

# Prevalence, physical and mental health patterns of rheumatic and musculoskeletal diseases in Portugal: results from a national survey

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## Background:

Rheumatic and musculoskeletal diseases (RMD) are a prevalent leading cause of disability and consume a large amount of healthcare and social resources. RMD have been associated with low levels of physical and mental health in other countries.

## Methods:

EpiReumaPt is a national health survey conducted from Sep'2011 to Dec'2013, which involved a three-stage approach:

First, 10661 adult subjects were randomly selected. Trained interviewers undertook structured face-to-face questionnaires in participant's households that included a screening for RMD, and the EQ5D and HAQ.

Secondly, all participants screened positive for at least one RMD, plus 20% of individuals with no rheumatic complaints, were invited to be observed by a rheumatologist at their local Primary Care Centers for a structured evaluation.

Finally, a team of 3 experienced rheumatologists revised all the clinical data and confirmed the diagnoses according to previously validated criteria.

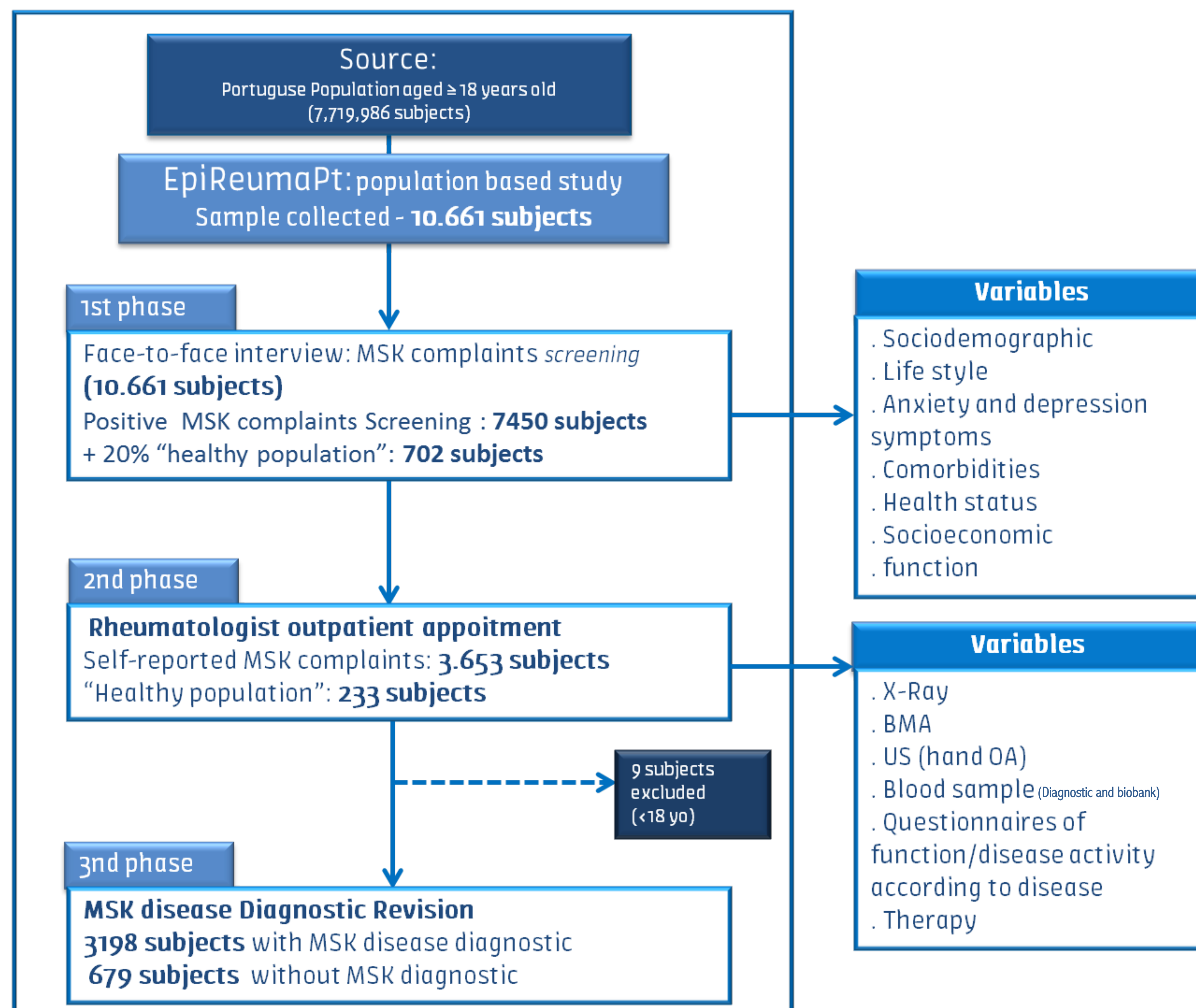


Figure 1: Study design flowchart

## Objectives:

- to estimate the national prevalence in the adult Portuguese population of: hand, knee and hip osteoarthritis (OA), low back pain (LBP), rheumatoid arthritis (RA), fibromyalgia (FM), gout, spondyloarthritis (SpA), periarticular disease (PD) systemic lupus erythematosus (SLE), polymyalgia rheumatica (PMR) and osteoporosis (OP)
- to compare physical and mental health between participants with and without RMD

Patients with Rheumatic Diseases reported worse quality of life (EQ5D)

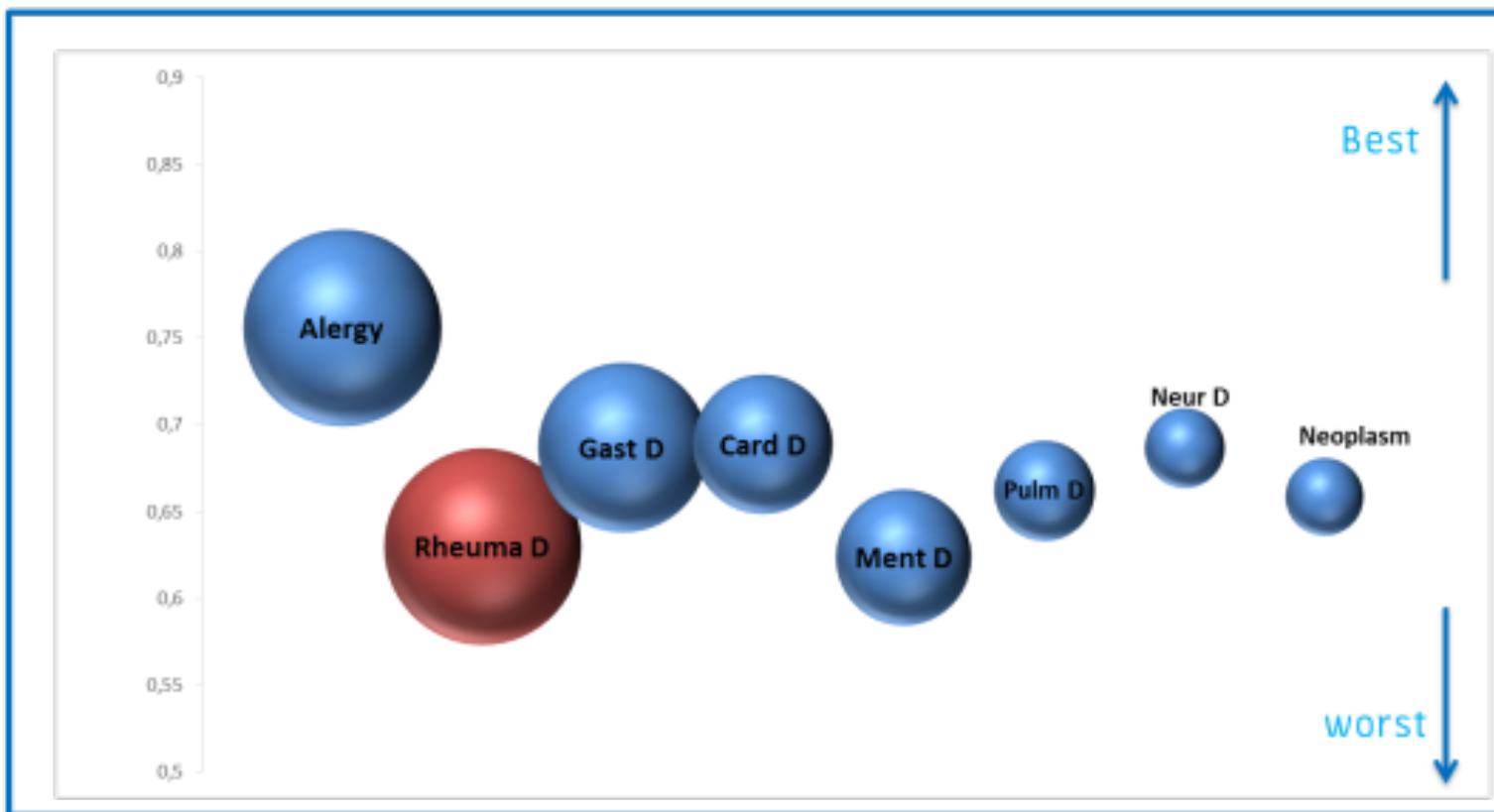


Figure 2: Quality of life of Portuguese chronic patients

Patients with Rheumatoid Arthritis had Worse functional disability (HAQ)

