

# Patients with axial spondyloarthritis present with gender-related differences regarding disease burden and outcomes

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## Background

Sex-related differences regarding diagnostic delay, symptoms and outcomes have been reported in patients with axial spondyloarthritis (axSpA).

## Aim

To determine sex- and gender related differences in physician- and patient-reported outcomes in patients with axSpA.

## Methods

### Data Source

- German National database of the Collaborative Arthritis Centers
- Cross-sectional data from 2020
- N=275 women and 502 men with axSpA

### Analyses

Descriptive comparison between women and men regarding:

- Patient-reported questionnaires:
  - Fatigue, Pain and Sleeping disorders, all on numeric rating scales (0-10, 10 indicating the worst assessment)
  - Disease Activity Index (BASDAI, 0-10,  $\geq 4$  indicating suboptimal control of disease)
  - Functional Index (BASFI, 0-10, a higher score indicates a higher degree of functional limitation)
  - Depressive Symptoms (WHO-5, 0-100, 100 representing the best imaginable well-being)
- Physician-reported documentation on:
  - Treatments, comorbidities
  - Mobility Index (BASMI), available for n=150 patients

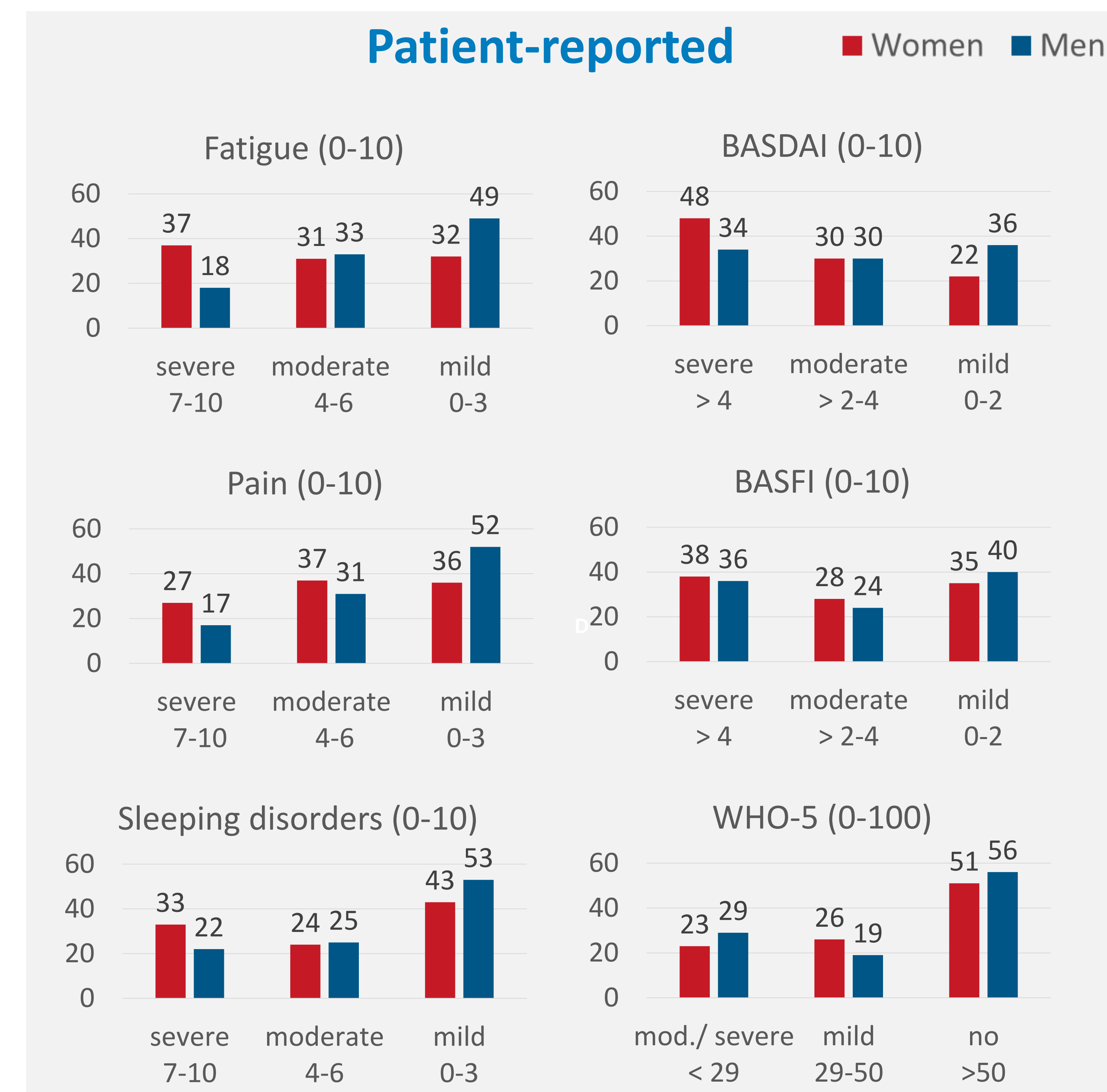
All data were categorized into no/mild, moderate or severe impairment.

