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Table 1. Characteristics of the examined patients

Patient characteristics	Mean	Std deviation	95% Confidence Interval
Age (yrs)	59,27	10,22	56,90-61,51
Disease duration (yrs)	8,75	7,72	7,01-10,49
Number of attacks/last year	3,89	3,74	3,08-4,71
Weight (kg)	91,44	(17,14)	86,52-96,37
Height (cm)	176,73	(7,95)	174,45-179,02
Body Mass Index (kg/m ²)	29,14	(4,1)	27,96-30,32
Waist circumference (cm)	102,69	9,56	100,35-105,05
Systolic blood pressure	135,44	14,48	130,43-140,50
Diastolic blood pressure	86,74	9,86	82,31-89,22
Serum urate level (μmol/ L)	485,6	102,09	449,94-521,20
Male	71	95,9	
No	29	39,2	
%	31	42,1	
Monoarthritis	14	18,9	
Oligoarthritis	17	23	
Polyarthritis			
Presence of tophi			

Disclosure of Interests: None declared

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HPR Professional education, training and competencies

THU0640-HPR

GENDER DISPARITY IN AUTHORSHIP OF CLINICAL PRACTICE GUIDELINES IN RHEUMATOLOGY

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Background: Women are generally less represented as first author among original medical researches and clinical guidelines. Indeed, women are first authors in only 30% of clinical guidelines published in high impact medical journals. It is not known if a comparable underrepresentation occurs also in rheumatologic guidelines.

Objectives: The aim of the present analysis is to evaluate the representation of female authors in rheumatological guidelines over a period of time between 2004 and 2019.

Methods: We searched PubMed for guidelines published in English in the rheumatological field from 1st January 2004 to 1st January 2019. Gender of each author (man or woman) was identified by use of a minimum of two resources (i.e., author's name and an internet search to identify the author's photograph or gender pronoun).

Results: We found 366 guidelines published between 2004 and 2019 (Table 1: stratified by year of publication and Table 2: stratified by disease). Overall, the proportion of female first authors was 32.0% (95% CI, 28.0% - 35%). After stratification by year of publication the percentage of female first authors was lower in past years compared to recent years. The percentage of female first author increased substantially over the time (Figure 1).

Table 1. Percentage of female and male first author of rheumatological guidelines stratified by years

Years	% FEMALE	%MALE
2004 (n=14)	21.4	78.6
2005 (n=21)	23.8	76.2
2006 (n=25)	32.0	68.0
2007 (n=32)	37.5	62.5
2008 (n=43)	20.9	79.1
2009 (n=18)	33.3	66.7
2010 (n=15)	6.7	93.3
2011 (n=27)	25.9	74.1
2012 (n=27)	25.9	74.1
2013 (n=20)	48.3	51.7
2014 (n=20)	25.0	75.0
2015 (n=13)	46.2	53.8
2016 (n=20)	45.0	55.0
2017 (n=29)	51.7	48.3
2018 (n=22)	40.9	59.1

Table 2. Percentage of female and male first author of rheumatological guidelines stratified by disease

Disease	% FEMALE	% MALE
Osteoarthritis (n=34)	26.5	73.5
Rheumatoid arthritis (n=96)	18.8	81.2
Fibromyalgia (n=30)	20	80
Lupus erythematosus (n=29)	34.5	65.5
Psoriatic arthritis and Spondyloarthritis (n=73)	23.3	76.7
Sjogren syndrome (n=5)	40	60
Gout (n=19)	10.5	89.5
Systemic sclerosis (n=18)	16.7	83.3
Polymyalgia and Giant cells' arteritis (n=12)	0	100
Osteoporosis (n=26)	30.8	69.2
ANCA associated vasculitides (n=14)	21.4	78.6
Polymyositis and Dermatomyositis (n=6)	50	50
Behcet's disease (n=4)	25	75

Figure 1. Temporal trend of the percentage of first author gender from 2004 to 2019 (male in blue, female in pink)

Conclusion: We found a prevalence of male as first authors of guidelines in the rheumatological field published between January 2004 and January 2019. The EULAR Task Force on Gender Equity in Academic Rheumatology (EULAR GEAR) has been recently established, making an important first step toward gender equity in the authorship of guidelines in the rheumatological fields. Indeed, in the last 15 years we have witnessed an increase in female representativeness. Notwithstanding, efforts should be made to improve the representation of female authors nationally and internationally.

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ILLITERACY IS NOT AN OBSTACLE FOR ASSIMILATION OF A PATIENT EDUCATION SESSION ON METHOTREXATE SELF-INJECTION IN RA PATIENTS A PROSPECTIVE PILOT STUDY

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Background: Patient education for RA patients has been shown to improve adherence and self-management of this chronic disease.

Objectives: To assess the impact of illiteracy on assimilation of a patient education session on methotrexate self-injection in RA patients.

Methods: Prospective pilot study that included 27 consecutive patients (81.5% female, mean age 44.4 years, illiteracy rate 40.7%) with RA (median duration of progression of 4 years, mean delay in referral for specialist of 6 months, median duration of methotrexate use of 1 year). The patients benefited from an individual patient education session to learn how to self-inject with methotrexate