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AB1241 HIGH LEVELS OF PATIENT SATISFACTION IN A PUBLIC HOSPITAL STREAMED RHEUMATOID ARTHRITIS CLINIC COHORT

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Background: Many Australian public rheumatology services have now adopted streamed clinics for RA and specific rheumatic diseases to promote best practice care. Our RA clinic has been operating for a decade and serves a large population in Southeast Victoria. Patient attitudes to such streamed clinics have not been extensively examined, despite the integral role patient satisfaction plays in decisions about how health care is delivered [1,2].

Objectives: To evaluate the level of patient satisfaction in an established tertiary hospital streamed RA clinic.

Methods: A cross-sectional study of 106 patients was undertaken at a public RA outpatient's clinic. Eight domains included questions which evaluated clinic administration, the consultation itself, and overall experience using a Likert scale ranging from 1–5 (1=very poor, 5=very good). Qualitative comments were also recorded.

Results: Patient attitudes toward the clinic were predominately positive. 90.5% of patients scored their overall experience as good⁴ or very good⁵ (mean=4.46), with 69.8% of these patients scoring 5. Questions regarding the consultation itself received the highest satisfaction scores. Patients were highly satisfied with the explanations given about their condition or treatment (mean=4.59), addressing of patient concerns (mean=4.56) and length of consultation (mean=4.52). Waiting time received the lowest satisfaction score (mean=3.25), and a further 36.4% of qualitative comments expressed dissatisfaction with the long wait times. 15.2% of qualitative comments regarded limited parking at the hospital, and 9.1% to difficulty locating the clinic within the hospital. 6.1% of patients wanted more information regarding complementary medications or lifestyle modifications. Despite this, 94.7% of all patients surveyed would recommend the clinic to friends or family.

Abstract AB1241 – Table 1

Category	Question	Mean
Clinic administration	Ease of booking appointments	4.36
	Waiting time	3.25
Consultation	Explanations given by doctor/nurses	4.59
	Questions and concerns answered to your satisfaction	4.56
	Amount of time	4.52
Overall Experience	Rating of overall experience	4.46
	Would you recommend clinic to friends/family	Yes=94.74% No=5.26%

Conclusions: High levels of patient satisfaction with the streamed RA clinic consultation outweighed frustrations with wait times and parking. This is demonstrated by the high overall rating and most patients being likely to recommend the clinic, and highlights the priority and importance of good communication for patient satisfaction. These findings can guide areas of future improvement to the quality of patient experience. From the perspective of patients, streamed disease clinics like this RA clinic appear to be highly acceptable in the provision of specialised care, and have garnered extremely positive patient satisfaction and feedback.

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AB1242 COMPARING ADHERENCE TO TREATMENT IN LUPUS AND VASCULITIS PATIENTS

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Background: Good adherence to prescribed pharmacotherapy is often over-estimated by physicians. Although in Systemic Lupus Erythematosus (SLE) non-adherence is well-researched, less research exists for vasculitis.

Objectives: We compared cohorts of patients with SLE and vasculitis to identify emerging patterns, behaviours and differences that could introduce barriers to adherence.

Methods: With patient input, we designed and undertook an anonymised questionnaire-based survey on the assessment of self-reported adherence and influencing factors in lupus and vasculitis clinics at University College Hospital (UCLH) and Royal Free Hospital (RFH). Both serve a largely urban and ethnically diverse population.

Results:

Abstract AB1242 – Table 1

	Lupus (n=110)	Vasculitis (n=75)	P value
Female	99/109 (91%)	43/73 (59%)	<0.001
Age>60 years	14/104 (14%)	34/68 (50%)	<0.001
Disease duration>10 years	61/106 (58%)	18/74 (24%)	<0.001
Self-rate Disease activity≥7/10	17/106 (16%)	16/70 (23%)	0.324
Kidney function Moderate or severe	32/96 (33%)	22/73 (30%)	0.659
Self-medicating	103/108 (95%)	69/72 (96%)	1.00
"Always taking tablets as prescribed"	70/102 (67%)	50/62 (81%)	0.104
"Managing well with medication"	52/103 (51%)	63/66 (96%)	0.0001
≥7/10 on Self rate Likert scale			
Attending>75% of clinic appointments	99/107 (93%)	72/72 (100%)	0.022

A total of 199 patients completed the questionnaire. 110 (55%) had lupus and 75 (38%) vasculitis. 14 (7%) patients reported having other conditions and thus excluded. 52% were Caucasian and 37% were born outside the UK. The majority (78%) were female and 28% were aged >60 years. Half were university graduates. Both centres had similar number of responses reducing bias. As shown in table 1, lupus patients were more females (p<0.001), younger (p<0.001), with longer disease duration (p<0.001) and commented that adherence decreased with time (p=0.011) compared to vasculitis patients. Conversely, the vasculitis patients had higher attendance at clinic appointments (p=0.022) and were more confident they could manage taking tablets correctly. 67% of lupus patients and 81% of vasculitis patients reported that they always took tablets as prescribed (p=0.104). Concerns of weight gain and osteoporosis worried patients on steroids. Changes in weight, appearance, nausea and fatigue were common side-effects for missed medications. A small number of patients cited religion or alternative therapies as a reason (<5%). Furthermore, as shown in fig 1, non-deliberate forgetfulness was the most common reason for non-adherence, in both groups. Overall, the majority of patients (96%) were self-medicating and reported taking an average of 5 different types of tablets, half of this for their Lupus/Vasculitis. Patients were well-informed about their condition and medications.

Reasons relating to the Tablets/Medication

Abstract AB1242 – Figure 1