- Proportion with BASDAI >4 between 2010 and 2020

## Results

The mean age was 51 years in women and 52 years in men with a disease duration of 19 and 21 years.

Biologic disease-modifying antirheumatic drug use was higher in men (65% vs. 57%) while women received NSAIDs (62%/57%), analgesics (16%/14%) and opioids (10%/9%) slightly more frequently.

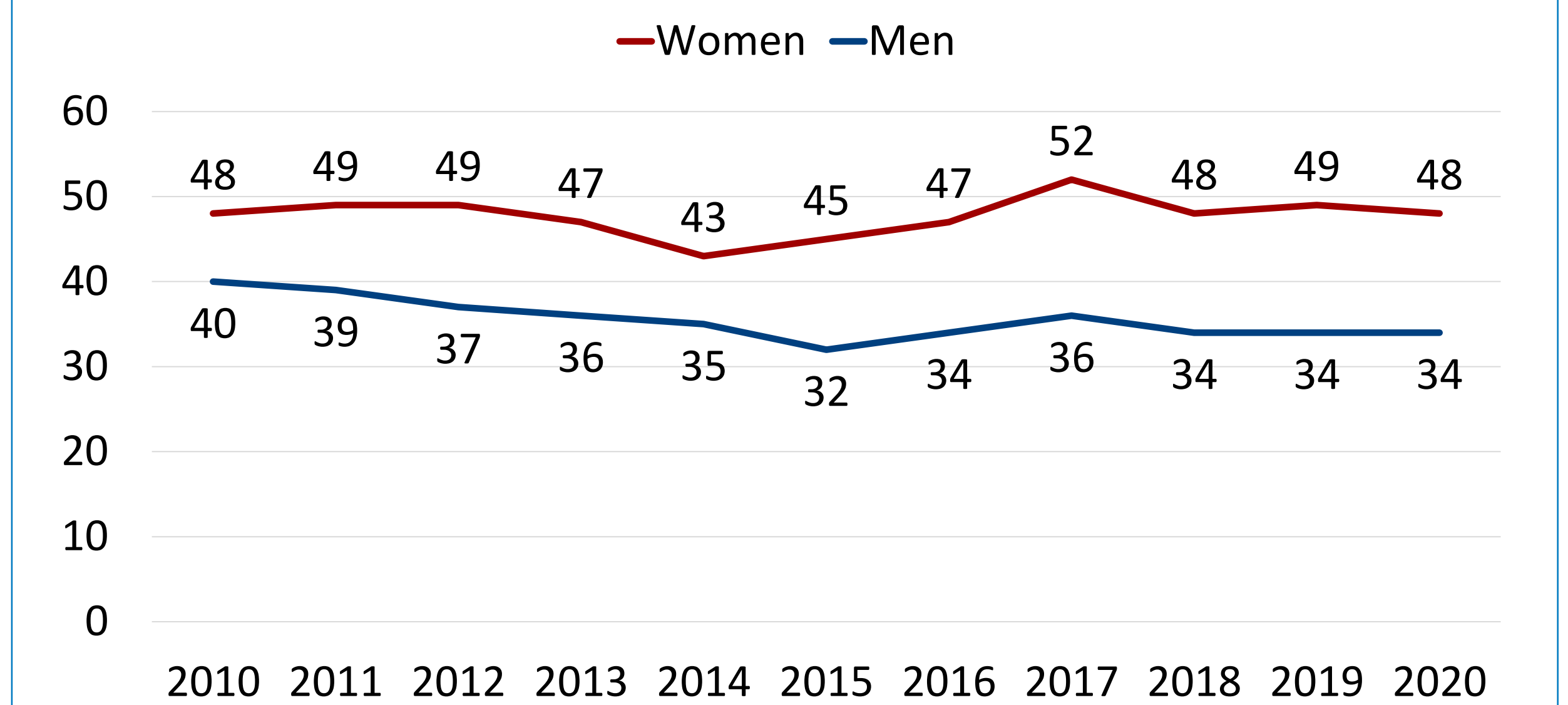


Women more often reported moderate to severe fatigue, pain and sleeping disorders as well as a high disease activity according to BASDAI.

Men scored more frequently severe depressive symptoms according to WHO-5 although physicians reported a depression/mental illness more often in women (10%/6%).

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## Suboptimal control of disease (BASDAI >4) between 2010 and 2020



While the proportion of men who had a BASDAI score > 4 has decreased in recent years (40% to 34%), it remained unchanged for women (48%).

## Conclusions

- Frequent assessment of moderate to severe depressive symptoms and mobility limitations in men and fatigue, pain and sleeping disorders in women show that both sexes have unmet and partially different needs to cope with.
- In women, there has been no change in the self-assessed disease activity by BASDAI over the last 10 years.
- A single patient- or physician-reported instrument cannot adequately reflect the unequally distributed dimensions of disease burden among women and men with axial spondyloarthritis.