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Conclusion: The results demonstrated that a plant-based dietary intervention is both feasible and acceptable for patients with RA. Recruitment challenges underscore the need for strategies to address practical and dietary concerns. Participant feedback suggested potential for optimizing the intervention, including better alignment of the food workshop with meal boxes. Also, the participants would prefer enhanced support and supervision during the intervention. These findings are currently informing the design of a larger-scale randomized controlled trial to further investigate the health effects of a plant-based diet in RA management.

REFERENCES:

[1] Daien C, et al. PMID:34902577.

[2] Ibfelt EH, et al. PMID:29238225.

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POS1495-HPR TRENDS IN WORK PARTICIPATION AMONG PATIENTS WITH INFLAMMATORY RHEUMATIC MUSCULOSKELETAL DISEASES (IRMD): DATA FROM THE GERMAN NATIONAL DATABASE (2010-2023)

Keywords: Quality of life. Health services research. Economics. Observational studies/ registry

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Background: Inflammatory rheumatic musculoskeletal diseases (iRMD) are known to have a substantial impact on work participation. Earlier studies present heterogeneous results on both the level and rates of change in work participation. Fewer studies account for changes in work participation in the general

Objectives: To analyze trends in work participation among patients with iRMD, namely rheumatoid arthritis (RA), axial spondyloarthritis (axSpA), psoriatic arthritis (PsA), systemic lupus erythematosus (SLE), systemic sclerosis (SSc), and ANCA-associated vasculitis (AAV).

Methods: Yearly cross-sectional samples of 17,237 patients with long standing disease from the National Database of the German Collaborative Arthritis Centers, aged < 65 years were analyzed. For each diagnosis, yearly rates of employment, absenteeism and disability pensions were calculated from 2010 to 2023. Population data was used to calculate standardized employment ratios (SER), adjusted for age, sex, federal state, vocational qualification and year (population data was available for the years 2018, 2021 and 2022). SER were also calculated for men and women separately.

Results: Patient characteristics from the year 2023 are reported in Table 1. Over the observed time span, employment increases were found across all diagnoses, namely in RA (53% to 70%), PsA (59% to 73%), SSc (45% to 65%), AAV (43% to 64%), SLE (49% to 65%) and axSpA (65% to 79%). The SER for RA was 0.88 [95%CI 0.86;0.90], axSpA (0.88 [0.84;0.91], PsA (0.88 [0.85;0.91]), SSc (0.83 [0.75;0.91]), SLE (0.76 [0.72;0.80] and AAV (0.73 [0.63;0.83]). In axSpA, PsA and AAV. SER were higher in men while in SLE and SSc men had lower SER than women (Figure 1). Median yearly absenteeism due to the disease decreased by five (RA), two (axSpA), five (PsA), thirteen (SLE), four (SSc), and seven days (AAV) from 2010 to 2023. Except for SSc, the proportion of disability pension receivers decreased for all diagnoses.

		RA	axSpA	PsA	SLE	55c	AAV	All Diagnoses	Missing data
Number of patients	1	1932	650	728	564	159	96	4131	
Sex	Women	1457 (75%)	250 (38%)	387 (53%)	503 (89%)	117 (74%)	59 (60%)	2773 (67%)	4
	Men	475 (25%)	400 (62%)	341 (47%)	61 (11%)	42 (26%)	39 (40%)	1358 (33%)	i.
Age in years, mean (50)		52+/-10	47+/-11	50 +/- 11	44+/-11	51 +/- 10	52 +/- 11	50 +/- 11	
Disease duration	<5 years	461 (24%)	82 (13%)	167 (23%)	67 (12%)	38 (25%)	26 (27%)	841 (21%)	
	5 to 10 years	460 (24%)	121 (19%)	197 (27%)	84 (15%)	43 (28%)	29 (30%)	934 (23%)	42 (1%)
	>10 years	1001 (52%)	434 (68%)	356 (49%)	409 (73%)	72 (47%)	42 (43%)	2314 (57%)	
Professional education	No training	238 (13%)	70 (12%)	90 (14%)	99 (19%)	17 (12%)	5 (6%)	519 (14%)	
	Vocational	1155 (64%)	353 (58%)	387 (59%)	278 (54%)	94 (68%)	50 (56%)	2317 (61%)	315 (8%)
	University	418 (23%)	181 (30%)	183 (28%)	137 (27%)	27 (20%)	34 (38%)	980 (26%)	
c10 years schooling	100000000000000000000000000000000000000	357 (20%)	95 (16 %)	116 (18%)	86 (17%)	34 (24 %)	10 / 11 %)	698 (18%)	304 (750)

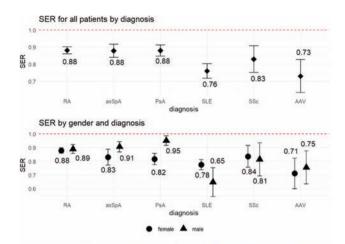


Figure 1: Standardized employment ratio (SER) after adjusting for age, sex, Federal State, and vocational qualification, along with 95%-confidence intervals of the mean. Abbreviations: SER - standardized employment ratio, RA - rheumatoid arthritis, PsA - psoriatic arthritis, SSc - systemic sclerosis, axSpA - axial spondyloarthritis, SLE - systemic lupus erythematosus, AAV - ANCA - associated vasculitis

Conclusion: Since 2010, work participation has improved for patients with iRMDs, as reflected in higher employment, reduced absenteeism and less disability retirement. Compared to other countries, the situation in Germany has remarkably improved, especially among patients with RA. However, patients across all diagnoses are still less often employed than to the general population. REFERENCES: NIL.

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POS1496-HPR

LONG-TERM HIP FUNCTION AND PERFORMANCE: A COMPARATIVE STUDY OF PATIENTS UNDER 40 YEARS OF AGE UNDERGOING TOTAL HIP ARTHROPLASTY AND ASYMPTOMATIC AGE AND GENDER-MATCHED CONTROLS

Keywords: Quality of life, Physical therapy, Physiotherapy, and Physical Activity, Pain, Patient Reported Outcome Measures

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Background: Total hip arthroplasty (THA) is a commonly utilized surgical method to alleviate pain and improve function in advanced-stage hip osteoarthritis. Although it is predominantly used in elderly individuals with lower functional levels, THA is increasingly preferred in younger individuals for various conditions such as inflammatory rheumatologic diseases and developmental dysplasia of the hip that lead to advanced hip degeneration. In the literature, studies on patients undergoing THA under the age of 40 predominantly focus on prosthesis design, implant longevity, and the need for revision. However, for younger