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AbstractBook

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ASSESSMENT OF PAIN SYNDROME IN PATIENTS WITH SPONDYLOARTHRITIC PSORIATIC ARTHRITIS

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Objective: To assess the severity of pain and quality of life in patients with spondyloarthritic psoriatic arthritis (PsA), as well as the effectiveness of therapy with methotrexate (MT).

Methods: We examined 15 patients with PsA receiving MT (at a dose of 10-20 mg/week) as a basic therapy for at least 6 months. DAS28-CRP(4), DAPSA, the visual analogue scale (VAS), Likert scale were used. The quality of life was assessed using the BASDAI, SF-36, HAQ-DI, DLQI, QIDS SR-16. Skin manifestations of psoriasis was assessed by the PASI index, BSA.

Results: Among patients there were 12 men, 3 women. The age of the patients was 48.2±10.56 y, the duration of the articular syndrome was from 7 months to 5 y, the duration of the skin syndrome was from 1.5-22 y. All patients had DAS28-CRP(4) from 4.28-5.01; DAPSA from 23-26.8. The activity of the disease according to the VAS by the patient was 61±8.9 mm, by the doctor - 58±4.2 mm, according to the Likert scale - 2.5 points. The presence of pain and functional limitations negatively affected all parameters of quality of life. Physical (41.64±10.9) and mental (39.22±9.2) indicators changed according to SF-36. HAQ-DI values ranged from 0.50-1.25, BASDAI - from 3.4 to 5.6, DLQI - from 7 to 12, QIDS SR-16 - from 5 to 10. PASI, as an indicator of the severity and severity of psoriasis, ranged from 4-13.6 points, the BSA index in assessing the prevalence of skin manifestations - from 2 to 9.8%.

Conclusion: All patients with spondyloarthritic PsA did not achieve remission or low activity while taking MT as a DMARD. In 100% of patients, despite long-term use of MT in a stable dosage, moderate clinical and laboratory activity of the disease remained, which affected all indicators of quality of life (both physical and mental, including manifestations of mild depression).

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VITAMIN D STATUS AMONG RESIDENTS OF DIFFERENT REGIONS OF RUSSIAN FEDERATION

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Objective: To study the vitamin D status depending on age, season and geographical regions of Russian Federation.

Methods: In this retrospective study we analyzed 115,694 anonymised blood samples from "In vitro" commercial laboratory database. The samples were collected from 2012-2017 in the central, northwestern and southern regions of Russian Federation. Serum levels of vitamin D (25(OH)D) were measured using chemiluminescent assay. The participants over the age of 16 were included in this study.

Results: The median age was 45 [33; 58] y. 25(OH)D median value was 23.9 [17.0; 31.6] ng/ml. It was found that from 2012-2017, 69.5% of all samples had levels of 25(OH)D <30 ng/ml. There was no significant difference between prevalence of vitamin D deficiency (<20 ng/ml) in 2012 and 2017 (33.5% vs. 35%, p=0.188). The difference between number of samples with 25(OH)D <20 ng/ml in winter and summer was significant (35% vs. 30%, p=0.06). There was no evidence that number of participants with 25(OH)D in normal range (30-60 ng/ml) was different in various residential areas: central region 28.4%, northwestern region 30.1% and southern region 21.8% (p>0.05). However, severe deficiency (<10 ng/ml) was statistically higher in northwestern region (p<0.05). The analysis of different age groups had shown that 25(OH)D deficiency and severe deficiency were higher in group <20 y (42% and 7.7%) as compared with 20-29 y (31.5% and 3.9%) and 40-59 y (32% and 5.3%), p=0.000 for all. Moreover, only 22.6% in group <20 y was in normal range, what was comparable with group >80 y (18.1%), p=0.1.

Conclusion: We demonstrate that vitamin D deficiency is widespread in Russian Federation. No differences in vitamin D status has been observed in various regions. Lower prevalence of 25(OH)D <20 ng/ml in summer was discovered. The lowest level of vitamin D was observed in groups <20 and >80 y.