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POS0041-HPR

OUTCOME MEASURES IN RHEUMATOLOGY APPLIED IN SELF-MANAGEMENT INTERVENTIONS TARGETING PEOPLE WITH INFLAMMATORY ARTHRITIS - A SYSTEMATIC REVIEW OF OUTCOME DOMAINS AND MEASUREMENT INSTRUMENTS

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Background: Self-management refers to the patient's ability to manage a large range of consequences such as symptoms, medication, emotions, and preferable life-style changes coherent with living with a chronic disease. Evaluating the effect of interventions targeting to improve people with inflammatory arthritis (IA) self-management is a challenge because self-management interventions are complex and consensus on important outcomes is lacking. Solutions to these issues could be to consensus on a Core Outcome Set (COS) describing what outcomes are relevant and should be applied in future studies hereby lessening the heterogeneity between future studies. The purpose of this study was therefore to take the first actions in identifying possible candidate outcomes for such a COS.

Objectives: The aim was to identify, and map applied outcome domains and outcome measurement instruments from previous trials measuring the effect of self-management interventions targeting people with IA.

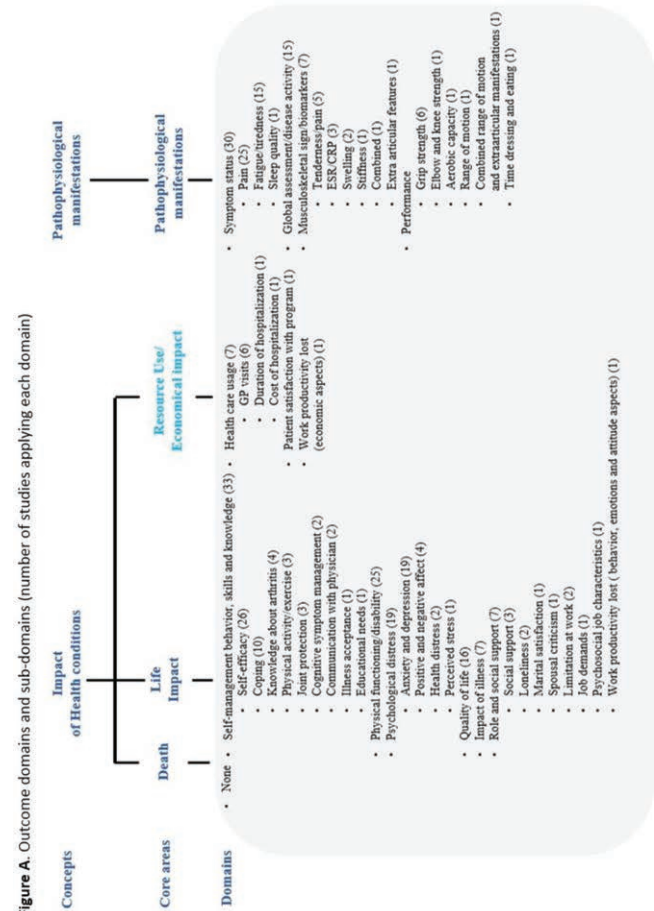
Methods: We performed an informative systematic literature review following guidance from the Handbooks described by 'Outcome Measures in Rheumatology' (OMERACT) and 'Core Outcome Measures in Effectiveness Trials' (COMET) initiatives. Randomized and non-randomized trials describing their experimental intervention as "self-management" and included a population of adults (≥18 years) with at least 50% diagnoses with IA (Rheumatoid arthritis, Psoriatic arthritis, Spondylarthritis) was included. Both screening of possible trials and data extraction was performed independently by two reviewers. Extracted data included: study characteristics, outcome domains and the corresponding measurement instruments. During analysis two reviewers simultaneously grouped and categorized domains and subdomains, and two senior researchers approved the categorization.

Results: Searches was performed 2021.02.08 on online databases, trial registers, conference abstracts and references of included trials. From a total of 2,502 records, we included 38 trials published between 1988 and 2021. The interventions were heterogenic and patients primarily female, diagnosed with Rheumatoid Arthritis, and a calculated mean age of 54 years. We identified 12 different outcome domains, covering 39 subdomains, collected with 119 different measurement instruments. The most frequently applied outcome domains were self-efficacy, pain, physical functioning/disability, anxiety and depression, quality of life, fatigue, global assessment/disease activity and coping. Please see Figure 1 for all outcome domains identified. The applied measurement instruments varied within each outcome domain with up to 10 different instruments applied to measure the same domain. Instruments were predominantly patient-reported outcomes.

Conclusion: The outcome domains and measurement instruments used in self-management trials were widely diverse and differ from the current general OMERACT Core Outcome Sets (COS) for IA conditions. Further steps towards the establishment of a COS to be reported in all self-management intervention trials will enhance the relevance and the subsequent impact on the body of evidence from these trials.

REFERENCES: The protocol was registered in PROSPERO (ID CRD42021238749).

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POS0042-HPR

HOW DOES WEEKLY SUPERVISED GROUP EXERCISE CONTRIBUTE TO FULFILLING EXERCISE RECOMMENDATIONS IN PATIENTS WITH AXIAL SPONDYLOARTHRITIS?

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Background: Supervised group exercise (SGE) has been recommended for people with axial spondyloarthritis (axSpA) since decades, but the proportion and type of axSpA patients that engage in SGE is unknown. In addition, the 2018 EULAR recommendations for physical activity advocate that people with axSpA should engage in aerobic, strength and mobility exercises according to public health physical activity guidelines. However, it is unclear if SGE contributes to fulfilment of these exercise recommendations.

Objectives: To compare characteristics, health status and fulfilment of exercise recommendations between axSpA patients with and without SGE.

Methods: Cross-sectional data from three Dutch axSpA study cohorts were analysed: two cohorts with patients recruited at rheumatology outpatient clinics (n=196 and n=153) in which participation in SGE was recorded (yes/no) and one cohort with only SGE participants (n=128). Assessments included sociodemographic and disease characteristics, health status (ASAS Health Index), spinal mobility and the 'short questionnaire to assess health enhancing physical activity'