



PERFORMANCE OF SCREENING TOOLS FOR RHEUMATOID ARTHRITIS AND INFLAMMATORY LOW BACK PAIN IN THE GENERAL POPULATION

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BACKGROUND

Early diagnosis and therapeutic intervention aimed at remission of the inflammatory process improves the prognosis in inflammatory rheumatic diseases. In order to recognize early rheumatoid arthritis (RA), EULAR defined the clinical characteristics of patients with arthralgia considered to be at risk for AR development. Similarly, the ASAS group defined the relevant characteristics for the evaluation of inflammatory low back pain, contributing to the early diagnosis of spondyloarthritis (Spa). The objective was to apply questionnaires to the general population to track individuals at higher risk of developing RA and Spa.

MATERIALS AND METHODS

In community outreach activities, individuals with musculoskeletal complaints were evaluated by two senior rheumatologists and four rheumatology resident doctors. On the same occasion, EULAR and ASAS questionnaires were administered, both with a suspicious case-defining score ≥ 4 . Patients with a previous diagnosis of RA or Spa and those under 18 years old were excluded. The suspects were investigated in the tertiary service and the others were referred to Basic Health Unit or on-site counseling.

RESULTS

Of the 174 individuals present, 169 were evaluated (excluded four patients with RA and one under 18 years old). Nine had a EULAR score of ≥ 4 (5.3%), all female, with a mean age of 57.6 ± 9.1 years (42-70) and an average score of 4.3 ± 0.5 , of which five were attended at the tertiary service and the diagnosis of RA was confirmed in two cases (1.18%). Five subjects had ASAS score ≥ 4 (2.9%), 80% were female, mean age 50.6 ± 11.5 years (32-61) and mean score was 4.6 ± 0.55 , being the diagnosis of Spa5 confirmed in the male individual (0.59%). A total of 78% were female, mean age 55.5 ± 13.6 years (21-83), mean score in the ASAS questionnaire of 0.33 ± 0.77 and in the EULAR of 0.67 ± 0.82 .

CONCLUSION

The questionnaires were able to track individuals with arthralgia considered to be at risk for the development of RA and inflammatory low back pain that, after investigation at a tertiary center, had a confirmed diagnosis at a frequency similar to the occurrence of these diseases in the general population.