

was similar in both groups. And in terms of side effects no significant difference was seen between TCZ as monotherapy or combined with conventional immunosuppressants.

TABLE

	TCZ IN MONOTHERAPY (n=82)	TCZ COMBINED (n=52)	P
<b>BASAL FEATURES AT TCZ ONSET</b>			
<b>GENERAL FEATURES</b>			
Age, years, mean SD	71.2 ± 9.0	68.8 ± 8.0	<b>0.04</b>
Sex, female/male n (%)	62/20	39/13	0.93
Time from GCA diagnosis to TCZ onset (months), median [IQR]	13.0 [7.75-33.5]	18.5 [6.25-34.0]	0.333
<b>SYSTEMIC MANIFESTATIONS</b>			
Visual involvement, n (%)	6 (7.3%)	3 (5.8%)	0.72
Constitutional syndrome, n (%)	18 (22.0%)	13 (25.0%)	0.68
PMR, n (%)	40 (48.8%)	33 (63.5%)	0.096
<b>ISCHEMIC MANIFESTATIONS</b>			
Visual involvement, n (%)	20 (24.4%)	8 (15.4%)	0.21
Headache, n (%)	42 (51.2%)	28 (53.8%)	0.76
Jaw claudication, n (%)	7 (8.5%)	7 (13.5%)	0.36
<b>AORTITIS AND ANOTHER LVV involvement, n (%)</b>	<b>28 (34.1%)</b>	<b>30 (57.7%)</b>	<b>0.007</b>
<b>ACUTE PHASE REACTANTS</b>			
ESR, mm <sup>1/2</sup> hour, mean (SD)	39.4 ± 32.5	42.3 ± 29.6	0.6
CRP, mg/dL, mean (SD)	2.1 ± 3.0	4.4 ± 7.5	<b>0.014</b>
Hemoglobin, g/dL, mean (SD)	12.2 ± 1.5	12.4 ± 1.4	0.41
<b>CORTICOSTEROIDS AT TCZ ONSET</b>			
Prednisone dose, mg/d	23.9 ± 17.3	19.4 ± 14.0	0.11
<b>EFFICACY AND SAFETY AFTER TCZ</b>			
Prolonged remission n (%)			
Month 6	31 (50.8)	27 (69.2)	0.160
Month 12	18 (51.4)	28 (82.4)	<b>0.006</b>
Month 24	10 (50)	17 (85)	<b>0.018</b>
Relapses n (%)			
Month 1	3 (3.8)	1 (2)	0.579
Month 3	4 (5.4)	3 (6.3)	0.845
Month 6	3 (4.9)	2 (5.1)	0.962
Month 12	6 (17.1)	3 (8.8)	0.305
Month 24	6 (30)	1 (5)	0.037
<b>CORTICOSTEROIDS SPARING EFFECTS, median [IQR]</b>			
Month 1	15 [7.5-21.25]	10 [7.5-20]	0.457
Month 3	10 [5-15]	7.5 [5-10]	0.179
Month 6	5 [2.5-10]	5 [2.5-7.5]	0.146
Month 12	5 [0-5]	2.5 [0-5]	0.064
Month 24	1.3 [0-5]	0 [0-1.25]	0.095
<b>SIDE EFFECTS, n (%)</b>			
Relevant adverse events	23 (28)	9 (17.3)	0.155
Serious infections	12 (14.6)	4 (7.7)	0.227

**Conclusion:** Patients receiving combined conventional immunosuppressants with TCZ in the clinical practice study showed a higher prolonged remission. The incidence of serious infections and/or relevant adverse events was not affected according to the treatment. As well as the corticoid-sparing effect was achieved in the same way in both groups.

