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AB0893-HPR TREATMENT SATISFACTION, EXPECTATIONS, PATIENT PREFERENCES, AND CHARACTERISTICS IN PATIENTS WITH RHEUMATOID ARTHRITIS (RA): TURKISH COHORT RESULTS OF THE SENSE STUDY

U. Kalyoncu[1], A. Kucuk[2], G. Sargin[3], F. Ozdener[4], S. Yolbaş[5], B. Yurttas[6], S. Turan[7], G. Kimyon[8], A. Sahin[9], S. Yilmaz[10], R. Mercan[11], H. Emmungil[6], M. Çınar[10], İ. Sezer[12], T. Kaşifoğlu[13], F. Cosan[4], T. Senturk[8], N. Inanc[14]. [1]*Hacettepe University – Faculty of Medicine, Department of Internal Medicine, Division of Rheumatology, Ankara, Turkey*; [2]*Necmettin Erbakan University – Meram Faculty of Medicine, Department of Internal Medicine, Division of Rheumatology, Kony, Turkey*; [3]*Aydin Adnan Menderes University – Faculty of Medicine, Department of Internal Medicine, Division of Rheumatology, Aydin, Turkey*; [4]*Bahcesehir University – Faculty of Medicine, Department of Pharmacology, Istanbul, Turkey*; [5]*Inonu University – Turgut Ozal Medical Center Training and Research Hospital, Department of Internal Medicine, Division of Rheumatology, Malatya, Turkey*; [6]*Istanbul University Cerrahpasa – Cerrahpasa Faculty of Medicine, Department of Internal Medicine, Division of Rheumatology, Istanbul, Turkey*; [7]*Trakya University – Faculty of Medicine, Department of Internal Medicine, Division of Rheumatology, Edirne, Turkey*; [8]*Mustafa Kemal University – Faculty of Medicine, Department of Internal Medicine, Division of Rheumatology, Hatay, Turkey*; [9]*Sivas Cumhuriyet University – Faculty of Medicine, Department of Internal Medicine, Division of Rheumatology, Sivas, Turkey*; [10]*University of Health Sciences Turkey – Gulhane Faculty of Medicine, Department of Internal Medicine, Division of Rheumatology, Ankara, Turkey*; [11]*Namik Kemal University – Faculty of Medicine, Department of Internal Medicine, Division of Rheumatology, Tekirdag, Turkey*; [12]*Akdeniz University – Faculty of Medicine, Department of Internal Medicine, Division of Rheumatology, Antalya, Turkey*; [13]*Eskisehir Osmangazi University – Faculty of Medicine, Department of Internal Medicine, Division of Rheumatology, Eskisehir, Turkey*; [14]*Marmara University – School of Medicine, Department of Internal Medicine, Division of Rheumatology, Istanbul, Turkey*

Background: Suboptimal control of RA may lead to severe and progressive articular damage, loss of function, and deterioration of the quality of life (QoL).
Objectives: To assess treatment satisfaction, sociodemographic, clinical, health care resource utilization, and QoL characteristics of patients with sub-optimally controlled RA and treated with conventional synthetic and/or biologic DMARDs.
Methods: This study was an international, multicenter, cross-sectional, non-interventional study. Adult RA patients with moderate to severe disease activity (DAS28>3.2) were enrolled. Patient satisfaction was evaluated with Treatment Satisfaction Questionnaire for Medication (TSQM, version 1.4) with a scale ranging from 0 (indicating poor satisfaction) to 100 (indicating perfect satisfaction). Patients were questioned regarding treatment adherence, patient preferences, and expectations. Workability was evaluated using Work Productivity and Activity Impairment Questionnaire-Rheumatoid Arthritis (WPAI-RA, version 2.0). Short Form 36 (V2) survey were performed to all patients.
Results: One hundred sixty-four patients were included in the study and most (78.0%) were female. The median age was 57.0 years, ranging between 22.0 and 84.0 years. Half of the patients (50.6%) were primary school graduates and 6.1% were unemployed due to RA and seeking work. Median time since RA diagnosis was 8.0 years and mean (±SD) DAS28-CRP score was 4.8 (±1.0). Mean total activity impairment was 54.9% (±27.4). In the past 3 months from enrollment, the mean number of healthcare professional and emergency room visits were 1.8 (±1.1) and 1.8 (±1.3), respectively. Mean number and length of hospitalizations in the previous 3 months were 1.1 (±0.3) times and 8.3 (±7.2) days, respectively. Mean TSQM scores were 53.5 (±21.4) for effectiveness, 86.0 (±26.7) for side effects, 67.8 (±16.5) for convenience, and 57.7 (±22.0) for global satisfaction. The leading expectation was 'lasting relief of RA symptoms' (mean score: 5.8). Preferred time until the effect of onset was 'up to 1 week' for 76.2% of the patients. Most of the patients (57.9%) preferred oral administrations and the most preferred frequency of administration was 'once per day' (46.3%). Mean physical and mental component summary scores for Short Form 36 (V2) survey were 37.9 (±8.3) and 40.1 (±10.7).
Conclusion: Two-thirds of the patients with RA who have suboptimal responses are not satisfied with their treatments. Moreover, oral and once-daily treatment approaches stand out in patient preferences. Finally, suboptimal control leads to deterioration in clinical characteristics, workability, and QoL of patients with RA.
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AB0894-HPR THE JOURNEY OF PATIENTS WITH RHEUMATOID ARTHRITIS

M. Fusama[1], S. Oliver[2], H. Nakahara[3], Y. Van Eijk-Hustings[4], Y. Kuroe[5]. [1]*Takarazuka University, School of Nursing, Osaka, Japan*; [2]*Susan Oliver Associates, Nurse Consultant, Barnstaple, Devon., United Kingdom*; [3]*Osaka Yukioka College of Health Science, Department of Physical Therapy, Ibaragi, Japan*; [4]*Clinical Epidemiology and Medical Technology Assessment (KEMTA), Department of Patient&Care, Amsterdam, Netherlands*; [5]*Gifu College of Nursing, School of Nursing, hashima, Japan*

Background: The course of rheumatoid arthritis (RA) differs from patient to patient, and each patient has a unique story. The disease condition affects psychological and social aspects, greatly affecting the quality of life. The disease course is unpredictable, and each patient's story can be seen as a lifelong journey, full of ups and downs. Therefore, it is crucial to know what kind of support is required during the course of their life.
Objectives: The aim of this study is to examine the life story of patients with RA and clarify a common situation in their stories in order to consider what kind of support is needed.
Methods: This is a qualitative study using life story interview for patients with RA in Japan. Interview included disease history, patients' behaviors, effects on daily life, the patients' perspectives regarding psychological considerations and useful support. Data were analyzed using content analysis. This study was approved by the ethics committee and informed consent was obtained.
Results: Eight patients participated in this study. They were all females and the average age was 57 years old. As a result of the categorization, we extracted the following eight situations: (1) Emergence of symptom; patients thought joint pain would go away, however, the symptom did not improve and began to affect their daily life and work, (2) Choose a hospital to visit; pain and anxiety have continued and decided to visit a hospital, (3) Encounter with their doctors; patients expected their doctor to relieve their pain, while they were afraid of being told that they were suffering from a serious disease. (4) Diagnosis of RA; patients were

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