

Resource

Remission

Unlike some other conditions, remission in RA does not mean that your disease has completely gone. It is more like a dormant volcano, able to erupt again, but currently stable.

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What is remission?

Unfortunately, there is currently no cure for RA, but patients can go through periods of remission, where their disease is at a very low level of activity, and they may be experiencing little or no symptoms.

Remission can be measured in different ways, though a common measure is a disease activity score

(DAS) of below 2.6. DAS, (or DAS28) is assessed by examining 28 joints in your body and combining this information with other factors, including blood test results (ESR or CRP). The National Institute for Health and Care Excellence (NICE) guidelines recommend that DAS is used regularly to monitor your condition, but we know from speaking to people on our helpline that this is not happening consistently. However, if you are being told that your disease is likely to be in remission, it is worth asking if your DAS can be assessed.

Will I come off medication if I'm in remission?

There is no definitive answer to this, as it will generally be decided on a case-by-case basis between you and your rheumatologist. However, there are recommendations to help guide this decision. The first thing to determine with your rheumatologist is why they believe your disease is in remission.

NICE guidelines recommend that for patients with established disease that has gone into remission, their rheumatology team should cautiously reduce the dose of their disease-modifying drugs, but act promptly to increase the dose again at the first sign of a flare. Within the guidelines, NICE refer to periods of 'sustained disease control' and define this as 'a minimum period of six months of remission or minimal disease activity'. Therefore, if your disease has only been in remission for a short period, you may not be advised to make any changes to your medication until a greater period of stability has been established. Similarly, in Scotland, the Scottish Intercollegiate Guidelines Network (SIGN) guidelines suggest that disease-modifying drugs should be "carefully and slowly withdrawn in patients who are in remission."

So, if your rheumatologist suggests that you may be in remission, you should ask how this has been determined and if possible, find out what your current DAS is. Once remission has been determined, the guidelines suggest that your treatment be withdrawn gradually.

Remission can last for weeks, months or even years, so if your medication is lowered or removed and your symptoms worsen, you should seek advice from your rheumatology team as soon as possible.

Medicines in rheumatoid arthritis

We believe it is essential that people living with RA understand why certain medicines are used, when they are used and how they work to manage the condition.

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