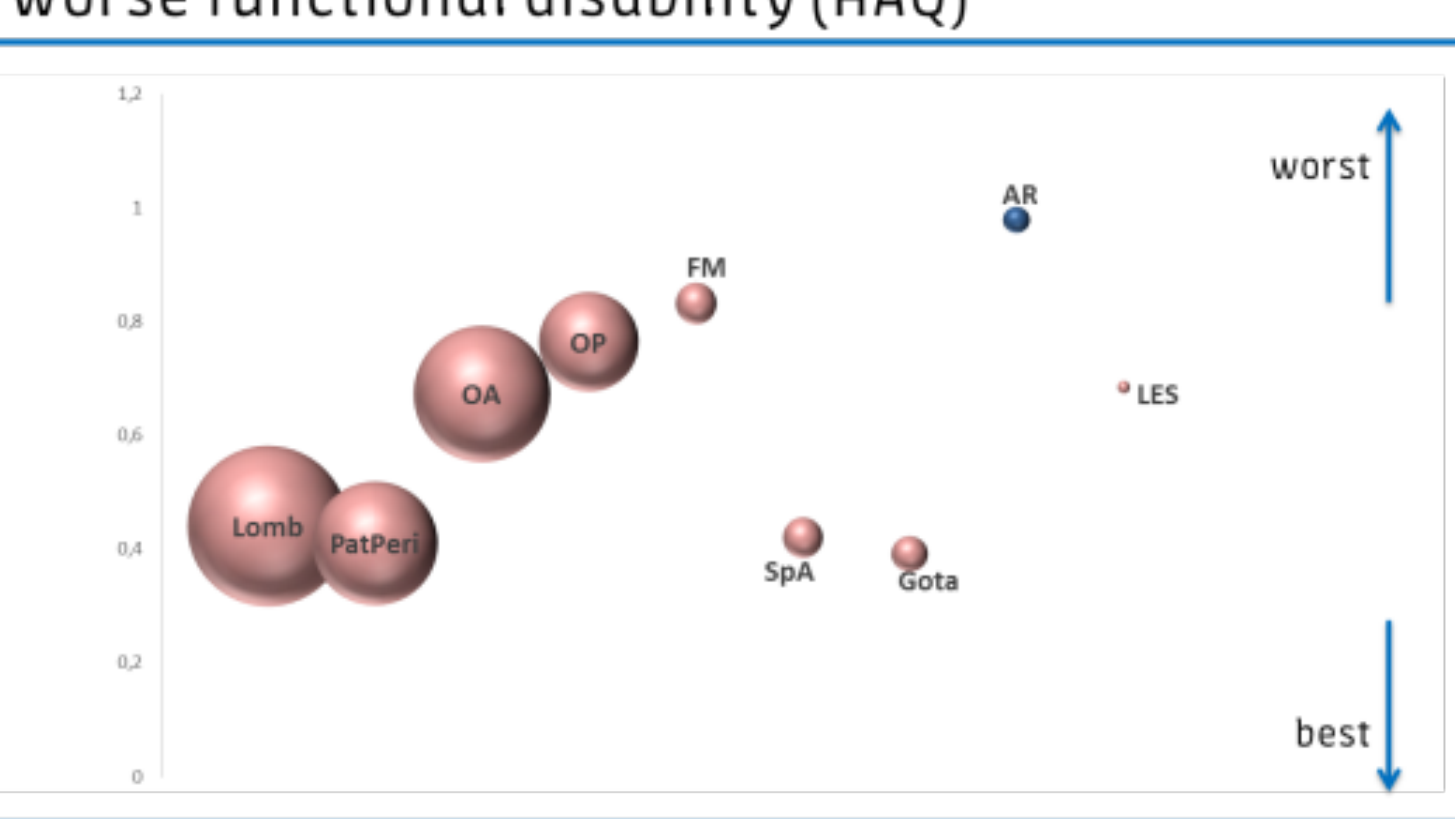


Figure 3: Quality of life of Portuguese rheumatic patients

Rheumatic disease patients Have worse function and quality of life

