Invited article: Author reply to letter | Published 20 January 2012, doi:smw.2012.13504

The European Journal of Medical Sciences

Cite this as: Swiss Med Wkly. 2012;142:w13504

Reply

Reply to the letter to the editor "Might tocilizumab be useful in patients with giant-cell arteritis and normal ESR?"

Michael Seitz

Department of Rheumatology, Clinical Immunology & Allergology, University Hospital, Bern, Switzerland

This is an interesting question raised by these authors. However, in our previously published case series of patients with giant-cell arteritis (GCA) or Takayasu disease [1] we did not measure serum levels of IL-6 before and after treatment with tocilizumab (TCZ). Therefore, we cannot conclusively answer the authors' question if systemic IL-6 levels before treatment (TCZ) could serve as a predictor of response. Two of our patients had almost normal acute phase reaction before starting treatment with TCZ and they did respond quickly upon treatment, both clinically and in terms of reducibility of pre-existing glucocorticoid dosage. Therefore, even patients with low systemic inflammatory activity might respond to IL-6 blockade. However, this has to be confirmed by randomised controlled trials that closely correlate systemic inflammatory activity, clinical manifest-

ations and large vessel-associated inflammation with circulating IL-6 levels before and after treatment.

Correspondence: Michael Seitz, MD michael.seitz[at]insel.ch

Letter to the Editor:

http://www.smw.ch/content/smw-2012-13503/

References

1 Seitz M, Reichenbach S, Bonel HM, Adler S, Wermelinger F, Villiger PM. Rapid induction of remission in large vessel vasculitis by IL-6 blockade. A case series. Swiss Med Wkly. 2011;17:141–4.