24 - EVALUATION OF THE QUALITY OF LIFE BY TREATMENT IN PATIENTS WITH RHEUMATOID ARTHRITIS IN A PRIVATE CLINIC IN MARINGÁ – PARANÁ

LEONARDO GEALH
GABRIEL FERNANDO ESTEVES CARDIA
RICARDO ALEXANDRE SPIRONELLO
Universidade Estadual de Maringá, Maringá – Paraná – Brasil
leogealh@yahoo.com

INTRODUCTION

Rheumatoid arthritis (RA) is a joint disease that affects 1 % of the population, increasing considerably in women after 55 years and influencing the quality of life of individuals. This disease leads to decreased in the people ability to temporary or permanent personal activities and to work. It is a systemic inflammatory disease from autoimmune etiology, and characterized by chronic synovitis, with erosive and symmetrical lesions especially in the small joints (PHIARELLO, 2005).

Actually, no cure RA is described and pharmacological treatment is directed to the relieving of the clinical characteristics and functional activity. The treatment will be prescribed according to the stage and severity of the disease, based on the findings of clinical examinations. The principles followed are: patient education, drugs for pain relief and control of inflammation (THOMSON, SKINNER and PIERCE, 2004).

Due to the lack of joint mobility and functions impaired observed in these patients, the absenteeism rate increased about 60 % after 15 years after the onset of RA (SOKKA , 2003; van Vollenhoven, 2010).

People with RA have atrophied muscles compared to healthy subjects. Muscle weakness is attributed to a deficiency of muscle activity, since the pain caused by arthritis leads to inactivity, while joint pain due to inflammation leads to atrophy of the peri-articular muscles. Also, muscle weakness observed in RA promotes contributes to difficulty in ambulation , transfer, lift and carry objects . The weak muscles of the quadriceps and ankle undertakes physical balance , increasing the risk of falls (GRAVES, 2006).

Moreover, the progressive joint damage , hallmark of the disease , may result in loss of functional capacity over the years and decreased quality of life due to damage labor, social and psychological problems arising from the pathology (STRAND ; SINGH 2010).

Thus, the aim of this study was to evaluate the association of drug therapies and non-medication on quality of life in patients with rheumatoid arthritis.

METHODOLOGY

This is an observational study performed in a private clinic of rheumatology from Maringá, Paraná , whose data were collected from the completion of a questionnaire by 15 patients who were already receiving treatment accompanied by rheumatologist clinic for at least 1 year , as well as 5 patients with symptoms of RA that sought for the first consultation , whether they belong to the non- medicated group .

An questionnaire was used as instrument of data collection to assess the perceptions of overall quality of life of the participants (WHOQOL - World Health Organization Quality of Life Group) short version, with 26 questions drawn from the initially developed instrument, WHOQOL - 100 , which measures the perceived quality of life of individuals through questions based on psychometric Likert scale ranging ordinally 1-5 , addressing the Physical (pain , mobility, energy , fatigue, and ability to work) , psychological (self-esteem, positive and negative feelings), social relationship (sexual activity, personal relationships and social support) and environment (financial resources, home environment, health care and social).

Patients with other chronic diseases such as diabetes, hypertension and dyslipidemia, were not excluded since it was not described any association of AR with other chronic diseases (Torigoe&Laurindo , 2006). Thus, the higher incidence of cardiovascular events in RA occurs, in part, independent of coronary risk factors. Currently, it is considered that RA is an independent risk factor for cardiovascular disease, and that a simply overlook to traditional risk factors is not sufficient to assess the risk of a cardiovascular event in RA patients (Wolfe, 2010).

Data collection was conducted in April to June of this year. The data were organized in a spreadsheet in Microsoft Excel and later worked using statistical program package for Social Sciences (SPSS) version 1.8 and anunivariate descriptive analysis was performed.

RESULTS AND DISCUSSION

In this study 20 individuals of both sexes, aged between 36-70 years were participants. The results showed that of the total subjects evaluated , 14 were female with a mean age of 54.2years; six of them were male with a mean age of 58.8 years.