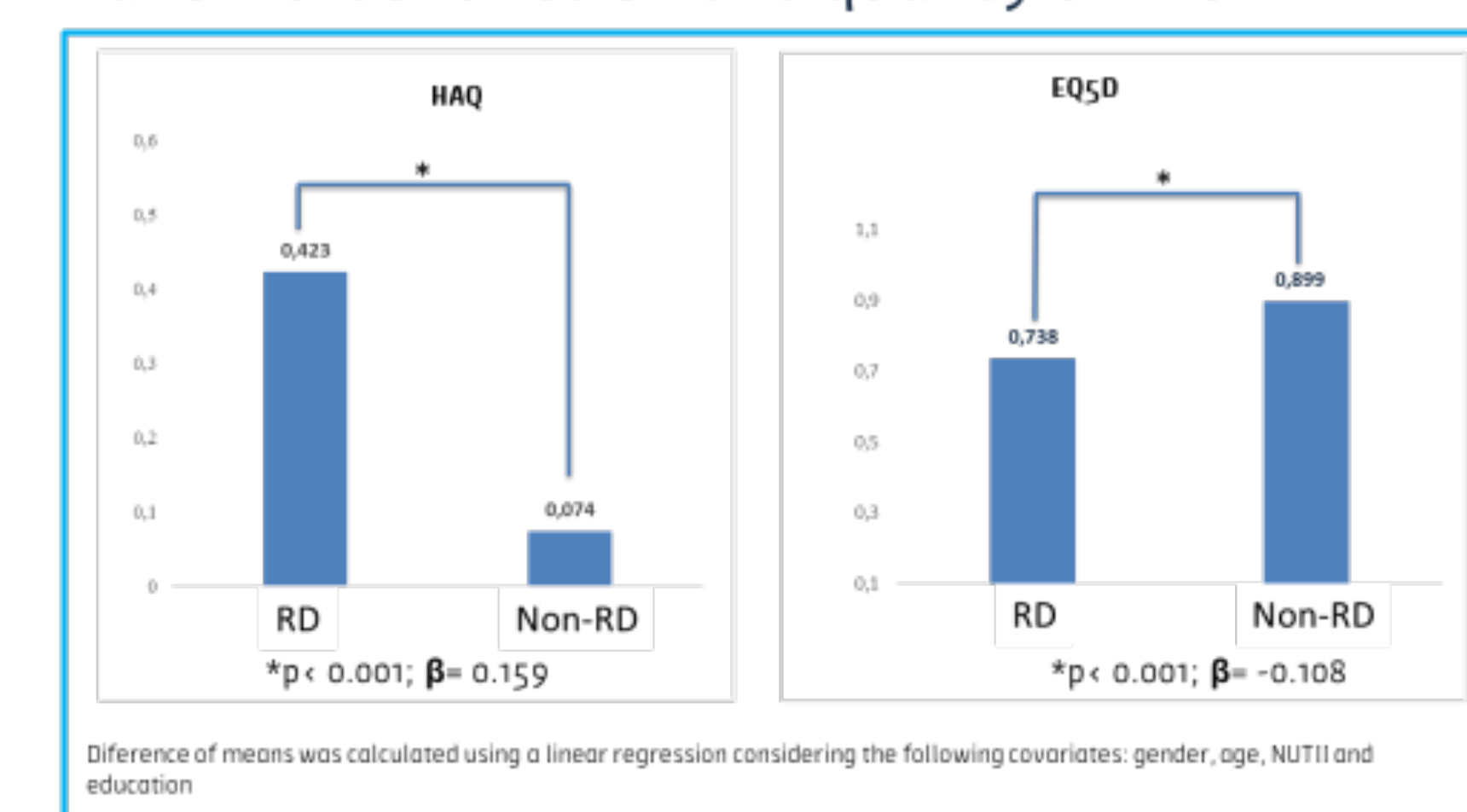


Figure 4: Quality of life of Portuguese rheumatic patients vs non-rheumatic patients

