differentiate any rehabilitation strategies for the best among those used in the included studies.

REFERENCES:

Acknowledgements: NIL.
Disclosure of Interests: None Declared.
DOI: 10.1136/annrheumdis-2023-eular.295

AB1368  PROBLEMATIC USE OF OPIOIDS IN MUSCULOSKELETAL CHRONIC NON-CANCER PAIN: A PROSPECTIVE REAL LIFE STUDY

Keywords: Descriptive studies, Epidemiology, Pain

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Background: Musculoskeletal chronic non-cancer pain (CNCP) has a multidimensional impact. Opioid treatments have a key role in their management but expose to risks of serious adverse effects and in particular to opioid use disorder and misuse. There is a lack of data on this topic in France. This work assesses the proportion of patients with problematic use of their opioid treatment in the rheumatology department and in the pain center of the University Hospital of Tours.

Objectives: This work assesses the proportion of patients with problematic use of their opioid treatment in the rheumatology department and in the pain center of the University Hospital of Tours.

Methods: We carried out a prospective monocentric observational study in routine care in patients followed for musculoskeletal CNCP and treated in this indication with weak or strong opioid treatment at the time of inclusion between January and December 2021. We collected demographic, clinical and opioid prescribing data. The primary endpoint was the percentage of patients with problematic use of opioid treatment defined by overconsumption and/or misuse according to the Prescribed Opioid Misuse Index (POMI) and/or opioid use disorder according to DSM V criteria.

Results: 97 patients were included (68% women, median age 55 years); 37% of patients were treated with strong opioids. The median duration of opioid treatment was 4.5 years; 30% of patients had problematic use of their opioid treatment. There was overconsumption in 20% of patients, misuse in 22% and opioid use disorder in 15%. The group of patients with problematic use of opioid treatment had a higher body mass index and reported significantly more history of psychotrauma.

Conclusion: The problematic use of opioids in patients with musculoskeletal CNCP is frequent. These data are in agreement with those in the literature in various clinical and demographic characteristics associated with chronic widespread pain (CWP) are well known, contrary to the social and professional characteristics in general population.

Objectives: To evaluate the set of characteristics associated with CWP.

Methods: The Constances cohort consisting of randomly selected volunteers aged 18 to 69 years, between 2013 and 2020 in France (ref). An ancillary study from this cohort aims to identify musculoskeletal pain using the Nordic Questionnaire. Chronic pain was defined as pain in at least 4 of the 6 areas, during at least 30 days during the previous year. Individuals diagnosed with a cancer were excluded. Demographic, clinical, social, and occupational data at inclusion were collected. Missing data were imputed. Multivariate analysis was performed.

Results: 193,436 people were included, of whom 7% (13,447 people) suffered from CWP. Female gender, age, higher BMI, depression, medium or high physical activity at work, current or past smoking, less sleep duration, and low socio-professional category were associated with CWP. Diploma was a protective factor, as well as leisure physical activity, while job search, household income, alcohol or cannabis were not or poorly associated with CWP.

Conclusion: Chronic widespread pain (CWP) are well known, contrary to the social and professional characteristics in general population.

REFERENCES: NIL.

Disclosure of Interests: None Declared.
DOI: 10.1136/annrheumdis-2023-eular.1021

AB1370  DEMOGRAPHICAL, SOCIO PROFESSIONAL FACTORS AND HABITS ASSOCIATED WITH CHRONIC WIDESPREAD PAIN IN A LARGE GENERAL POPULATION COHORT

Keywords: Epidemiology, Pain, Fibromyalgia

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Background: Clinical and demographic characteristics associated with chronic widespread pain (CWP) are well known, contrary to the social and professional characteristics in general population.

Objectives: To evaluate the set of characteristics associated with CWP.

Methods: The Constances cohort consisting of randomly selected volunteers aged 18 to 69 years, between 2013 and 2020 in France (ref). An ancillary study from this cohort aims to identify musculoskeletal pain using the Nordic Questionnaire. Chronic pain was defined as pain in at least 4 of the 6 areas, during at least 30 days during the previous year. Individuals diagnosed with a cancer were excluded. Demographic, clinical, social, and occupational data at inclusion were collected. Missing data were imputed. Multivariate analysis was performed.

Results: 193,436 people were included, of whom 7% (13,447 people) suffered from CWP. Female gender, age, higher BMI, depression, medium or high physical activity at work, current or past smoking, less sleep duration, and low socio-professional category were associated with CWP. Diploma was a protective factor, as well as leisure physical activity, while job search, household income, alcohol or cannabis were not or poorly associated with CWP.

Conclusion: CWP remains frequent in the French general population and is significantly associated with specific socioeconomic factors.

REFERENCES: NIL.

Disclosure of Interests: None Declared.
DOI: 10.1136/annrheumdis-2023-eular.1875