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SELF-PROTECTION STRATEGIES, HEALTH BEHAVIOR AND DISEASE ACTIVITY DURING THE FIRST WAVE, RE-OPENING AND SECOND WAVE OF THE COVID-19 PANDEMIC IN >7000 DANISH PATIENTS WITH INFLAMMATORY ARTHRITIS

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Background: The COVID-19 pandemic has caused lockdown, reduced access to face-to-face consultations, anxiety about taking immunosuppressive agents and self-isolation¹ which potentially impact rheumatic disease control negatively. However, changes in behavior including self-protection strategies during the ongoing pandemic and impact on rheumatic disease activity have only been scarcely described.

The first COVID-19 wave hit Denmark in March 2020 followed by a gradual re-opening from mid-April and the second surge began in the late autumn of 2020.

Objectives: To describe changes over time in self-protection strategies and health behavior during the first 8 months of the COVID-19 pandemic and to explore impact on self-reported disease activity and quality of life (=patient reported outcomes, PROs) in patients with inflammatory rheumatic disease (IRD) in DANBIO.

Methods: Patients were invited to answer two on-line questionnaires regarding current behavior and disease specific PROs: One in June 2020 (including also questions regarding behavior in March 2020), and one in November 2020. Responses were linked to PROs collected as part of routine care before March 2020 (=Before) in DANBIO. For each PRO, changes (=delta values) between the two timepoints were calculated in individual patients.

Results: Overall, 7,836 patients (22% of eligible patients) answered both questionnaires and were included (rheumatoid arthritis(RA): 5270(67%), psoriatic arthritis(PsA): 1217(15%), axial spondyloarthritis(AxSpA): 932(12%), other IRD: 417(5%). Patients reported highest levels of anxiety and self-protection in March with an improvement in June that was largely unchanged in November (Figure 1), e.g. proportions staying at home avoiding others as much as possible (completely or mostly agree) were 87%/49%/51% in March/June/November, respectively (Figure 1, Panel C).

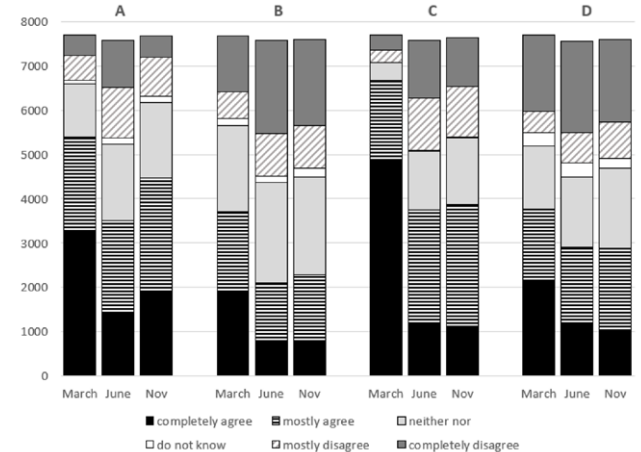
Disease activity and proportions of patients reporting acceptable symptom state remained stable at the three time points (Table 1), with all median delta values being close to zero (not shown).

Conclusion: In this large cohort of patients with inflammatory rheumatic diseases followed in the nationwide DANBIO registry, COVID-19 related self-protection strategies were highest in March 2020, but more than half of the patients also reported self-isolation in June and November. We found no negative impact of the pandemic on patient-reported outcomes, which remained largely unchanged and were similar to before the pandemic. The latter finding probably reflects that few patients reduced or withdrew from treatment due to fear of COVID-19.¹

REFERENCES:

[1] Glintborg et al, 2021, <https://rmdopen.bmj.com/content/rmdopen/7/1/e001505.full.pdf>

Figure. Self-protection strategies and health behavior in March, June and November 2020



A: I consider myself at high risk of COVID-19 infection. B: I worry more about COVID-19 than about my rheumatic disease. C: I stay at home and avoid others as much as possible. D: My arthritis causes me to self-isolate more than others my age

Table 1. Patient reported outcomes before March, in June and in November 2020 in patients with IRD. N=7,836

	Before*	June 2020	Nov 2020
Patient VAS global, mm	30 (12-58)	28 (10-54)	29 (10-55)
Patient VAS pain, mm	27 (11-51)	28 (11-51)	29 (11-52)
HAQ	0.50 (0.13-1.0)	0.50 (0.13-1.00)	0.50 (0.13-1.00)
EQ-5D	0.80 (0.72-0.86)	0.79 (0.71-0.86)	0.80 (0.71-0.86)
PASS, yes	73%	75%	76%

Numbers are median (IQR) unless otherwise stated*Latest registration in DANBIO before March 2020 Patient characteristics for RA/AxSpA/PsA/Other: female, %: 70/53/44/69. Age, years, median (IQR): 67(59-74)/62(54-69)/56(46-65)/59(50-68) Abbreviations: EQ-5D: Quality of life, 5 dimensions, HAQ: health assessment questionnaire, PASS: patient acceptable symptom state, VAS: visual analogue scale

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