtive Physician Survey Banner 1. Question 1031_1. P97
 - ¹¹ Pfizer Data on file. RA NarRAtive Physician Survey Banner 1. Question 1010. P89
 - ¹² Pfizer Data on file. RA NarRAtive Patient Survey Banner 6. Question 818. P34
 - ¹³ Pfizer Data on file. RA NarRAtive Patient Survey Banner 6. Question 818. P34
 - ¹⁴ Pfizer Data on file. RA NarRAtive Physician Survey Banner 1. Question 1001_6. P78
 - ¹⁵ Pfizer Data on file. RA NarRAtive Patient Survey Banner 6. Question 840. P66
 - ¹⁶ Pfizer Data on file. RA NarRAtive Patient Survey Banner 6. Question 831_5. P56
 - ¹⁷ Pfizer Data on file. RA NarRAtive Patient Survey Banner 6. Question 850. P68