Background: Recent evidence from epidemiological studies has suggested that reproductive factors may play an important role for rheumatoid arthritis (RA) development. An inverse association was reported in several studies between parity and risk of RA.

Objectives: We investigated the association between parity and risk of anti-citrulininated peptide antibody (ACPA)-positive RA and ACPA-negative RA in the Malaysian population.

Methods: Data from the Malaysian Epidemiological Investigation of rheumatoid arthritis (MyEIRA) population-based case control study involving 902 female early arthritis (MyEIRA) population-based case control study involving 902 female early arthritis patients and 906 age and residential area-matched female controls were analysed. Parity history was assessed through a questionnaire. Parous women were compared with nulliparous women, by calculating odds ratio (OR) with 95% confidence intervals (CI).

Results: Our findings demonstrated that parity was significantly associated with decreased risk of developing RA in the Malaysian population (RA versus controls, 82% vs. 89%, OR 0.58, 95% CI 0.44–0.77, p<0.001). The association between parity and risk of RA was uniformly observed for ACPA-positive RA (OR 0.58, 95% CI 0.43–0.80, p<0.001) and ACPA-negative RA (OR 0.58, 95% CI 0.40–0.84, p<0.01) subsets, respectively. Compared with nulliparous women, the decreased risk was pronounced at the level of three and more live births for both ACPA-positive (OR 0.48, 95% CI 0.34–0.68, p<0.001) and ACPA-negative RA (OR 0.46, 95% CI 0.31–0.68, p<0.001) subsets.

Conclusions: Our data demonstrated that parity and level of three and more live births was associated with decreased risk of developing RA in the Malaysian population. The associated decrease risk was observed in both ACPA-positive and ACPA-negative RA subsets.

Disclosure of Interest: None declared

and from 7 to 10 in the other countries. Levels of agreement with the four recommendations differed between countries. Reasons for non-complete agreement in Finland included fear of losing contact with the rheumatologist and do not accept the nurse; barriers were if service is not offered or available and nurses were too busy. The application range was 0–9 in the four countries, with some individual differences (figure 1).

Conclusions: Further work and participation of patient organisations is needed for applying the EULAR-RN and removing the barriers against it.

REFERENCES:

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Disclosure of Interest: None declared

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RELATION BETWEEN SERUM ALBUMIN AND PHYSICAL PERFORMANCE AND MOBILITY IN A COMMUNITY-BASED ELDERLY PEOPLE WITH OSTEOPOROSIS

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Background: Osteoporosis is a disease related to ageing and to other interacting variables, including genetic, metabolic, physical and nutritional factors. Several studies have reported that the serum albumin level in the elderly is significantly associated with muscle mass, muscle strength and functional capacity. Even among a nondisabled older persons, lower albumin concentrations have been shown to be independently associated with poorer performance as assessed by objective physical performance tests. 2

Objectives: The purpose of this study was to investigate the association of serum albumin with physical performance (muscle strength and mobility ability) in patients with osteoporosis.

Methods: For the study, 168 patients with OP (98 women and 70 men) underwent an interview, physical performance testing and blood analysis. A total of patients followed by Hacettepe University Faculty of Medicine Department of Internal Medicine, Division of Geriatric Medicine Department and Geriatric Rehabilitation Unit. We excluded those who Mini Mental State score is under 24 points, Mini Nutritional Assessment Test score is under 11 and have advanced kidney disease. Physical performance was evaluated with Five Times Sit to Stand (FTSS) and Six Metre Walk Test (SMWT). Hand grip strength was measured with dynamometer. Pearson’s correlation coefficients were calculated for serum albumin, FTSS, SMWT and handgrip strength.

Results: Participants mean age of 72.73±6.34 years and BMI 22.56±2.98 kg/m² mean serum albumin concentration ±standard deviation was 41.9±3.5 g/L for women and 41.9±2.9 g/L for men. Serum albumin was associated significantly with physical performance (mobility and walking speed) and muscle strength (hand grip) were in men and women with OP (p<0.005).

<table>
<thead>
<tr>
<th>FTSS</th>
<th>Walking Speed</th>
<th>Hand Grip</th>
</tr>
</thead>
<tbody>
<tr>
<td>Serum albumin (men)</td>
<td>0.001</td>
<td>0.001</td>
</tr>
<tr>
<td>P r</td>
<td>-0.322</td>
<td>-0.358</td>
</tr>
<tr>
<td>Serum albumin (women)</td>
<td>0.001</td>
<td>0.001</td>
</tr>
<tr>
<td>P r</td>
<td>-0.314</td>
<td>-0.243</td>
</tr>
</tbody>
</table>

Conclusions: Our study demonstrated that a decrease in the serum albumin level is associated with a decrease in physical performance and muscle strength, although causality is still unclear.

REFERENCES:

Disclosure of Interest: None declared