Fig 3: Selected reasons to prescribe TNF inhibitors vs JAKs (EU5)

- **Mode of administration**: 46.2% for TNF inhibitor patients, 30.2% for JAK patients
- **Efficacious as monotherapy**: 31.9% for TNF inhibitor patients, 17.5% for JAK patients
- **Inhibition of radiographic progression**: 41.5% for TNF inhibitor patients, 31.9% for JAK patients
- **Patient request**: 21.0% for TNF inhibitor patients, 9.5% for JAK patients
- **Pain reduction**: 17.0% for TNF inhibitor patients, 8.2% for JAK patients
- **Reduction of morning stiffness**: 16.0% for TNF inhibitor patients, 8.3% for JAK patients
- **Positive pt experience inc pt outcomes**: 24.4% for TNF inhibitor patients, 15.1% for JAK patients
- **Physician’s positive personal experience**: 45.5% for TNF inhibitor patients
- **Long-term efficacy data available**: 31.6% for TNF inhibitor patients, 10.9% for JAK patients
- **Favorable formulary placement**: 21.7% for TNF inhibitor patients, 9.2% for JAK patients
- **Long-term patient persistence (>=5yrs)**: 21.7% for TNF inhibitor patients, 9.2% for JAK patients
- **Low risk of anti-drug autoantibodies**: 14.7% for TNF inhibitor patients, 7.6% for JAK patients
- **Long-term safety data available**: 30.0% for TNF inhibitor patients, 6.7% for JAK patients

*P<0.05, **P<0.01 significant differences between TNF inhibitors and JAK patients

Source: Ipsos Healthcare RA Therapy Monitor

n = 250 rheumatologists on average