According to the scale proposed by Spinola and Pereira (1976, apud Meneguci et al , 2010) the scores from 0-100 and were classified as: from 0 to 40 characterized as "failure"; from 41 - 70 , " undefined " and above of 71, as "success ". Data showed that among the four areas, the environment and physical appearance were those who showed the worst scores (42.5 and 52.5 respectively) classified as indefinite failure for the treated group. In contrast, the psychological and social relationships domains results showed that scores of 80 and 75, respectively, for the treated group.

In respect to the untreated group it was determined a physical domain score of 40, classified as "failure," none of the aspects about pain, mobility, energy , work capacity and fatigue seem to be disabled in the untreated individuals. Hence, we also observed that the physical aspect represented by the lowest score among the domains is responsible to the individuals with RA symptoms to seek professional medical assistance. In analyzing each answer of the questionnaire (0-5) , we observed that the values of the physical domain for the non-treated group are lower to that of treated group (Figure1).

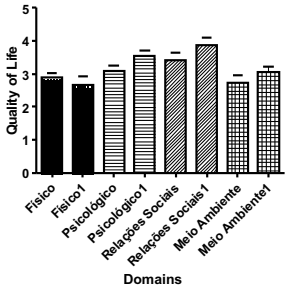


Figure 1: Domains physical, psychological, social relationships and environment assessed by the Quality of Life score obtained by patients treated arthritic (2) or not (1) drug therapy. Domains with indentificados 1 correspontem the untreated group.

In the data analysis of the untreated group, it was found that the domain environment scores were 50 " undefined", psychological 62.5 " undefined" and social relations 73 "success ". The sum of the areas for assessment of WHOQOL for the untreated group was 222.5 when compared to the sum of the 250 treatment group. This results indicated that the individuals using drugs to control the symptoms of AR have better perception in by the WHOQOL analysis when compared to that of without treatment.

Correlating the values found in each domain for both two groups, we observed that in all subjects studied the physical domain was which presented results responsible to the decreased quality of life in these people. On the other hand, the social relations was the domain that had the best perception in the participants, whereas aspects such as sexual activity, personal and social relationships are important to reduce the symptoms of RA. In the psychological domain in the treatment group showed a significant difference when compared to that in the untreated group. None aspects such as self-esteem, positive and negative feelings and confidence were influenced by medication; as well as the support of family and environment aspects that had good scores.

Treatment improves quality of life in the psychological and social relations. In this way, it could be due to a decreasing of pain in these patients, as well as it improves ability to get around and handle objects. These activities related to RA patients were observed in the domain were improved in the untreated group.

Regarding to the psychological domain, it was observed that the treatment significantly improved the psychological activity of these patients, since aspects such as self -esteem, positive feelings, confront of the disease were aspects important aspects in treated patients.

The environment domains composed of aspects that address to the health care, workplace, dissatisfaction related to leisure, among other variables studied. Our data could be linked to the conditions of infrastructure and purchasing capacity of patients, whereas indicated the need for greater investment by the government aimed at improving the environmental factors and conditions.

CONCLUSION

Data indicated that the overall quality of life observed in the treated group of that in the non-treated group, showing the effect of the medication to improve the quality of life of rheumatic patients.

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Address: St. Bogota. No. 1064. Morangueirinha.
Maringá - PR. CEP: 87040-120
leogealh@yahoo.com

EVALUATION OF THE QUALITY OF LIFE BY TREATMENT IN PATIENTS WITH RHEUMATOID ARTHRITIS IN A PRIVATE CLINIC IN MARINGÁ – PARANÁ

ABSTRACT

Rheumatoid arthritis (RA) is a joint disease that affects 1 % of the population , increasing significantly in women from the age of 55 and directly influencing the individuals quality of life. The aim of this study was to evaluate the association of drug or non-medication therapies on the quality of life of patients with RA. This is an observational study performed in a private clinic of rheumatology in Maringá , Paraná . Data were collected from interviews of 15 patients drug-treated and 5 patients with symptoms of RA, but not yet on pharmacological treatment, using a questionnaire (WHOQOL - gla) . Interviews were conducted between April and June 2013 and the data were organized and analyzed by statistical program SPSS 1.8. The results indicated that the treated group showed a total sum of 250 in overall aspects of quality of life to that compared to non-treated group, which were 222.5 . The best scores were found in the psychological and social relations in the treated group (80 and 75, respectively) and the lowest scores were found in the physical environment and the non-treated group (40 and 50 respectively). The physical domain

that evaluates aspects such as pain, mobility, energy, fatigue and mobility to work, showed a significant impact on quality of life of these individuals. Therefore, the overall quality of life presented by treatment group are highest when compared to that of non-treated group, showing an improving in the quality of life by drug treatment.

