

The European Map of Axial Spondyloarthritis (EMAS) Living with the Condition



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AIM

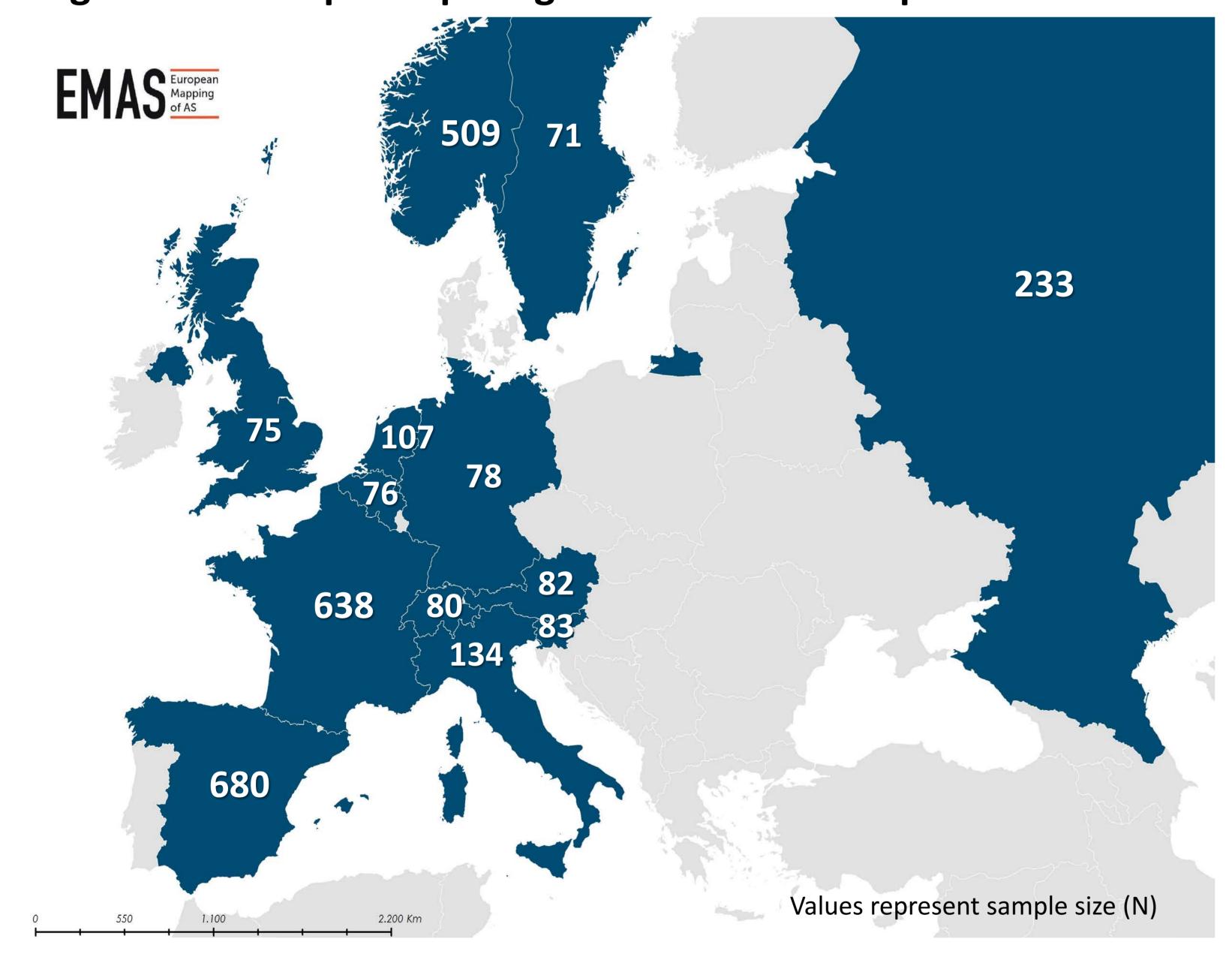
To describe how persons with Axial Spondyloarthritis (axSpA) experience the disease from a physical, psychological and everyday life perspective as well as how they are treated within the European healthcare systems.

METHODS

Cross-sectional survey adapted from the Spanish Atlas of Axial Spondyloarthritis 2017, implemented in 13 European countries between July 2017 and March 2018 (see Figure 1).

Patients aged 18 or older, with a self-reported diagnosis of axSpA and under the care of a physician were recruited through patient organizations or via online panels.

Figure 1. EMAS participating countries and sample size



120 survey items covering

- Socio-demographics
- Diagnosis
- Comorbidities
- Psychological distress
 (GHQ-12)
- Healthcare utilization
- Pharmacologic treatments
- Non-pharmacologic treatments
- Disease activity (BASDAI)
- Physical activity
- Functional limitations
- Work productivity loss
- Patient hopes and fears

Steering Committee

9 axSpA experts made up of clinicians, researchers and patient representatives were selected to validate the results.

RESULTS

N	2,846
Mean age (years)	43.9
Gender (female)	61.3%
Married	67.9%
HLA-B27 positive	73.9%
University educated	48.1%
Employed	53.9%
Member of Patient Support Group	38.9%
Mean Diagnostic Delay (years)	7.2
Mean Disease Duration (years)	17.2
Active Disease (BASDAI >4)	78.1%
Received biological therapy	33.5%
At risk for psychological distress (GHQ-12 >3)	61.5%
Diagnosed with Anxiety	38.6%
Diagnosed with Depression	33.9%

DISCUSSION

EMAS survey participants were characterized by

- Long diagnostic delay
- High patient burden
 - Active disease
 - Frequently reported psychological distress

CONCLUSION

Results from EMAS may contribute to increasing disease awareness as well as improving the standard of care by highlighting important patient unmet needs.

