(respectively p<0.001, p=0.004). Calprotectin level was correlated with baseline disease activity index (BASDAI (r=0.16, p<0.001), ASDAS-CRP (r=0.26, p<0.001)) and disability score (BASFI (r=0.14, p=0.003), ASDOL (r=0.16, p=0.001)). Interestingly, calprotectin at baseline did not predict radiographic progression at M24 (mSASSS worsening 0.27 μg/mL ±0.14 vs without mSASSS worsening 0.29 μg/mL ±0.19 (mean±SD)). There was also no correlation between calprotectin level and number of syndesmophytes.

Conclusions: Calprotectin do not seem to be a helpful biomarker predicting clinically relevant radiographic progression at 2 years although calprotectin levels at baseline are moderately correlated with disease activity in early axSpA.

REFERENCES:

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THU0279 GENDER DIFFERENCE IN PSYCHOLOGICAL STATUS AND SLEEP QUALITY IN THE PATIENTS WITH ANKYLOSING SPONDYLITIS

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Background: Ankylosing spondylitis (AS) is a chronic inflammatory disease which mainly involves the spine and sacroiliac joints. Anxiety and depression, are common among people with arthritis and interplay independently and synergistically with clinical outcomes such as pain and disability. Psychosocial variables can be found either within the body functions or within the personal factors. Meanwhile, AS patients may suffer from various sleep problems. Pain intensity, anxiety, and depression correlated significantly with poorer sleep quality. Whether gender difference exists in psychological status and sleep disturbance in AS patients remains unknown.

Objectives: Our aim was to investigate the prevalence of psychological disorders and sleep disturbance in Chinese patients with AS and then to explore gender difference in psychological status and sleep quality in the patients with AS.

Methods: Patients fulfilling modified New York criteria were enrolled from several rheumatology centres in China. Participants were required to complete a set of questionnaires and examinations, including demographic and clinical information, Bath Ankylosing Spondylitis Disease Activity Index (BASDAI), Bath Ankylosing Spondylitis Functional Index (BASFI), Zung self-rating anxiety scale (SAS), Zung self-rating depression scale (SDS) and the Pittsburgh Sleep Quality Index questionnaire (PSQI). Independent T test was performed to compare patients with different gender.

Results: Totally 3117 patients were included in the study. 2501 were males, and mean age were 27±9±13 years. While 616 were female patients whose mean age were 28.8±9±21 years. 32.3% of the patients had had anxiety. 62.2% had depression according to SDS, 63.4% had sleep disturbance. Male patients had an earlier age of disease onset than females (p<0.01). Although female patients had a shorter disease duration, they had higher scores of SAS and SDS (p<0.05). There was no significant difference in sleep quality between male and female patients.

Conclusions: A large number of AS patients were found to have anxiety, depression, sleep disturbance. Male AS patients tend to have an earlier age of disease onset, while female patients are more likely to have psychological disorders. Clinicians should take these factors into account during the assessment of the patients.