Background: Patients with spondyloarthritis (SpA) suffer not only from pain or physical disability, but they are also affected in multiple facets of life due to this condition (disease impact).

Methods: This cross-sectional study included 111 consecutive patients with SpA (ASAS criteria). The correlation (Spearman’s rho) between ASAS-HI, BASDAI, ASDAS, and BASFI was analyzed. ROC curves were constructed to analyze ASAS-HI values that determined BASDAI remission, ASAS inactive disease, and ASDAS low activity. A logistic regression was made to determine the ASAS-HI items with greater capability to discriminate the state of remission / inactive disease.

Results: Seventy-four men and 37 women were included, mean age of 43.3 ± 10.6 years. The average duration of illness was 7.6 ± 6.8 years. Sixty percent of the series was under biological therapy. HLA-B27 was positive in 79.3%. The average value of ASAS-HI was 5.4 ± 3.8. There were significant correlations between ASAS-HI and BASDAI (rho: 0.79, p < 0.0005), BASDAI and BASFI (rho: 0.83, p < 0.0005), BASFI and ASAS-HI (rho: 0.78, p < 0.0005), ASDAS and ASAS-HI (rho: 0.70, p < 0.0005), ASDAS, and ASAS-HI (rho: 0.70, p < 0.0005). The optimal cut-off point of ASAS-HI for BASDAI remission (Table 1) corresponded to a value ≤ 2. As for the value of ASAS-HI to define ASDAS inactive disease (Table 2), this was ≤ 5.

Conclusion: ASAS-HI correlates well with most outcome measures in SpA. A cut-off value of ≤ 6 has greater capability to discriminate the state of remission / inactive disease.

References:

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