GETTING THE PULSE ON WORKPLACE EXPERIENCES AND ACCOMMODATIONS

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Background: As a patient-driven and managed non-profit organization, the Board of members of the Canadian Arthritis Patient Alliance (CAPA) have experienced many of the workplace challenges of arthritis first-hand. Recognizing the impact of being able to contribute in the workplace, CAPA recently initiated a project focused on broadening the understanding of the challenges faced by people living with arthritis in the workplace; and, to develop workplace tools and appropriate advocacy activities to address these challenges.

Objectives: A survey concerning arthritis in the workplace was developed with the goal of enhancing the understanding of the workplace challenges faced by people with arthritis, including the type and effectiveness of personal and workplace accommodations and the effectiveness of available resources.

Methods: A Board member/project manager developed the survey in consultation with people living with arthritis. The survey was available in English and French and targeted to people who live with various forms of arthritis, including inflammatory arthritis as well as Systemic Lupus Erythematosus, osteoarthritis, etc. The survey was distributed to membership in December 2017 through the newsletter and social media channels. Further promotion of the survey was completed through outreach to French and English patient and non-profit groups. The results were collected online through a survey platform and analyzed using basic statistical techniques.

Results: At the date of submission, 218 survey responses were received (127 English responses, 91 French responses) and the majority of respondents (over 90%) live in Canada. Over 80% of respondents live with inflammatory arthritis and 46% reported that arthritis affected them moderately or significantly in the workplace. Although 49% of respondents indicated that working had a positive effect on their lives, 66% indicated that working took energy away from other life activities. The most highly helpful workplace accommodations were: flexible hours of work (58%), breaks to give joints/body time to recover (55%), paid time away from work to attend medical appointments (47%), and working from home one or more days per week (39%). The most highly used personal accommodations were: reduction of social activities (77%), pacing during the work day (70%) and spreading out non-work activities (64%). The survey responses will be further summarized for the presentation, along with ideas for development of resources based on the gaps identified.

Conclusions: CAPA developed a workplace survey to broaden the understanding of the challenges faced by people living with arthritis in the workplace. Early analysis of the survey indicates a number of implications such as the significant impact of arthritis on the workplace and the impact on other life activities. CAPA will develop appropriate workplace tools and plan advocacy activities in order to address the survey findings.

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LARGE-SCALE SURVEY OFFERS GENERAL INSIGHT AND BASIS FOR POLICY DRAFTING

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Background: The Dutch Arthritis Foundation (DAF) commissioned a large-scale survey to gain a broad insight into the various aspects of living with RMDs in the Netherlands. The results offer an insight into the prevalence of RMDs, as well as into living with RMDs and the use and standard of relevant healthcare and social care in our country. This was the first survey of this scale in the Netherlands.

Objectives: The survey aimed to generate data about the prevalence and the impact of RMDs on people’s every-day lives in the Netherlands. The DAF will use the results to better inform parties involved in caring for people with RMDs and to help them with policy drafting, such as authorities, healthcare insurers and healthcare providers.

Methods: The bulk of all data consists of statistical data from the NIVEL Health Care Registrations (from 355 GP clinics, which register 1.1 million RMD patients). The survey also included a qualitative component (results from data gathered from and key informant interviews with people with arthritis, including the type and effectiveness of personal and workplace accommodations, the effectiveness of available resources).

Results: The results of Polish and English surveys were similar. The English group was more often interested in facilitating everyday life and finding support in living with a disease. The test of knowledge on RMDs results confirmed that myths are still present among patients and healthcare professionals using different methods. Such attitude should help in minimizing adverse effects that result from lack of knowledge or self-awareness.

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THE ROLE OF EMPATHY QUOTIENT IN PATIENT–PHYSICIAN COMMUNICATION: A TOOL TO IMPROVE MEDICATION ADHERENCE

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Background: Brain circuits governing the identification with others and those regulating the care feeling towards suffering people form wide distinct brain networks and are essential elements of empathy. This last is ruled by the ‘circuit of