

placebo, diacerein 50 mg (25 mg twice daily), 100 mg (50 mg twice daily) or 150 mg (75 mg twice daily).

Treatment duration was 4 months. The primary efficacy criterion was the patient's assessment of pain on movement (for the 48 hours prior to the visit) using a 100 mm VAS. The secondary criteria included the Western Ontario and McMaster Universities Arthritis (WOMAC) Index , handicap Visual Analogue Scale (VAS), acetaminophen consumption (the only analgesic treatment authorised during the study) and the patient's and investigator's overall assessments. Clinical safety was evaluated at each visit and a full laboratory safety test was conducted 3 times during the study.

The main adverse event observed in the study was generally mild-to-moderate diarrhoea. Withdrawals due to diarrhoea were reported for 12 patients in the 150 mg/day diacerein group compared with 3 patients in each of the other 3 groups. No serious or severe adverse events regarding the upper gastrointestinal tract occurred during the study. A larger number of patients assessed safety across visits as “good” and “very good” in the 50 and 100 mg/day diacerein groups than those in the 150 mg/day diacerein group. Similar results were observed for the investigators' assessment.

Consequently, this study confirmed that the optimum dose of diacerein is 100 mg per day (50 mg twice daily).

### Safety Overview

Gastrointestinal adverse events

Orally administered anthraquinone derivatives are identified to typically produce laxation within 6 – 12 hours of administration but the effect may not occur for 24 hours.