

00010 Are Peripheral Arthritis, Enthesitis or Dactylitis Associated With Poorer Quality of Life in Patients With Axial Spondyloarthritis? A 1-year Cohort Study

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Aims: To assess if a history of peripheral arthritis, enthesitis or dactylitis (HPED) at baseline are associated with poorer quality of life (QoL) in patients with axial Spondyloarthritis (axSpA) at baseline and 1 - year.

Methodology: We analysed patients with axSpA fulfilling 2009 ASAS criteria from the RESPOND registry in Singapore, seen between 2011 and 2015. Demographic, clinical variables and patient - reported outcomes (ASQoL and SF - 36) at baseline and 1 - year were prospectively collected. We used linear mixed models to assess the association of HPED at baseline with QoL at baseline and 1 - year.

Result: Among 221 patients (mean (SD) age 38.5±15.3 years, 79.0% males, 83.1% Chinese, disease duration (months) 8.6±16.4). HPED at baseline was associated with poorer QoL for ASQoL (β :2.29, $p<0.01$) and 6 of 8 SF - 36 domains (PF β : - 10.84, $p<0.01$; RP β : - 15.19, $p<0.01$; BP β : - 11.78, $p<0.01$; VT β : - 8.61, $p<0.01$; SF β : - 13.55, $p<0.01$; RE β : - 13.56, $p<0.01$) and SF - 36 PCS (β : - 8.26, $p<0.01$) scores. At 1 - year of follow up, HPED at baseline was associated with reduced SF - 36 PCS (β : - 6.33, $p<0.01$) scores, 4 out of 8 SF - 36 domains (PF β : - 10.88, $p<0.01$; RP β : - 13.44, $p<0.01$; SF β : - 6.92, $p<0.05$; RE β : - 7.78, $p<0.05$) and increased SF - 36 MCS (β :3.91, $p<0.05$), MH (β :5.77, $p<0.05$), and VT (β :6.46, $p<0.05$) scores.

Conclusion: At baseline, HPED at baseline was associated with poorer QoL outcomes in patients with axSpA. After 1 - year, HPED was associated with poorer QoL for domains of physical health and better QoL for domains of mental health, possibly due to response shift for these domains.