The Incidence and Influencing factors of functional disability in Chinese Patients with Rheumatoid Arthritis

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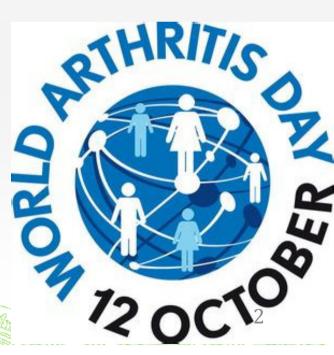


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Contents

- Background
- Purpose
- Methods
- Results
- Conclusions





Background

Rheumatoid Arthritis: RA

- A chronic, autoimmune and Invasive arthritis
- Immortal tumor:
 - Disability, Discomfort, Dollar cost, Drug toxicity, Death



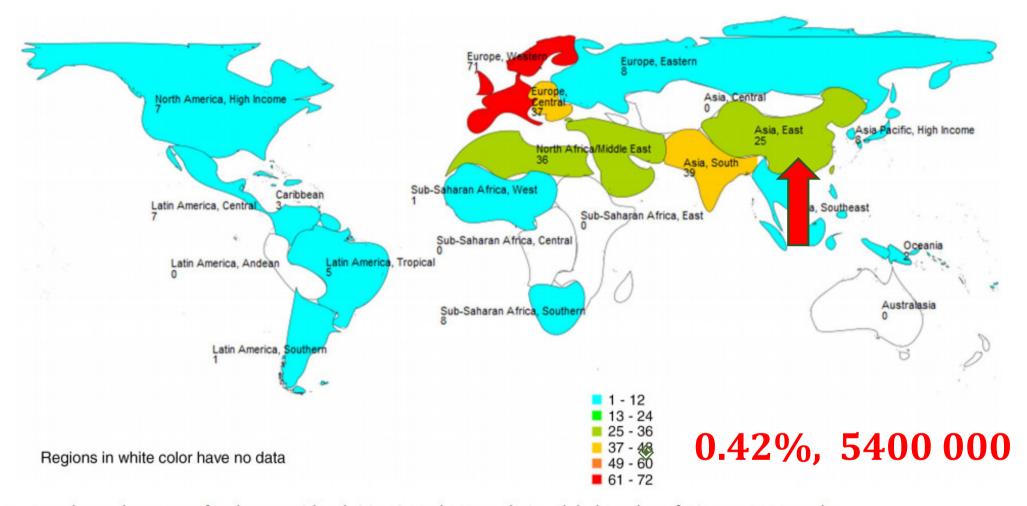


Figure 1 Prevalence data count for rheumatoid arthritis DisMod-MR analysis, Global Burden of Disease 2010 study.

Cross M. Smith E. Hoy D. et al. Annals of the Rheumatic Diseases. 2014,73(7):1316-22. Zeng XF. et al. Chinese Journal of Evidence-based .2013,13 (3): 300-7.

Background

- Morning stiff
- Pain
- Tender
- Swelling



Functional disability rate: 20% in 1 year, 60% in 10 years



functional disability--feet



functional disability--hands



Purpose

- Investigate the incidence of functional disability in Chinese patients with RA
- Analyze influencing factors of functional disability in Chinese patients with RA
- Provide reference for intervention on functional disability of RA



Methods

- A cross-sectional survey
- Convenience sampling in Rheumatic
 Outpatient in West China Hospital
- September to December 2013
- Demographic data, social support, pain, fatigue, functional disability



measurements -1

Demographic data

- age
- gender
- marital status
- education level
- residence
- family monthly income per capita (FMIPC)

medical payment forms

- disease duration
- hospitalized times
- total cost of treatment (TCT)

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measurements -2

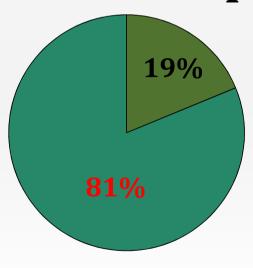
- Social support
- Social support

 Social Support Rating Scale, Higher scores indicateous of Marie Scale Social Support Rating Scale, Higher scores indicateous of Marie Scale Support Rating Scale Scale Support Rating Scale Scale Scale Score Score Scale more social support
- Pain, fatigue
 - Visual Analog Scale
- Functional disability
 - Health Assessment Questionnaire-Disability Index (HAQ-DI), Higher score of HAQ-DI indicates more damage of physical function

