

(RA), to identify those who may benefit from preventive interventions. However, it is important to understand the views of those who may be candidates for such predictive tests, to inform the development of effective approaches. First degree relatives (FDRs) of patients with RA are at an increased risk of developing RA. RA patients can provide access to FDRs. Qualitative investigations have explored the views of these groups about predictive testing for RA^{1,2}, but quantitative approaches are needed to develop a robust understanding.

Objectives: To identify predictors of interest in predictive testing for FDRs and patients, and to assess the likelihood of patients communicating information about RA risk to their FDRs.

Methods: Surveys were completed by 482 RA patients and 397 of their FDRs. Patients were invited to complete the survey and to provide another to their relatives. Spearman's Rank Correlations were used to assess relationships between interest in predictive testing/ likelihood of risk communication and potential predictor variables.

Results: FDRs had a median age of 41 years, 64% were female. 57% were definitely interested and 36% were probably interested in taking a predictive test for RA. Several predictors were found to be associated with interest (table 1).

Table 1. Spearman's correlations for relatives' and patients' interest in predictive testing. After applying a Bonferonni adjustment, p values were taken as statistically significant at $p \leq 0.003$.

Predictors of interest in predictive testing	FDRs		Patients	
	rs	P	rs	P
Brief Illness Perception Questionnaire	0.11	0.03	0.09	0.05
Consequences	0.16*	0.002*	0.10	0.03
Timeline	0.09	0.07	-0.05	0.28
Personal control	-0.03	0.59	-0.02	0.68
Treatment control	-0.02	0.76	0.02	0.74
Identity	0.09	0.09	0.12	0.01
Concern	0.21*	<0.001*	0.16*	<0.001*
Coherence	0.11	0.03	0.007	0.88
Emotional	0.12	0.02	0.11	0.02
Information Seeking	0.35*	<0.001*	0.22*	<0.001*
Decision making	-0.05	0.33	0.07	0.13
Health literacy	0.03	0.52	0.02	0.62
Health numeracy	-0.06	0.23	-0.02	0.72
Brief Avoidance Coping Questionnaire	0.12	0.02	-0.01	0.76
Optimism	0.06	0.26	-0.07	0.12
Health anxiety	0.16*	0.001*	-	-
Perceived risk	0.37*	<0.001*	-	-
Rheumatoid Arthritis Impact of Disease	-	-	0.05	0.31

- not applicable

Patients had a median age of 65 years, 71% were female. 47% were definitely interested and 30% were probably interested in their children taking a predictive test. Several predictors were found to be associated with interest (table 1). On a Likert scale from extremely unlikely (0) to extremely likely (4), most patients indicated that they were likely to communicate RA risk information to their children (median score=3).

Conclusion: Interest in predictive testing for RA was high amongst FDRs, and factors including information seeking preference, RA risk perception, concern about RA, perceived consequences of RA and health anxiety were significantly associated with interest. Patients were also willing to communicate information about RA risk to their children. These findings increase understanding of perceptual variation in those at risk of RA, and will inform the development of information to support decision making in individuals considering predictive tests and preventive interventions. We are currently extending this preliminary analysis by building multivariate models incorporating a range of attitudes about predictive testing, assessing predictors of patients' likelihood of communicating to their FDRs about risk, and the relationship between patients' and FDRs' responses.

References:

[1] Stack RJ et al. *BMJ open*. 2016; 6(6):e010555.

[2] Falahee M et al. *Arthritis care & research*. 2017; 69(10):1558-65.

Acknowledgments: This work was supported by Versus Arthritis; Grant reference: 21560.

Disclosure of Interests: Imogen Wells: None declared, Gwenda Simons: None declared, Rebecca Stack: None declared, Christian Mallen Grant/research support from: My department has received financial grants from BMS for a cardiology trial., Peter Nightingale: None declared, Karim Raza Grant/research support from: KR has received research funding from AbbVie and Pfizer, Consultant of: KR has received honoraria and/or consultancy fees from AbbVie, Sanofi, Lilly, Bristol-Myers Squibb, UCB, Pfizer, Janssen and Roche Chugai, Speakers bureau: KR has received honoraria and/or consultancy fees from AbbVie, Sanofi, Lilly, Bristol-Myers Squibb, UCB, Pfizer, Janssen and Roche Chugai, M. Falahee: None declared

DOI: 10.1136/annrheumdis-2020-eular.2175

OP0265-HPR FACTORS ASSOCIATED WITH MEETING WORK DEMANDS FOR INDIVIDUALS WITH RHEUMATIC DISEASES

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Background: Almost 65% of individuals with rheumatic diseases have severe fatigue with the majority of these reporting difficulties in work leading to absenteeism and early retirement. However, there is a lack of research investigating how different types of fatigue impact on work ability.

Objectives: To identify the prevalence of different types of fatigue and explore the association between different types of fatigue and various demands involved in work
Methods: A cross-sectional study was carried out with 234 individuals with rheumatic diseases currently in employment. Study measures examined demographics, different types of fatigue (general, physical reduced activity, reduced motivation and mental), ability to meet work demands, disease activity and quality of life.

Results: The majority of participants were female (70%), had rheumatoid arthritis (42.7%), were between 41-50 years (30.3%) and worked full-time (70%). One hundred and twenty-eight participants (55%) had severe fatigue. Physical fatigue was the most prevalent category of fatigue (Table 1). Participants reported managing 50% of their work demands with physical demands being the most challenging (Table 1). All types of fatigue were significantly associated with the total WRF score (Table 2). Mental fatigue had the strongest association with the total WRF score ($r=0.53$, $p<0.001$). On examining the impact of different types of fatigue on meeting work demands, mental fatigue was the most significant predictor of difficulty meeting work demands ($\beta=1.6$, $SE=0.37$, $p<0.001$)

Table 1. MFI and WRF total and category scores

WRF n=212	Total mean (SD)	Work Scheduling Demands mean (SD)	Output demands mean (SD)	Physical Demands mean (SD)	Mental Demands mean (SD)	Social Demands mean (SD)
	50.3% (19.0)	44.6% (25.8)	52.9% (22.1)	43.3% (27.9)	53.4% (22.5)	62.4% (17.7)
MFI n=220	Total mean (SD)	Physical fatigue mean (SD)	Reduced activity mean (SD)	Reduced motivation mean (SD)	Mental fatigue mean (SD)	
	13.4 (2.8)	12.5 (4.3)	10.1 (4.2)	10.2 (3.5)	10.3 (4.2)	

Table 2. Correlations for WRF and MFI fatigue categories

MFI Category	Correlations with total WRF	p-values
General fatigue	.53	<0.001
Mental fatigue	.57	<0.001
Physical fatigue	.48	<0.001
Reduced motivation	.48	<0.001
Reduced activity levels	.41	<0.001

Conclusion: Fatigue interferes with many aspects of work performance. However, this study identifies that mental fatigue is the greatest predictor of difficulty in managing work. Self-management interventions focusing on mental fatigue and work ability are required for individuals with rheumatic diseases to manage the demands of their work.

Disclosure of Interests: None declared

DOI: 10.1136/annrheumdis-2020-eular.5550

OP0266-HPR WORK PRODUCTIVITY IN PATIENTS WITH AXIAL AND PERIPHERAL SPONDYLOARTHRITIS

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