BONE AND MINERAL METABOLISM IN Spondyloarthritis

D. Castro-Corredo1, M. A. Ramirez Huarango2, A. I. Rebollo Giménez2, M. D. Mingué Sánchez2, J. Amíno-Fernández2, I. M. De Lara Simón2, J. L. Cuadra Díaz2, 3, Hospital General Universitario Ciudad Real, Ciudad Real, Spain; 2Hospital General Universitario Ciudad Real, 13005, Spain

Background: Spondyloarthritis is the term for a group of inflammatory chronic diseases primarily affecting the axial skeleton, as well as the peripheral joints. Regarding bone metabolism in these patients, several studies have reported higher levels of inflammatory activity (BASDAI, BASMI, ESR and CRP) in patients with osteoporosis compared to those without this disease, although no correlations were found.

Objectives: To describe clinical, serological and biological characteristics, as well as bone and mineral metabolism, according to analitical and densitometric criteria in a patient cohort with spondyloarthritis.

Methods: Observational, descriptive and cross-sectional study. A retrospective review was conducted of a database of patients with spondyloarthritis treated during 2018 at our Center for Rheumatology Lower Saxony e.V., Hannover, Germany. We collected data regarding the history of comorbidities such as hypertension, dyslipidemia, osteoporosis, type 2 diabetes mellitus, hypothyroidism, malignancies, among others. Regarding bone metabolism, variables with a normal distribution were described using mean and standard deviation (SD), and non-normal distributed variables were described using median and interquartile range. Categorical variables were presented as rates. We evaluated the relationship between disease activity and comorbidities.

Results: We included 251 patients; mean age was 59.9 years old, with a high proportion of women (83%); median disease duration was 15 years (IQR: 8-20); in this study, 145 (65%) of patients were in remission; 35 (11%) had low, 44 (20%) moderate and 10 (4%) high disease activity. Regarding pharmacological therapy, 55% were receiving conventional DMARDs. The prevalence of comorbidities was 85%, the most common were high blood pressure 25% followed by hypothyroidism 12% and diabetes 10%, 0.7% of patients had malignancies such as thyroid cancer or breast cancer, 12.8% of patients had renal comorbidities. Among comorbidities related to RA 30% had osteoporosis and 20% arthrosis. We did not find a statistical association between DAS28 and comorbidities.

Conclusion: As other studies have shown, there is a high prevalence of comorbidities among RA patients, mainly high blood pressure. Due to the above, it is relevant to evaluate the risks factors of patients with RA, especially cardiovascular risks. We consider that this multidisciplinary program represents an opportunity not only to educate patients about healthy life styles and the management of RA, but also other diseases in order to increase the empowering of the health status in these poly pathological patients(2).

References:

Acknowledgments: This project has been funded by a collaboration between the Ministry of Science, Technology and Innovation COLECIENCIAS (contract 746-2018), the Fundación Universitaria de Ciencias de la Salud and Biomab Center for Rheumatoid Arthritis

Disclosure of Interests: Michael Cabrera: None declared, Fernando Rodriguez: None declared, Diana Buitrago-Garcia: None declared, GUILLERMO SANCHEZ: None declared, Pedro Santos-Moreno Grant/research support from: I have received research grants from Abbvie, Biopas-UCB, Janssen, Novartis, Pfizer, Speakers bureau: I have been a speaker for Abbvie, Biopas-UCB, Janssen, Novartis, Pfizer, Roche, Sanofi.

DOI: 10.1136/annrheumdis-2020-eular.5024