Results-1

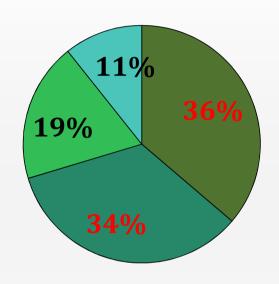
Statistical description

• 607 of 653 participants

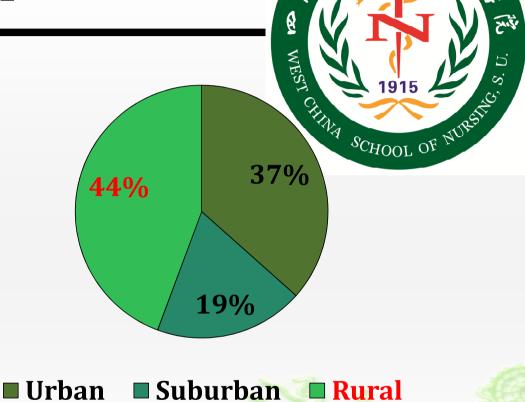


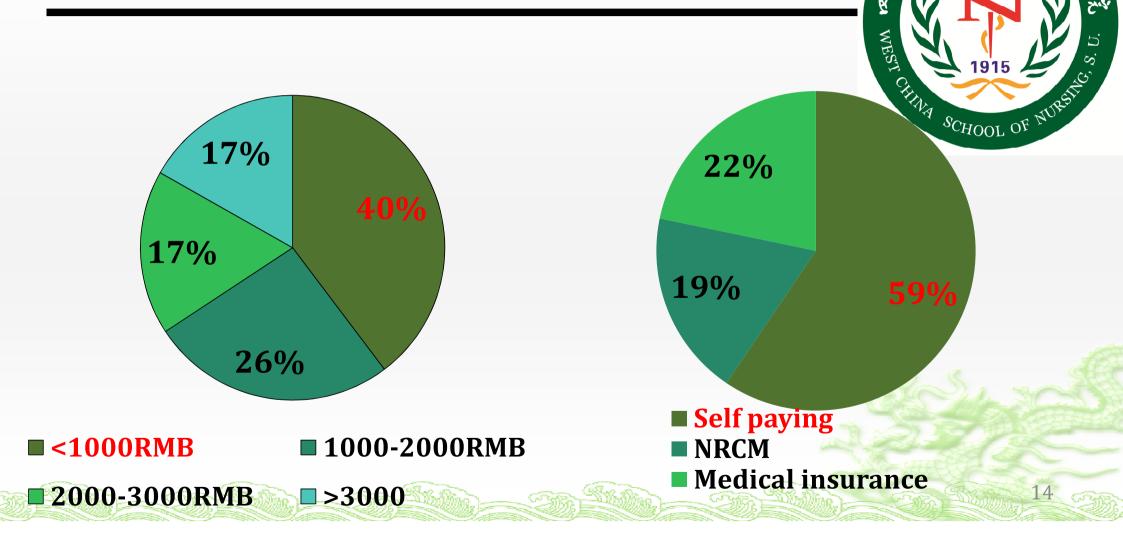






- **Primary school or below**
- Junior high school
- Senior high school
- **■** College or above



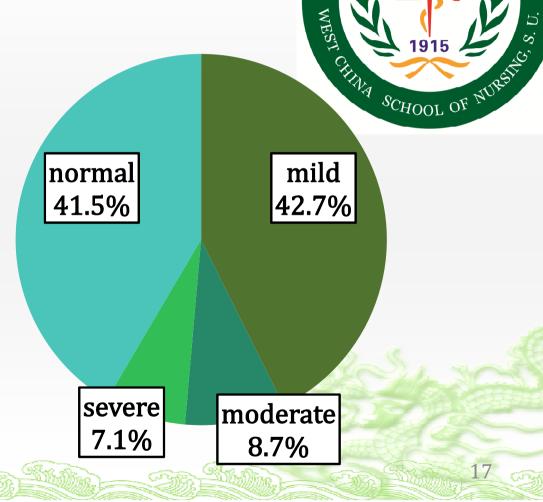




Variables	Mean±SD or Median	Range
Age (years)	50	18, 88
Disease duration (month)	50	1, 492
VAS of Pain	5.25 ± 2.91	0, 10
VAS of Fatigue	4.15 ± 2.87	0, 10
Social support rating scale	40.67 ± 7.68	20, 58

	Mean	SD	
HAQ-DI	0.665	0.675	
dressing and grooming	0.679	0.788	
arising	0.539	0.695	
eating	0.479	0.719	
walking	0.565	0.719	
hygiene	0.720	0.862	
reaching	0.997	1.039	
gripping	0.651	0.779	
other activities	0.687	0.792	

\$ 58.5% of patients had functional disability.



Results-2

Univariate analysis

	J	
Variable	HAQ-DI	P
Gender	t=1.386	0.166
Marital status	F=1.500	0.213
Education level	F=15.682	< 0.001
Residence	F=12.647	< 0.001
FMIPC (Yuan)	F=10.364	< 0.001
Medical payment forms	F=0.992	0.189
FMIPC family monthly income ner canita		

Univariate analysis

				Such
		HAQ-DI		
Education level	Primary school or below	0.86 ± 0.68	F=15.682	<0.001**
	Junior high school	0.66 ± 0.68		
	Senior high school	0.51 ± 0.63		
	College or above	0.30 ± 0.44		
Residence	Urban	0.49 ± 0.64	F=12.647	<0.001**
	Suburban	0.71 ± 0.70		
	Rural	0.79 ± 0.67		
family monthly	<1000	0.79 ± 0.64	F=10.364	<0.001**
income per capita (Yuan)	1000-2000	0.70 ± 0.71		
	2000-3000	0.62 ± 0.74		
	>3000	0.36 ± 0.49		

Table 3 Multivariate regression of functional disability of patients with rheumatoid arthritis (N=607, Adjusted R2=0.384)

Included variables	В	P	95% Confidence internal (95%CI)
Suburban	0.125	0.047*	0.002,0.248
Rural	0.154	0.006*	0.045,0263
Age	0.012	<0.001**	0.009, 0.016
Disease duration	0.000	0.007*	0.000, 0.001
Hospitalized times	0.025	0.001*	0.011, 0.039
Overall cost for treatment	0.002	<0.001**	0.001, 0.002
Pain	0.094	<0.001**	0.079, 0.109
Subjective social support	-0.019	<0.001**	-0.028, -0.010
Available social support	-0.024	0.019*	-0.044, -0.004 20

Results-Multivariate regression

- \diamond Adjusted R²=0.384
- Pain, age, disease duration, total cost for treatment and hospitalized times was negative factors
- Subjective and available social support was positive factors

Conclusion

- Functional disability is a common sympton study.
- When providing patient education, nurses should consider more about patients with RA who live in rural residence, have a low level of income and education and long disease duration.
- Pain management with a sound social support system is a possible good intervention



Thank you for your attention!