Time from onset symptoms to diagnosis ranged in years, from 3.15 (Guatemala) to 8.2 (Honduras), among the four countries. BASMI scores were higher in Honduras (mean 5.15) and lowest in Panama (mean 1.61). Of note, the time from symptom onset to diagnosis was also longest in Honduras.

NSAIDs and DMARDs were used in most countries. Glucocorticoids were rarely used in this population. Biologics are mainly used in Panama (16%), and Honduras (11%); only 8% of the enrolled patients in Dominican Republic and 2% in Guatemala.

Conclusion: The most prevalent SpA diagnosis in the region is Ankylosing Spondylitis. Patient diagnosis is delayed up to 8.2 years and only 2 to 16% of the patients receive a proper treatment with a biologic therapy.

This data invites to further investigation and brings opportunity to improve patients care.

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AB0507

ASSESSMENT OF FIBRINOGEN TO ALBUMIN RATIO IN RADIOGRAPHIC AXIAL SPONDYLOARTHRITIS: CORRELATION WITH DISEASE ACTIVITY

M. Slouma^{1,2}, S. Bouzid^{1,3}, K. Lahmar^{1,3}, R. Dhahri^{1,3}, I. Gharsallah^{1,3}, L. Metoui^{1,3}, B. Louzir³. ¹The Military Hospital of Tunis, Rheumatology, Tunis, Tunisia; ²The Military Hospital of Tunis, Internal Medicine, Tunis, Tunisia; ³The Military Hospital of Tunis, Internal Medicine, Tunis, Tunisia

Background: Radiographic axial spondyloarthritis is a chronic inflammatory disease that involves the spine and the sacroiliac joints. No specific biomarker that reflects disease activity is yet available.

Objectives: This study aimed to assess the relationship between fibrinogen (Fib) to albumin (ALB) ratio (FAR) and disease activity in radiographic axial spondyloarthritis.

Methods: We performed a cross-sectional study including 51 patients with radiographic axial spondyloarthritis. Disease activity was assessed using Ankylosing Spondylitis Disease Activity Score (ASDAS). C-reactive protein (CRP), fibrinogen (Normal value: 2 -4g/L), erythrocyte sedimentation rate (ESR) and albumin levels (Normal value: 35 -50g/L) were measured. The fibrinogen to albumin ratio (FAR) was calculated. We excluded patients with infectious disease, hematological disease, and those with malabsorption syndrome

Statistical analysis was performed using SPSS 26.

Results: The study included 43 males and 8 females with a mean age of 41.25 ± 10.97 years. The mean disease duration was 117.92 (85.4 months). The mean fibrinogen and albumin levels were 3.94 ± 1.24 g/L and 36.94 ± 5.89 g/L, respectively. Fibrinogen level was elevated in 45% patients and albumin levels was decreased in 51% cases. Mean FAR was 0.11 ± 0.44.

ESR levels were elevated in 67% with a mean of 40.22 ± 34.64 mm. CRP levels were high in 61% with a mean of 28.57 ± 33.25 mg/L. Mean ASDAS was 3.32 ± 1.27 patients had very high disease activity (ASDAS>3.5).

Significant correlation was found between FAR and following parameters: ESR (r = 0.836, p< 0.001), CRP (r = 0.785, p< 0.001), and ASDAS (r = 0.463, P< 0.001).

The ability of FAR to distinguish patients with very high disease activity from those without very high disease activity was excellent, with Airc under the curve of 0.819. The optimal FAR cutoff value with the highest accuracy was 0,1065 with a sensitivity of 0,792 and specificity of 0,852.

Conclusion: Our study showed that fibrinogen to albumin ratio correlate with ESR, CRP and ASDAS. This finding suggests that this ratio may be a used to assess disease activity in radiographic axial spondyloarthritis (1).

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AB0508

PHYSICAL ACTIVITY IN TUNISIAN ADULTS WITH ANKYLOSING SPONDYLITIS

A. Feki¹, I. Sellami², R. Akrou¹, S. Ben Jemaa¹, Z. Gassara¹, M. Ezzeddine¹, M. H. Kallel¹, H. Fourati¹, S. Baklouti¹. ¹Hedi Chaker Hospital, Rheumatology, Sfax, Tunisia; ²Hedi Chaker Hospital, Occupational medicine, Sfax, Tunisia

Background: Physical activity (PA) is associated with multiple health-related benefits among the general population and adults with chronic diseases like Ankylosing spondylitis (AS) [1]. As known, AS affects primarily entheses and can lead to loss of function and decreased mobility.

Objectives: The aim of this study was to explore the PA levels of adults with AS and to examine associations between PA, sociodemographic characteristics, immunological features, disease activity and treatment type.

Methods: Cross-sectional clinical and laboratory data were collected on 68 AS patients. BASDAI (Bath ankylosing spondylarthritis disease activity index) and BASFI (Bath ankylosing spondylarthritis functional index) were calculated. Physical activity was measured using IPAQ-SF (International Physical Activity Questionnaire-Short Form). Its items record the time spent on physical activity of three intensity levels (vigorous, moderate and walking) as well as the time spent on sitting (referred to as sedentary in this study) in the past week. Both continuous (expressed as metabolic equivalent of task (MET)-min /week) and categorical (3 levels proposed: low, moderate and high level of PA) scores of IPAQ-SF were determined. Sedentary time (median) was reported in minutes/week. A p value < 0.05 was considered significant.

Results: Cross-sectional clinical and laboratory data were collected on 68 AS patients. BASDAI (Bath ankylosing spondylarthritis disease activity index) and BASFI (Bath ankylosing spondylarthritis functional index) were calculated. Physical activity was measured using IPAQ-SF (International Physical Activity Questionnaire-Short Form). Its items record the time spent on physical activity of three intensity levels (vigorous, moderate and walking) as well as the time spent on sitting (referred to as sedentary in this study) in the past week. Both continuous (expressed as metabolic equivalent of task (MET)-min /week) and categorical (3 levels proposed: low, moderate and high level of PA) scores of IPAQ-SF were determined. Sedentary time (median) was reported in minutes/week. A p value < 0.05 was considered significant.

Conclusion: Our study proved that physical activity in people with AS decreased with age and activity disease with a concomitant increase in sedentary activity. Given the risks of developing secondary chronic disease as a result of low levels of physical activity, physical exercise should be recommended as part of comprehensive AS care.

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AB0509

FREQUENCY AND RISK FACTORS OF HIP INVOLVEMENT DURING SPONDYLOARTHRITIS IN MILITARY PATIENTS

L. Kharrat¹, M. Slouma¹, S. Rahmouni¹, R. Dhahri¹, I. Gharsallah¹, L. Metoui¹, B. Louzir¹. ¹The Military Hospital of Tunis, Rheumatology, Tunis, Tunisia

Background: Hip involvement can reveal a spondyloarthritis (SA) or appear later. It hampers patient's life quality and can be responsible of significant handicap (1). Military patients are a special population. They are more exposed to physical stress which makes their SA characteristics quite different to other patients.

Objectives: We aimed to determine the frequency of hip involvement in SA and to study its characteristics and associated factors in military patients.