Supplementary File 1 – The 2009 Recommendations

Table 1 The 10 recommendations for cardiovascular (CV) risk management in rheumatoid arthritis (RA), psoriatic arthritis (PsA) and ankylosing spondylitis (AS)

Recommendations		Level of evidence	Strength of recommendation
1.	RA should be regarded as a condition associated with higher risk for CV disease. This may also apply to AS and PsA, although the evidence base is less. The increased risk appears to be due to both an increased prevalence of traditional risk factors and the inflammatory burden	2b–3	B
2.	Adequate control of disease activity is necessary to lower the CV risk	2b–3	B
3.	CV risk assessment using national guidelines is recommended for all patients with RA and should be considered annually for all patients with AS and PsA. Risk assessments should be repeated when antirheumatic treatment has been changed	3–4	C
4.	Risk score models should be adapted for patients with RA by introducing a 1.5 multiplication factor. This multiplication factor should be used when the patient with RA meets two of the following three criteria:	3–4	C
	— Disease duration of more than 10 years		
	— RF or anti-CCP positivity		
	— Presence of certain extra-articular manifestations		
5.	TC/HDL cholesterol ratio should be used when the SCORE model is used	3	C
6.	Intervention should be carried out according to national guidelines	3	C
7.	Statins, ACE inhibitors and/or AT-II blockers are preferred treatment options	2a–3	C-D
8.	The role of coxibs and most NSAIDs in CV risk is not well established and needs further investigation. Hence, we should be very cautious about prescribing them, especially for patients with a documented CV disease or in the presence of CV risk factors	2a–3	C
9.	Corticosteroids: use the lowest dose possible	3	C
10.	Recommend smoking cessation	3	C

ACE, angiotensin-converting enzyme; anti-CCP, anti-cyclic citrullinated peptide; AT-II, angiotensin II; coxibs, cyclo-oxygenase-2 inhibitors; HDL, high-density lipoprotein; NSAIDs, non-steroidal anti-inflammatory drugs; RF, rheumatoid factor; SCORE, Systematic Coronary Risk Evaluation; TC, total cholesterol.