AB0295

PREVALENCE OF CARDIOVASCULAR DISEASES AND TRADITIONAL CARDIOVASCULAR RISK FACTORS IN PATIENTS WITH RHEUMATOID ARTHRITIS:A REAL-LIFE EVIDENCE FROM BIOSTAR NATIONWIDE REGISTRY

Keywords: Cardiovascular disease, Rheumatoid arthritis

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Background: Patients with rheumatoid arthritis (RA) have increased morbidity and mortality due to cardiovascular (CV) comorbidities.

Objectives: The association of CV diseases (CVD) and traditional CV risk factors have been debated, depending on patient and RA characteristics. This study aimed to find the prevalence of CVD and CV risk factors in patients with RA.

Methods: A multi-center cross-sectional study was performed on RA patients using the BioSTAR (Biological and Targeted Synthetic Disease-Modifying Antirheumatic Drugs Registry). Socio-demographic, clinical, and follow-up data were collected. Patients with and without major adverse cardiovascular events (MACE) were grouped as Group 1 and Group 2. Prevalence rates of CVD and traditional CV risk factors were the primary outcomes. Secondary outcomes were the differences in the clinical characteristics between patients with and without CVD.

Results: We analyzed 724 RA patients with a mean age of 55.1 ±12.8 years. There was a female preponderance (79.6%). The prevalence rate of CVD was 4.6% (n=33). The frequencies of the diseases in the MACE category were ischemic heart disease in 27, congestive heart failure in 5, peripheral vascular disorders in 3, and cerebrovascular events in 3 patients. The patients with CVD (Group 1) were significantly male, older, and had higher BMI (p=0.027, p<0.001, and p=0.041). Obesity (33.4%) and hypertension (27.2%) were the two CV risk factors most frequently. Male sex (HR=0.085, 95% CI:0.028-0.257, p<0.001) and hypertension (HR=4.63, 95% CI:1.251-17.134, p=0.022) were the independent risk factors for CVD.

Conclusion: The prevalence of CVD in RA patients was 4.6%. Some common risk factors for CVD in the general population, including male sex, older age, and hypertension, were evident in RA patients. sex and hypertension were the independent risk factors for developing CVD in patients with RA.

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Table 1.   Socio-demographic and clinical characteristics of the study groups.

		Overall (n=724)	Group 1 (n=33)	Group 2 (n=691)	p
Age group [‡]	<40 years	92 (12.7)	0 (0)	92 (13.3)	0.015
	≥40 years	632 (87.3)	33 (100)	599 (86.7)	
Sex [‡]	Male	148 (20.4)	12 (36.4)	136 (19.7)	0.027
	Female	576 (79.6)	21 (63.6)	555 (80.3)	
BMI group [‡]	<30 kg/m²	482 (66.6)	17 (51.5)	465 (67.3)	0.087
	≥30 kg/m²	242 (33.4)	16 (48.5)	226 (32.7)	
Smoking [‡]	Current smoker	101 (14.1)	1 (3.0)	100 (14.7)	0.071
Alcohol [‡]	Current consumer	21 (3.0)	2 (6.3)	19 (2.8)	0.248
Educational status [‡]	Illiterate/primary	448 (61.9)	22 (66.7)	426 (61.6)	0.865
	High school	202 (27.9)	9 (27.3)	193 (27.9)	
	University or higher	73 (10.1)	2 (6.1)	71 (10.3)	
Comorbidities [‡]	Hypertension	197 (27.2)	22 (66.7)	175 (26.6)	<0.001
	Diabetes mellitus	100 (13.8)	12 (36.4)	88 (13.7)	0.001
	Chronic renal failure	23 (3.2)	5 (15.2)	18 (2.9)	0.004
	Dyslipidemia	61 (8.4)	11 (44.0)	50 (11.9)	<0.001
	COPD	39 (5.4)	6 (18.2)	33 (4.8)	0.007
	Coagulopathy	6 (0.8)	3 (10.3)	3 (0.5)	0.002
	Malignancy	12 (1.7)	2 (6.3)	10 (1.6)	0.113
	Valvular heart disease	11 (1.5)	2 (6.1)	9 (1.3)	0.256

†: median (min-max), ‡: n (%)Group 1 and 2: Patients with and without major adverse cardiovascular event (cardiovascular disease).BMI: body mass index, COPD: chronic obstructive pulmonary disease.

AB0296

THE REAL IMPACT OF DEPRESSION AND ANXIETY ON RHEUMATOID ARTHRITIS PATIENTS: A COHORT STUDY

Keywords: Patient reported outcomes, Quality of care, Health services research

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Background: Rheumatoid Arthritis (RA) patients are more prone to have depression and anxiety compared to the general healthy population. Although it's been increasingly recognised that mental health conditions are associated with higher disease activity and worse disease outcomes, depression and anxiety are not widely considered in routine care of arthritis patients.

Objectives: This study aims to estimate, in a large cohort of Portuguese patients with RA, the prevalence of depression and anxiety and to explore associations with demographic characteristics and disease-related measures.

Methods: We performed a retrospective analysis including patients diagnosed with RA, according to the 2010 ACR/EULAR criteria, who started their first biological Disease Modifying Antirheumatic Drug (bDMARD). Demographic, clinical and laboratory data were obtained by consulting Rheumatic Diseases Portuguese Register (Reuma.pt). Associations with demographic characteristics and disease-related measures were examined at baseline, 6, 12, 18 and 24 months. Statistical analyses were performed using SPSS statistical software, version 23.0.

Results: A total of 357 patients with RA were included. Eighty-two per cent were females (82%). The mean age was 54 ± 11.01 years and the median disease duration was 10 years [min 0.5, max 45]. Rheumatoid Factor (RF) was positive in 75% of patients and Antibodies to Citrullinated Peptides (anti-CCP) in 82%. The prevalence of depression and anxiety were 34.7% and 23.5%, respectively. Both groups (RA depressed/anxiety) had statistically significant differences concerning gender. Patients with RA and depression/anxiety were significantly more likely to be women and had a lower disease duration. Depressed patients showed a younger RA onset. Unemployed patients were more likely to be depressed. Other factors such as education, smoking or alcohol consumption were not significantly associated. Baseline depression/anxiety was associated with increased patient's global assessment and number of painful joints but not with levels of acute phase reactants. Treatment with conventional synthetic DMARD and/or glucocorticoids did not have any significant association with either depression or anxiety. The proportion of patients achieving disease