Response to: 'Error in the dosage of methotrexate in the EULAR/ERA-EDTA recommendations for the management of ANCA-associated vasculitis' by Scheicht

The European Alliance of Associations for Rheumatology (EULAR) recommendations for the management of ANCA-associated vasculitis were published online on 23 June 2016.[1] The recommendations were cobadged with the European Renal Association. The Article Metrics on the journal website (available from https://ard.bmj.com/content/75/9/1583.altmetrics, accessed on 4 February 2022) record 667 citations and 119 217 downloads. During production, they were circulated extensively among the authors and postproduction in the vasculitis community. Indeed, they are the only set of EULAR recommendations to have been formally voted on by 88 other clinicians besides the task force in a formal validation exercise.[2] On behalf of the authors, we thank Dr Scheicht for his kind words as well as for drawing our attention to the typographical error regarding the dose of methotrexate.[3]

In the text following statement 4 of the recommendations, we mention that methotrexate (20–25 mg/week, oral or parenteral) may be used as an alternative to cyclophosphamide in patients with less severe disease and in those with normal renal function. In the same paragraph, we mention that oral methotrexate 20–25 mg/week was non-inferior to oral cyclophosphamide at 6 months. Unfortunately, the entire steering group and the 88 other clinicians who voted on the recommendations have all overlooked that in the text following statement 7, we have made the error of saying that methotrexate (20–25 mg/kg/week) has been effectively used for maintenance therapy after induction of remission with cyclophosphamide. This is clearly an error, and the text should read 20–25 mg/week.

Dr Scheicht has recommended that an additional layer of security be implemented in the production of EULAR recommendations. The updated standardised operating procedures for EULAR-endorsed recommendations now require that the final manuscript be sent to the chair of the standing committee for approval, following which the EULAR secretariat will send the manuscript to all members of the EULAR executive committee.[4] This was indeed an unfortunate error, and we thank Dr Scheicht once again for his diligent attention. We are in the process of updating the 2016 recommendations, and we will review the dosing of all recommended medications.

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