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SATURDAY, 15 JUNE 2019

#### Workshop: #ConnectToday and tomorrow: The campaigning continues

##### OP0340-PARE THE USE OF INTERACTIVE AUGMENTED REALITYPOSTERS AS PUBLIC ENGAGEMENT TOOLS TO ENHANCE THE EULAR 'DON'T DELAY, CONNECT TODAY' CAMPAIGN

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**Background:** Musculoskeletal conditions (MSC), such as Rheumatoid arthritis (RA), place a heavy burden on society and have severe consequences for the individuals affected. In order to limit this burden of disease, early diagnosis and implementation of treatment are essential and result in a significantly increased chance of achieving long-term sustained remission. The European League Against Rheumatism (EULAR) campaign 'Don't Delay Connect Today' (DDCT) was created in order to educate the general public and primary healthcare providers (such as General Practitioners) about the importance of recognising the early warning signs of MSC's. Many countries have adopted the campaign across Europe, with groups using new and creative ways to engage local communities with this essential message. In Scotland, the Rheumatosphere team have worked to develop interesting and impactful ways of disseminating this message to the public. Augmented reality (AR) is a potential tool to enhance learning and has already been successfully used as a new and exciting tool for teaching<sup>1</sup>. However, its role in less formal educational setting, such as public engagement, is still relatively unknown.

**Objectives:** The primary objective of this study was to test a new AR modality, assessing its effectiveness in increasing knowledge pertaining to RA and the central message of the DDCT campaign.

**Methods:** An interactive AR application was designed for a lay audience, incorporating aspects of RA disease pathogenesis along with the importance of early diagnosis and treatment of disease. The modality consisted of printed posters that were enhanced by an interactive AR application accessed through a hand-held tablet device. Members of the public, visiting the Glasgow Science Centre, were asked to assess our AR application by completing a 5 point Likert scale questionnaire before and after interacting with our posters and AR application.

**Results:** In total 27 participants took part in the testing, with the majority being between the age of 25-34 years old, a key target audience for the campaign, as this demographic commonly believe that they are 'too young' to develop arthritis<sup>2</sup>. Overall the testing revealed that the AR application was easy to use, engaging and enjoyable. Further evaluation conducted using a 5-point Likert scale, showed that the AR application was successful in raising awareness of RA, with 81% of the participants reporting that they felt more aware about the pathogenesis, symptoms and treatment of RA after use. Moreover, 55% of the participants thought that they would inform friends and family about the causes, symptoms and treatments of RA, helping to disseminate the campaign message further, enhancing its overall reach from a single event.

**Conclusion:** Overall the application was well received and indicates that this tool could be used to enhance public engagement moving forward. It would therefore be worthwhile to invest in the development of similar modalities for the EULAR 'Don't Delay, Connect Today' campaign.

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- [1] Sommerauer, P. and Müller, O. (2014) 'Augmented reality in informal learning environments: A field experiment in a mathematics exhibition', *Computers and Education*. Elsevier Ltd, 79(2014), pp. 59–68. doi: 10.1016/j.compedu.2014.07.013.
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##### OP0341-PARE #SEEUME – RAISING AWARENESS AND UNDERSTANDING OF JUVENILE IDIOPATHIC ARTHRITIS IN IRELAND

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**Background:** For those living with juvenile idiopathic arthritis (JIA), it is a doubly confounding condition. The popular perception that arthritis is an old person's disease leaves little room for understanding that children can also get the disease or its impact. There are 1,200 children and young people under 16 living with JIA in Ireland.

In this campaign, Arthritis Ireland sought to capture people's attention by subverting typical associations around arthritis. The campaign had to speak to and draw upon youth culture. Once people's attention was captured, this created an opportunity to communicate key pieces of information about the disease and highlight the challenging situation regarding access to Irish paediatric rheumatology services.

#### Objectives:

- To raise awareness that children and young people can get arthritis;
- To increase awareness and understanding of what it's like to live with JIA;
- To increase political support for the provision of enhanced paediatric rheumatology services.

**Methods:** #SeeMe was launched during Ireland's National Arthritis Week (9-15 April 2018) and encompassed social media, public affairs and media relations.

A key element of the campaign was the creation of a unique media asset, a short music video, which would speak directly to young people and encourage them to get involved in the campaign. The video communicated how JIA can impact enjoyable, everyday teenage activities such as dancing.

A dedicated microsite was created which housed all of the campaign assets.

A campaign petition called on the Government to implement the Model of Care for Paediatric Rheumatology. It was extremely successful, gathering more than 17,000 signatures and far exceeding the target of 5,000. The petition also harvested powerful testimony from supporters who were able to share their own stories of living with JIA.