

# XVI Congresso Português de Reumatologia

## EpiReumaPt after 3 months on the field

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### Introduction

In Portugal, data on prevalence and impact of Rheumatic Diseases (RDs) is scarce. EpiReumaPt is a national epidemiologic, cross-sectional study of RDs in the Portuguese population. The primary objective of the study is to estimate the prevalence of the different RDs in Portugal.

### Objective

To describe the population participating in EpiReumaPt after the first 3 months on the field, including the proportion of subjects with RDs diagnosis.

### Methods

EpiReumaPt involves a two-stage approach. The first phase is a survey randomly performed by trained interviewers at subjects' homes (selection by random route). Phase 2 consists of a clinical observation performed by a Rheumatologist, in order to confirm (or not) the RD diagnosis using a blinded methodology and to apply specific and validated questionnaires in case of a diagnosis of a RD.

Phase 2 began on 30 September 2011, in Lisbon and surroundings (Greater Lisbon area). For this analysis, data collected until 17 December was used (12 weeks, 24 assessment days, 22 collaborating Rheumatologists).

We performed a descriptive analysis of the initially surveyed population and an analysis of the subgroup with a rheumatological assessment.

### Results

During the first phase of the study, the interviewers tried to contact 5014 subjects in 50 different locations of the Greater Lisbon area, having been successful in 1682 contact attempts (33.5%). Among those successfully contacted, 834 (49.6%) subjects accepted to be interviewed. Mean age of interviewed participants was 50 years-old (SD 18.5) and 534 (64.0%) were women.

The majority of participants were Caucasian (n=762, 91.4%). Regarding educational level, 275 (33.0%) had university education or equivalent (12 years of study), 181 (21.7%) had 10-12 years of education or technical courses, 179 (21.5%) had four years of study and 43 (5.2%) primary school incomplete (1-2 years of school). The average number of years of education was 9.6 years (SD 6.7). All ranges of monthly income were represented (from <500€ to > 4000€), with 61.9% having an income 2000€ per month.

The average self-reported functional status/disability score (measured by HAQ) was 0.26 (SD 0.6).

The screening survey selected 554 cases (66.4%) of suspected RD or rheumatic complains associated with a RD. All positive screenings and 65 (23.2%) randomly recruited negative screenings were invited for phase 2 of the study. Of the total number of invited participants (n=619, table 2), 364 (58.8%) dropped-out (people who accepted but missed the phase 2 appointment + people who rejected the invitation) and 255 were observed by a Rheumatologist.

		Women	Men	Average age (SD)
Invited participants for phase 2	Drop-outs	262 (72.0%)	102(28.0%)	50.9(19.5)
	(n=364, 58.8%)			

<b>(n=619)</b>	Observed by the Rheumatologist (n=255, 41.2%)	183 (71.8%)	72(28.2%)	53.7(16.2)
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Among those observed by the Rheumatologist, 7.1% (18/255) were considered healthy regarding their musculoskeletal system. A RD diagnosis was established in 92.9% (237/255) of the subjects: 95 (11.4%) low back pain; 59 (7.1%) periarticular disease; 56 (6.7%) knee OA; 40 (4.8%) hand OA; 38 (4.6%) osteoporosis; 11 (1.3%) hip OA; 7 (0.8%) fibromyalgia; 5 (0.6%) gout; 4 (0.5%) rheumatoid arthritis; 2 (0.24%) spondyloarthritis; 2 (0.2%) lupus; 1 (0,1%) polymyalgia rheumatic; 1 (0.1%) childhood rheumatic disease.

232 (91.0%) subjects consented to donate blood to biobank donation and 246 (96.5%) accepted to be included in the cohort study.

### **Conclusions**

After 3 months of enrollment, preliminary data obtained allows a demographic description of nearly 1000 individuals and begins to sketch the prevalence of RDs in Portugal.