Clinical visits Costs Comparison between RMD vs non-RMD

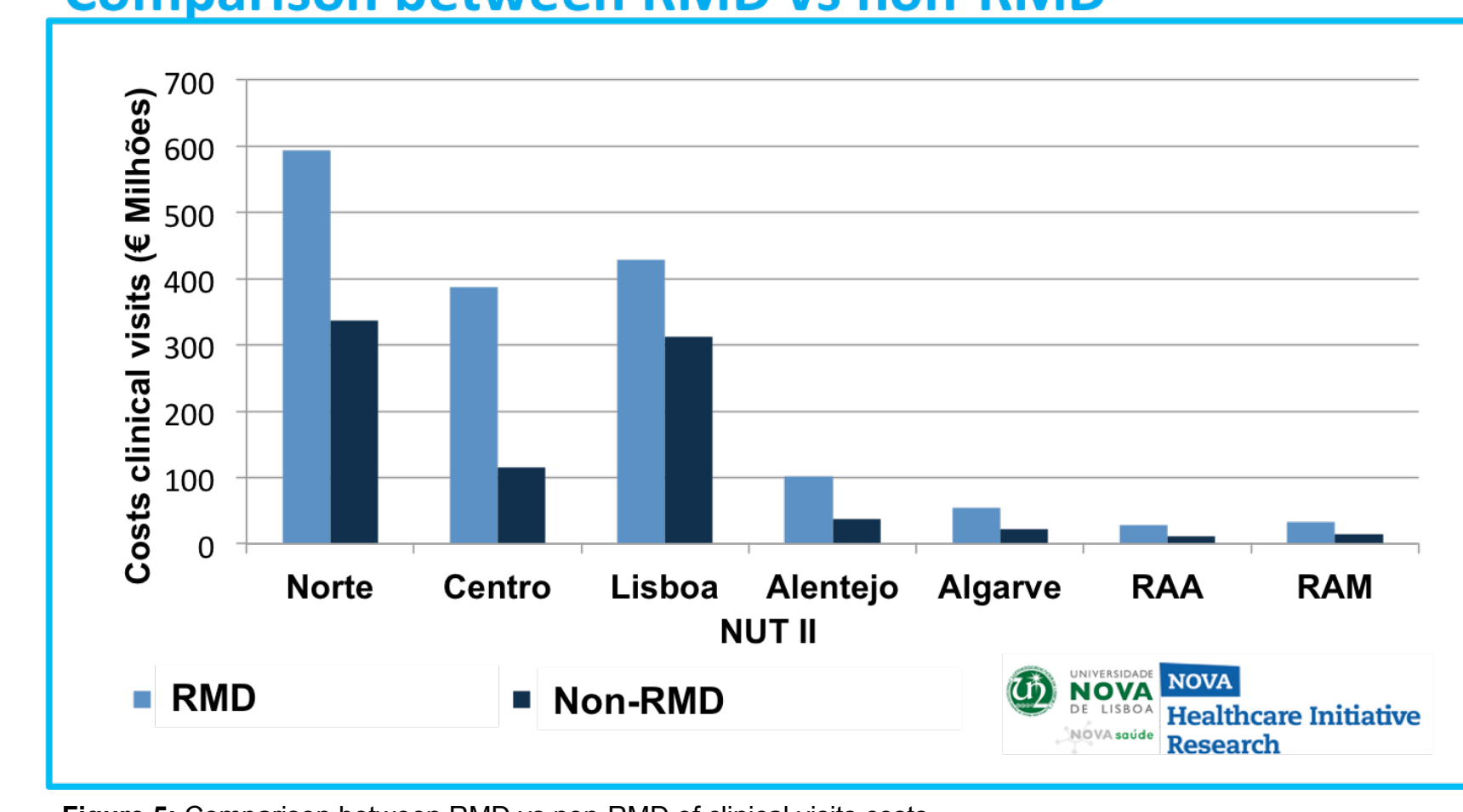


Figure 5: Comparison between RMD vs non-RMD of clinical visits costs

The authors declare that they have no conflict of interest.



