out strategies for pain management could improve this PCS values and therefore reduce the need for TKR. Furthermore, this study also highlights the two mainly types of OA etiology: mechanical and inflammatory. It suggests that inflammation is mostly responsible for OA progression in patients with low BMI, and plays a strong role in women pathology. Finally, specific treatments target-
ging central pain sensation could also improve the management of the pathology in women.

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FRIO427

EULAR RECOMMENDATIONS FOR INTRA-ARTICULAR TREATMENTS FOR ARTHROPATHIES


TREATMENTS FOR ARTHROPATHIES

FRIO428

RESULTS FROM A CROSS-SECTIONAL, OBSERVATIONAL STUDY TO ASSESS INADEQUATE PAIN RELIEF IN PATIENTS WITH KNEE AND/OR HIP OSTEOARTHRITIS IN CHINA


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Background: Osteoarthritis (OA) of the knee and hip is a leading cause of disability worldwide, particularly due to the primary symptoms of pain in the weight-bearing joints. There is limited data that characterizes patients who experience moderate to severe pain despite analgesic treatment in China.

Objectives: This study estimates the real-world prevalence of inadequate pain relief (IPR) among patients with knee and/or hip OA who have been prescribed analgesic therapy and characterizes this patient population. The study was conducted in China, the Philippines, Thailand, Russia, and Mexico. This abstract presents results from China.

Methods: This is a multi-national, multi-site, cross-sectional, observational study. Physicians managing patients with OA were recruited and asked to enroll patients over 50 years of age with knee and/or hip OA who had been prescribed topical and/or oral pain medication for at least 30 days prior to study visit. Patients with IPR were defined as those who experienced moderate to severe pain despite analgesic treatment. The study was conducted in China, the Philippines, Thailand, Russia, and Mexico. This abstract presents results from China.

Results: This is a multi-national, multi-site, cross-sectional, observational study. Physicians managing patients with OA were recruited and asked to enroll patients over 50 years of age with knee and/or hip OA who had been prescribed topical and/or oral pain medication for at least 30 days prior to study visit. Patients with IPR were defined as those who experienced moderate to severe pain despite analgesic treatment. The study was conducted in China, the Philippines, Thailand, Russia, and Mexico. This abstract presents results from China.

Conclusions: They found that 57% of patients with knee and/or hip OA had IPR, and 73% of these patients had severe pain despite analgesic treatment. The study was conducted in China, the Philippines, Thailand, Russia, and Mexico. This abstract presents results from China.

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