Any flare should prompt consideration of the need for adjustment of the DMARD regimen.

Remark:
Evidence up to date as at 1 June 2024

14.2 Long-term use of low dose glucocorticoids in RA

Conditional recommendation against In review

Do not routinely use glucocorticoids as a long-term (>6 months) adjunct to DMARDs for the treatment of rheumatoid arthritis.

Remark:
Evidence up to date as at 18 June 2024

14.3 Short-term bridging glucocorticoids in addition to DMARD therapy in RA

Conditional recommendation In review

Consider using a short course of glucocorticoids in people with active rheumatoid arthritis who are initiating, switching or adding DMARD therapy, using the lowest effective dose until DMARDs take effect.

Inability to achieve the treatment target should imply the need for escalation of DMARD therapy rather than the use of additional glucocorticoids.

Remark:
A shared plan for dose reduction and discontinuation of bridging glucocorticoids should be developed at the start of the treatment course and regularly reviewed.

Evidence up to date as at 18 June 2024

15. Methods and Processes - Evidence Review

15.1 Clinical Questions (PICO's)

16. Guideline Expert Advisory Panel and Technical Team

16.1 Membership Terms of Reference

16.2 Conflict of Interests

17. Guideline Meeting Attendance Record and Recommendation Authorship

18. Glossary, Abbreviations and Acronyms

19. Appendices - Living evidence updates, forest plots and other supplementary information