**Objectives:** The aim of this study was to evaluate the efficacy of comedication csDMARD and anti-TNFs compared with anti-TNFs on monotherapy.

**Methods:** A descriptive retrospective study including 85 patients with axSpA according to the criteria of the group ASAS on 2009 and having received anti-TNFs between January 2000 and October 2019.

The patients were divided on two groups, those who had received combined therapy with cs-DMARDs and those who had received anti-TNFs on monotherapy.

The response to treatment was assessed with the ASAS 40 response and partial remission at 3 and 6 months of treatment and was compared between the two groups.

**Results:** Our populations consists of 67 men and 18 women with a mean age of 44.4 ± 10.9 years. The mean period of evolution was 12.3 ± 9.1 years and 52.2% of patients were HLA-B27 positive. The axSpA was associated with peripheral arthritis, enthesitis and dactylitis in 17.6%, 17.6% and 1.2% respectively.

Fifty-nine patients (69.4%) were treated with anti-TNF alpha on monotherapy and 26 patients (30.6%) had combined therapy. The ASAS 40 response was achieved in 45.6% of patients at 3 months and 64.1% of them at 6 months of anti-TNFs treatment. Among them, 7.4% had obtained partial remission at 3 months and 20.3% at 6 months of treatment.

There was statically significant difference between the two groups on the ASAS 40 response or the partial remission at 3 and 6 months of treatments.

**Conclusion:** The comedication therapy with cs-DMARDs does not influence the efficacy of anti-TNFs in axSpA patients suggesting no benefit in the concomitant use of these drugs in clinical practice.

**References:**

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**AB0639**

THE EFFECT OF VITAMIN D ON QUALITY OF LIFE AND SEVERITY OF PAIN IN PATIENTS WITH ANKYLOSING SPONDYLITIS

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**Background:** The high incidence of ankylosing spondylitis (AS) in people of working age, as well as the negative impact of the disease on the quality of life of patients, determine the need for adjuncts to reduce the severity of pain and thereby achieve the physical, psychological and emotional well-being of patients.

**Objectives:** To study the effect of vitamin D (colecalciferol) on the quality of life and the severity of pain in patients with ankylosing spondylitis.

**Methods:** The study included 69 patients with AS, who studied the quality of life indicators according to the Medical Outcomes Study Short Form (SF-36); pain syndrome and stiffness in the spine were assessed by a visual analogue scale by patients, and by a physician - by counting the number of painful joints (NPJ), the disease activity index (BASDAI) and the Functional Index (BASFI). All patients were receiving a basic therapy in a stable dose for at least 10 months. They were divided into 2 groups, comparable in age, disease activity; Group 1 (n = 33) additionally received colecalciferol 1500 ME during 6 months of observation.

**Results:** At the end of the observation period when evaluating data on SF-36: in the 1st group, the physical health component has improved - the increase in physical functioning (PF) and bodily pain (BP) by 51.4% and 37.8% from the baseline; vital activity, psychological health, and social functioning due to emotional state have also increased by 37.6%, 33.4% and 42.5%, respectively. In the 2nd group above mentioned parameters have not changed. In the 1st group the indexes of BASDAI and BASFI have decreased by 16% and 22% (p = 0.0079, p = 0.0022, respectively), and their dynamics in the 2nd group were less significant (p = 0.013, p = 0.017, respectively). Also, in patients of the 1st group have decreased the severity of morning stiffness and the pain in the spine a highly reliable (p < 0.001), and in the 2nd group they were less significant (p = 0.043, p = 0.016, respectively). Positive dynamics of NPJ in the 1st group was more significant (p = 0.003) than it was in the 2nd group (p = 0.033).

**Conclusion:** In the group of patients treated with colecalciferol was noted improvement in indicators of quality of life (the parameters of the physical component of health, vitality and social functioning) and also more significant decrease of the intensity of pain and of morning stiffness duration, of NPJ, than in not received to colecalciferol patients. Inclusion of vitamin D in the comprehensive AS therapy promotes not only reduction the severity of the chronic pain manifestations, but also improves the quality of life of patients with this pathology.