**Sponsorship**  
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## Results:

Prevalence of RMD in the adult Portuguese population was as follows with 95% CI (table 1):

	Total prevalence (95% CI) n=3,877	Estimated number (Portuguese population 8,657,240)	Women (95% CI) n=2,630	Estimated number (Portuguese female population 4,585,118)	Men (95% CI) n=1,247	Estimated number (Portuguese male population 4,072,122)
Low Back Pain (n=1,393)	26.4% (23.3%;29.5%)	2,286,377 (2,018,868;2,554,752)	29.6% (25.8%;33.5%)	1,359,029 (1,182,043;1,535,556)	22.8% (17.9%;27.8%)	930,480 (728,503;1,132,864)
Periarticular Disease (n=929)	15.8% (13.5%;18.0%)	1,364,381 (1,166,130;1,561,766)	19.1% (16.2%;22.0%)	876,675 (742,331;1,011,019)	12.0% (8.4%;15.6%)	490,284 (343,688;636,473)
Knee Osteoarthritis (n=981)	12.4% (11.0%;13.8%)	1,073,498 (952,297;1,195,565)	15.8% (13.7%;18.0%)	725,825 (627,703;819,361)	8.6% (6.9%;10.3%)	350,610 (279,755;421,465)
Osteoporosis (n=858)	10.2% (9.00%;11.3%)	879,576 (777,421;980,866)	17.0% (14.7%;19.2%)	778,095 (675,847;880,343)	2.6% (1.9%;3.4%)	106,690 (76,556;136,824)
Hand Osteoarthritis (n=625)	8.7% (7.5%;9.9%)	755,778 (651,891;859,664)	13.8% (11.6%;15.9%)	630,913 (532,791;728,576)	3.2% (2.2%;4.1%)	129,087 (90,402;167,772)
Hip Osteoarthritis (n=199)	2.9% (2.3%;3.6%)	255,389 (196,520;313,393)	3.0% (2.3%;3.7%)	137,554 (104,083;171,025)	2.9% (1.7%;4.1%)	117,685 (70,041;164,921)
Fibromyalgia (n=149)	1.7% (1.3%;2.1%)	147,174 (114,276;180,071)	3.1% (2.4%;3.9%)	143,973 (110,502;177,903)	0.0% (-0.0%;0.2%)	4,073† (0;10,181)
Spondyloarthritis (n=92)	1.6% (1.2%;2.1%)	141,113 (103,022;180,071)	2.0% (1.3%;2.7%)	91,244 (59,607;122,423)	1.2% (0.7%;1.8%)	50,495 (28,505;72,484)
Gout (n=92)	1.3% (1.0%;1.6%)	110,813 (83,110;138,516)	0.1% (-0.0%;0.2%)	3,669† (0;7,795)	2.6% (1.9%;3.3%)	106,283 (77,778;135,195)
Rheumatoid Arthritis (n=61)	0.7% (0.5%;0.9%)	63,198 (45,018;82,244)	1.2% (0.8%;1.5%)	53,188 (36,223;70,611)	0.3% (0.1%;0.4%)	10,588† (2,851;17,918)
SLE (n=13)	0.1% (0.1%;0.2%)	12,986† (5,195;21,644)	0.2% (0.1%;0.4%)	11,463† (4,127;19,258)	0.0% (-0.0%;0.1%)	1,629† (0;4,480)
Polymyalgia Rheumatica (n=8)	0.1% (0.0%;0.2%)	8,658† (1,732;15,584)	0.13% (0.0%;0.2%)	5,961† (0;9,171)	0.1% (-0.0%;0.2%)	2,444† (0;8,145)

† The number of subjects with rheumatic diseases was estimated using data from Census 2011. † The sample was calculated considering a minimum prevalence of 0.5%. For rare diseases the estimated number of Portuguese with the disease could be overestimated.

In Portugal RMDs are under diagnosed (new diagnostics performed during EpiReumaPt study)

