which was defined as the most recent IORRA survey before planning pregnancy. The mixed-effect model for repeated measures was used to analyze group differences.

Results: There were 40 patients in the PP group (average 32.2 years, disease duration 5.7 years, DAS28-CRP 1.7, J-HAQ 0.26), and 120 patients in the control group (average 32.4 years, disease duration 5.9 years, DAS28-CRP 1.7, J-HAQ 0.21). The proportion of user and dosage of MTX and glucocorticoid (GC) and bDMARDs user at baseline were comparable between the groups (MTX: PP 87.5% [8.9 mg/week], control 85.0% [8.8 mg/week]; GC: PP 32.5% [3.8 mg/day], control 27.5% [4.4 mg/day]; bDMARDs: PP 40.0%, control 27.5%]. DAS28-CRP at year 3 of the PP group elevated and was higher than the control group (PP 2.3, control 1.7, p<0.01), while J-HAQ was stable over the observation period and did not differ significantly at year 3 (PP 0.21, control 0.22, p=0.92). At year 3, the proportion of patients taking MTX was lower and taking GC was higher in the PP group than those in the control group (MTX: PP 36.7%, control 76.7%, p<0.01; GC: PP 70.0%, control 25.6%, p<0.01). The proportion of patients taking bDMARDs was not different in both groups (PP 36.7%, control 32.6%, p=0.68).

Conclusion: Physical function in pregnancy planning patients with RA did not deteriorate as well as the control patients in clinical settings.

References:


References:

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THE RELATIONSHIP BETWEEN MICROVASCULAR DAMAGE AND DISEASE ACTIVITY IN PATIENT WITH RHEUMATOID ARTHRITIS – ASSESSMENT BY VIDEOCAPILAROSCOPY

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Background: Rheumatoid arthritis (RA) is an autoimmune disease characterized by erosive synovitis (causing severe joint damage) and systemic damage.