

Rituximab in cryoglobulinaemic vasculitis

Reply to:

Sustained response to rituximab in a patient with Sjögren's syndrome and severe refractory polyneuropathy

Sirs,

We thank M. Pertovaara and M. Korpela for their interest in our publications about the effect of rituximab in neurological complications of Sjögren's syndrome (SS). Their interesting observation illustrates very well that the sub-type of neurological complications which can respond to rituximab is vasculitis-associated sensorimotor polyneuropathy, and especially if it is associated with cryoglobulinaemia. In their clinical case, neuro-muscular biopsy was not performed and cryoglobulinaemia was not looked for. But it is very probable that the latter immunologic abnormality was present. In favour of that, the presence of purpura, a high monoclonal IgM level, a very low C4 level, a high rheumatoid factor level and the presence of lymphoplasmacytoid cells both in bone marrow and lymph nodes. In our publication on patients with SS and peripheral neurological complications in the AIR registry, efficacy of rituximab was

restricted to patients with vasculitis, most of them (9/10) associated with cryoglobulinaemia (1). These results were confirmed in the analysis of the 23 patients of the AIR registry with non-hepatitis C virus (HCV)-associated cryoglobulinaemic vasculitis (essential or associated with different autoimmune diseases) (2) and in two recent randomised controlled studies which demonstrated a better efficacy of rituximab than conventional treatment in patients with HCV-associated cryoglobulinaemic vasculitis (3, 4).

A legal authorisation of rituximab is currently being discussed for ANCA-associated vasculitis. We now have a great deal of evidence that rituximab is also efficient in HCV or non HCV-related cryoglobulinaemic vasculitis. Since it is very improbable that larger controlled studies will be run on this rare disease, experts, authorities and the company should think together about a possible extension of this next probable authorisation to severe forms of this other type or vasculitis, HCV or non HCV-related.

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