ASSOCIATION BETWEEN FIBROMYALGIA AND CHRONIC AUTOIMMUNE THYROIDITIS: RETROSPECTIVE OBSERVATIONAL DATA FROM A MONOCENTRIC ENDOCRINOLOGIST-RHEUMATOLOGIST COLLABORATIVE ANALYSIS

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Background: Endocrine and metabolic imbalance conditions can affect the development of subjective abnormal perceptions within fibromyalgia (FM). Under the same diagnosis, the here reported data will be focused on the prevalence of chronic autoimmune thyroid diseases (ATD) in patients suffering from FM.

Methods: A monocentric study was conducted on patients attending the Rheumatology outpatients in the “Cattinana Hospital” from January 2018 to December 2019. A total of 312 patients were included: 114 subjects suffering from FM (FMR) and 198 patients suffering from HT. Among the HT patients, 98% were women, aged between 28 and 64.

Results: Over a 2 years period of time (2018-2019) a monocentric joint evaluation was activated with the endocrinology section of our healthcare area in order to consecutively monitor the subjects belonging to both specialist clinics. Patients with ATD were not infrequently firstly evaluated in the rheumatology ambulatory. Diagnosis of FM was defined according to the American College of Rheumatology 2010/2011 criteria. At the same time, at the rheumatology clinics, all cases addressed with diagnosis of fatigue or chronic pain of no defined origin were analysed in order to carefully identify any associated, comorbidity problems.

Conclusion: To evaluate the prevalence of subclinical autoimmune thyroid disease, or functionally controlled autoimmune thyroid disease, in a retrospective cohort of consecutively diagnosed patients suffering from fibromyalgia condition.

Disclosure of Interests: None declared

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PAEDIATRIC RHEUMATOLOGY

HIP INVOLVEMENT IN A COHORT OF EGYPTIAN JUVENILE IDIOPATHIC ARTHRITIS PATIENTS

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Background: The hip joint is frequently involved in Juvenile Idiopathic Arthritis (JIA). It is more common with polyarticular, systemic and enthesitis-related forms and with severe uncontrolled disease. Chronic hip arthritis leads to irreversible joint damage with marked impairment of quality of life and functional limitation [1]. Unilateral or bilateral hip arthritis occurs in 30-50% of children with JIA [2].

Objectives: To study the pattern of hip involvement in a cohort of Egyptian JIA patients in terms of epidemiological aspects, JIA pattern, bilateralism, associated extra-articular manifestations, radiological features, treatment and prognosis.

Methods: We included 179 patients who fulfilled the International league against rheumatism criteria for JIA. Epidemiological, clinical, radiological, and therapeutic parameters were assembled and analyzed. Hip involvement was assessed using a semi-quantitative score of pain and tenderness for the hip, CARSH radiographic score of the hip, and Harris functional hip score. JADAS-27 was used for assessment of disease activity.

Results: We included 113 girls and 66 boys; with a female: male ratio of nearly 2:1. The age at onset mean was 8.8±3 years (8.9±2.9 for females and 8.6±3.1 for males). The mean age at the study time was 13.3±4.1 years. The disease mean duration was 4.5±2.9 years.

Clinically; 20.1% of the cases had hip involvement (12.8% unilateral and 7.3% bilateral), while by imaging, around 30.7% of the cases have hip involvement (19.6% unilateral and 11.2% bilateral). The mean age for cases with hip involvement was 14.1±4.3, compared to 12.9±4 among those with no hip involvement. The mean disease duration for those with hip arthritis (either clinical or by imaging) was 5.5±2.9 years, compared to 4.1±2.9 among those with no hip involvement (Figure 1).

Figure 1. Differences between JIA cases with and without hip involvement.

The Mean JADAS-27 was 13.5±6.2 and for those with hip involvement was 16.3±6.3. The commonest pattern of JIA with hip arthritis was polyarticular followed by enthesitis-related arthritis. There was a strong significant correlation between JADAS-27 and hip involvement at one hand and Harris score, semi-quantitative score for pain and tenderness at the other hand. Further, disease duration was significantly correlated with hip involvement as well. Among cases with hip involvement, 25% demonstrated destructive changes and 30% showed growth abnormalities.

Conclusion: Hip arthritis in JIA related to polyarticular and enthesitis-related pattern. Longer disease duration, seropositive polyarticular pattern were related to poor prognosis for hip arthritis.

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