

SUPPLEMENTARY MATERIAL

Assessment of PROs

PtGA-VAS and Pain-VAS (range 0–100 mm; higher scores indicate increased arthritis disease activity; MCID: decrease from baseline ≥ 10 mm)[1, 2] were evaluated at baseline, Week 2, and Months 1, 2, 3, 4 and 6. Additionally, the following PROs were evaluated at baseline, Months 1, 3 and 6, and the percentages of patients reporting improvements \geq MCID analysed:[3-9] PGJS-VAS, ie patient global, separate joint and skin scores (range 0–100 mm: MCID: decrease from baseline ≥ 10 mm);[1] SF-36v2 PCS and MCS component summary (MCIDs: PCS and MCS: ≥ 2.5 points) and eight domain scores (norm-based scale; higher scores indicate higher level of functioning or well-being; PF, RP, BP, GH, VT, SF, RE, MH; MCID for all domain scores: ≥ 5.0 points);[3, 4] FACIT-Fatigue Total score (range 0–52; higher scores indicate less fatigue; MCID: ≥ 4.0 points);[10] EQ-5D-3L dimensions scores (mobility, self-care, usual activities, pain/discomfort, anxiety/depression [range 1–3; higher score indicates poorer HRQoL]); overall health state, evaluated using EQ-VAS (0–100 mm; higher scores indicate better health status);[11] ASQoL (eg motivation, daily activities, mood independence and social interactions; range 0–18; higher score indicates poorer HRQoL; MCID: decrease from baseline ≥ 1.8 points).[12] HAQ-DI is also reported here, in addition to being reported previously (range 0–3; higher scores indicate greater functional impairment; MCID: decrease from baseline ≥ 0.35 points). Normative scores were calculated for: HAQ-DI ≤ 0.25 ; FACIT-Fatigue ≥ 40.1 ; SF-36v2 component and domain scores ≥ 50 .

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