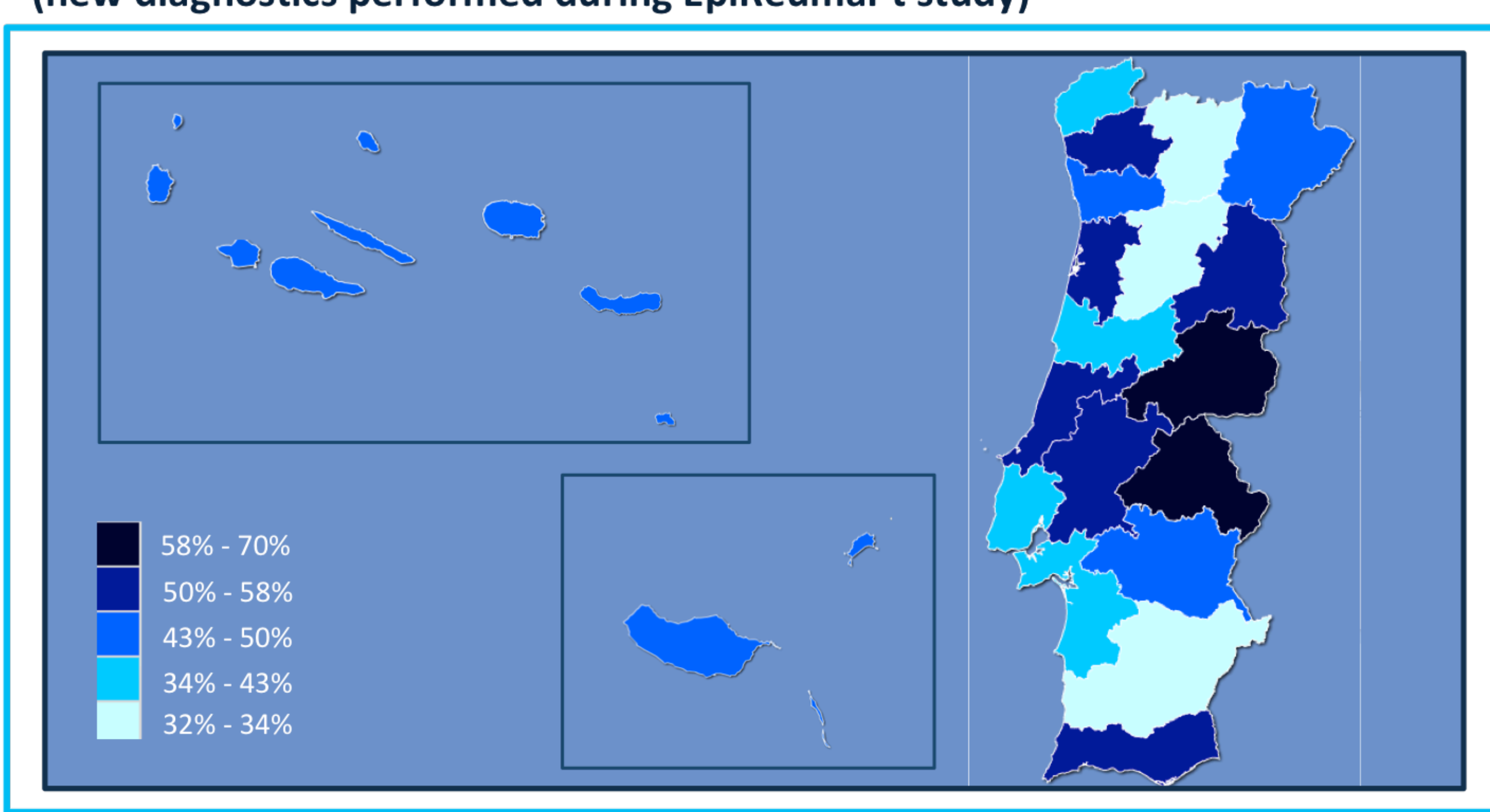


Figure 6: EpiReumaPt new diagnostics

After adjustment, subjects with RMD had significantly lower EQ5D scores ( $\beta=-0.09$ ;  $p<0.001$ ) and higher HAQ scores ( $\beta=0.12$ ;  $p<0.001$ ) than subjects with no RMD. Some RMD were significantly and independently associated with worse EQ5D scores: PMR ( $\beta=-0.334$ ), RA ( $\beta=-0.132$ ), FM ( $\beta=-0.100$ ), LBP ( $\beta=-0.07$ ), Knee OA ( $\beta=-0.06$ ) and PD ( $\beta=-0.04$ ).

Proportion of anxiety and depression symptoms among the RMD Portuguese patients was 16.7% and 8.3%, respectively; the prevalence of anxiety symptoms was significantly higher when compared with subjects without RMD (OR= 3.4;  $p=0.003$ ). Moreover, FM (OR=3.12;  $p<0.001$ ), SpA (OR=2.82;  $p=0.012$ ) and LBP (OR=1.84;  $p=0.007$ ) were significantly and independently associated with the presence of anxiety symptoms; PMR (OR=18.81;  $p=0.006$ ), FM (OR=3.73;  $p=0.001$ ) and LBP (OR=1.55;  $p=0.030$ ) were significantly and independently associated with the presence of depression symptoms.

## Conclusion

Rheumatic and musculoskeletal diseases are highly prevalent in Portugal and are associated with significant impairment of physical and mental health.

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