

# Demographic and Clinical Properties and the Current Medical Treatments of Patients Followed as Rheumatoid Arthritis

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**Abstract:** Aim: We aimed to evaluate the demographic and clinical parameters and the current medical treatments of the patients with rheumatoid arthritis (RA) and we investigated the relationship between the disease activity and these properties in RA patients.

Patients and Methods: A hundred patients diagnosed with RA according to American College of Rheumatology (ACR) criteria were included in this study. The demographic characteristics (age, sex, disease duration and duration of biologic agent usage), Visual Analog Scale (VAS) for pain, Patient's Global Assessments (PGA), and Health Assessment Questionnaire (HAQ), were assessed. Erythrocyte sedimentation rate (ESR) and C-reactive protein (CRP) levels were recorded. Evaluation of the disease activity was performed by Disease Activity Score (DAS-28) instrument.

Results: Of the patients, 91% were women. The mean age was  $54.45 \pm 11.0$  (24-78) years. The mean duration of disease was  $10.87 \pm 8.05$  (0.5-30) years. Patients had comorbid diseases such as hypertension (40%), diabetes mellitus (11%), and cardiovascular diseases (4%). 59% of the patients had received combination therapy (one disease-modifying anti-rheumatic drug [DMARD] + glucocorticoid + biologic agent). Two or three DMARDs + biologic agent combination therapy was used in 30 % of the patients, while %11 were receiving only biologic agent therapy. The most frequently used DMARD was methotrexate (65%). There were statistically significant positive correlations between the DAS-28 scores and ESR, PGA, pain VAS, and HAQ scores ( $p < 0.05$ ). There were no statistically significant correlations between DAS-28 scores and CRP, disease duration, duration of biologic agent usage, and age.

Conclusion: In this study, female to male ratio was 10.1 and the most commonly reported comorbid disease was hypertension. Most of the patients were receiving combination therapy. Strong relationships were found between the disease activity scores and ESR, PGA, pain VAS, HAQ scores, while there were no statistically significant relations between the disease activity scores and CRP, disease duration, duration of biologic agent usage and age.

**Key words:** rheumatoid arthritis, disease activity, biologic agents