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AB0247 LIFE QUALITY AND DEPRESSION LEVEL ASSESSMENT IN PATIENTS WITH RHEUMATOID ARTHRITIS

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Background: Depression is a common and significant rheumatoid arthritis (RA) comorbidity that develops under the influence of several factors, the most important being disease activity, pain intensity and degree of disability.

Objectives: The goal of the investigation was to determine existence of depression and assess life quality in patients living with RA.

Methods: The study sample comprised of 150 patients of average age 59.2 years, 79.2% of whom were women and 20.8% were men, who have lived with RA for an average of 9.6 years. For determining disease activity level, Disease Activity Score DAS28 was utilized. Pain intensity and global disease activity were rated using a visual analogue scale ranging from 1 to 100mm. For functional capacity assessments, Health Assessment Questionnaire (HAQ) index was adopted, depression severity was determined through Beck Depression Inventory (BDI), and Serbian version of the health-related quality of life instrument EQ-5D was employed to assess patients' quality of life.

Results: Average DAS28 score for the sample was 4.46 ± 1.32 , suggesting moderate RA activity. Pain intensity was on average scored at 53.2 ± 18.6 , whereas global disease activity was measured at 49.63 ± 20.2 , and the HAQ index of 1.0 ± 0.70 was obtained. According to the BDI, 21.4% of the patients exhibited no signs of depression, whereas 12.9% had mild, 54.3% moderate, and 11.4% severe form of depression. Quality of life, as measured by EQ-5D, was compromised in all life domains, with pain/discomfort, anxiety/depression, inability to partake in usual activities, compromised mobility and self-care most frequently

reported. In patients suffering from moderate and severe depression, high statistically significant positive correlation between depression score and HAQ index was noted. BDI score was statistically significantly positively correlated with the ratings on the EQ-5D scales pertaining to self-care, usual activities, pain/discomfort, and anxiety/depression.

Conclusion: Depression symptoms are common in patients with RA and can compromise quality of life in all life domains. When assessing disease severity and general status of patients with RA, depression symptoms should also be considered, given their high prevalence and influence on patients' everyday life.

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AB0248 PREVALENCE OF THYROID PEROXIDASE ANTIBODIES IN THE NORMAL POPULATION AND IN PATIENTS WITH RHEUMATOID ARTHRITIS AND THEIR PREDICTIVE VALUE FOR THE EFFECTIVENESS OF TREATING RHEUMATOID ARTHRITIS

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Background: Rheumatoid arthritis (RA) is sometimes associated with autoimmune thyroid disease (AITD)¹. However the relation between RA autoantibodies and thyroid autoantibodies is doubtful. However, there is no reliable data on whether concomitant positivity of level of anti-TPO in rheumatoid arthritis patients alters the efficacy of RA therapy.

Objectives: To study the presence of level of autoimmune thyroid markers (thyroid peroxidase antibodies -anti-TPO-), in clinically and serologically different forms of RA, compared to serum level of anti-TPO in control population, and to study whether anti-TPO positivity in any RA group influences the risk of high disease activity and also affects the likelihood of achieving DAS-28 remission.

Methods: 1428 patients were included in the retrospective single-center study using the database of the Arthritis Registry of Kecskemét (ARK). 772 RA patients, subclassified according to the presence of RF and anti-CCP into seropositive RA patients (positive to one or both seromarkers), and seronegative RA (negative to both seromarkers), and 656 patients were included as control group without autoimmune diseases.

Results: Elevated level of anti-TPO was found in 199/772 (26%) RA patients, compared to controls 32% (209/656). Furthermore, the level of anti-TPO was similar in seropositive and seronegative groups (24% and 27% respectively). RA patients treated with biological therapy presented higher level of anti-TPO in 28%, similarly to RA patients without biological therapy (24%). There was no relevant difference in level of anti-TPO among the groups with different disease activity (high activity: DAS28 > 5.1; - 24%; moderate activity: DAS28 ≤ 5.1; > 3.2; - 25%; and in low activity DAS28 ≤ 3.2; - 28% respectively).

Conclusion: Our present data show that the elevated level of anti-TPO is similarly in patients with serologically different forms of RA and in the control group. The presence of anti-TPO antibody does not affect the severity of RA and the results obtained with the treatment, including that anti-TPO positivity does not increase the need for biological therapy.

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AB0249 POSITIVE EFFECT OF ANTIRHEUMATIC THERAPY ON THE COURSE OF CHRONIC HEART FAILURE IN PATIENTS WITH EARLY RHEUMATOID ARTHRITIS

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Background:

Objectives: to evaluate the effect of antirheumatic therapy according to the "treat to target" strategy on the course of chronic heart failure (CHF) in patients with early RA.

Methods: The study included 22 patients CHF with valid diagnosis of RA (criteria ACR / EULAR, 2010), 17 (77%) of women, median (Me) age - 60 years, Me disease duration - 7 months; IgM seropositive for rheumatoid factor 10 (45%) and / or antibodies to the cyclic citrulline peptide 22 (100%), DAS28-5.6 [4.8;6.5]. CHF verified in accordance the recommendations for the diagnosis and treatment of CHF Society of Specialists in Heart Failure (2013). The concentration of NT-proBNP