KEYWORDS: Quality of life, rheumatoid arthritis, drug treatment.

EVALUATION DE LA QUALITE DE VIE POUR LE TRAITEMENT DE PATIENTS ATTEINTS D'ARTHRITE RHUMATOÏDE TRAITÉS DANS UNE CLINIQUE PRIVÉE DANS LA MUNICIPALITÉ DE MARINGA - PARANÁ

RÉSUMÉ

L'arthrite rhumatoïde (AR) est une maladie commune qui affecte 1 % de la population, ce qui augmente de manière significative chez les femmes de moins de 55 ans et d'influencer directement la qualité de la vie des ces individus. Le but de cette étude était d'évaluer l' association de traitements médicamenteux ou non médicamenteux sur la qualité de vie des patients atteints de AR . Il s'agit d'une étude observationnelle réalisée dans une clinique privée de rhumatologie à Maringá, Paraná . Les données ont été recueillies lors d'entretiens de 15 patients traités par le médicament et 5 patients présentant des symptômes de l'arthrite rhumatoïde, mais pas encore sur le traitement pharmacologycal, à l'aide d'un questionnaire (WHOQOL - GLA). Les entrevues ont été réalisées entre Avril et Juin 2013 et les données ont été organisées et analysées par le programme statistique SPSS 1.8. Les résultats indiquent que le groupe traité a montré une somme totale de 250 dans les aspects globaux de qualité de vie à ce rapport au groupe non traité , qui était de 222,5. Les meilleurs scores ont été trouvés dans les relations psychologiques et sociaux dans le groupe traité (80 et 75 , respectivement) et les scores les plus faibles ont été trouvés dans l'environnement physique et le groupe non traité (40 et 50 respectivement). Le domaine physique qui permet d'évaluer des aspects tels que la douleur, la mobilité, l'énergie , la fatigue et la mobilité au travail, a montré un impact significatif sur la qualité de vie de ces personnes. Par conséquent, la qualité de vie globale présentée par le groupe de traitement sont les plus élevés par rapport à celle du groupe non traité , montrant une amélioration de la qualité de vie par un traitement médicamenteux.

MOTS-CLÉS: qualité de vie, la polyarthrite rhumatoïde, le traitement médicamenteux.

EVALUACIÓN DE LA CALIDAD DE VIDA PARA EL TRATAMIENTO DE PACIENTES CON ARTRITIS REUMATOIDE TRATADA EN UNA CLÍNICA PRIVADA EN EL MUNICIPIO DE MARINGÁ – PARANÁ

RESUMEN

La artritis reumatoide (AR) es una enfermedad común que afecta al 1% de la población, lo que aumenta significativamente en mujeres menores de 55 e influir directamente en la calidad de vida de estas personas. El propósito de este estudio fue evaluar la asociación de los tratamientos farmacológicos o sin tratamiento con drogas en lacalidad de vida de los pacientes con AR. Se trata de un estudio de observación en una clínica privada de reumatología en Maringa, Paraná. Los datos se obtuvieron de entrevistas a 15 pacientes tratados con el fármaco y 5 pacientes con síntomas de la artritis reumatoide, pero aún no en el recibe tratamiento farmacológico, un cuestionario (WHOQOL - GLA). Las entrevistas se realizaron entre abril y junio de 2013 y los datos fueron organizados y analizados mediante el programa estadístico SPSS 1.8. Los resultados indican que el grupo de tratamiento mostróun total de 250 en los aspectos globales de lacalidad de vida en comparación con el grupo no tratado, que era 222,5. Los mejores resultados se encuentran en las relaciones psicológicas y socialesenel grupo tratado (80 y 75, respectivamente) y las puntuaciones más bajas se encontraron en el medio físico y el grupo no tratado (40 y 50 respectivamente).El dominio físico que evalúa aspectos tales como el dolor, la movilidad, la energía, la fatiga y la movilidad en el trabajo, mostró un impacto significativo en lacalidad de vida de estas personas. Por lo tanto, lacalidad de vida en general por grupo de tratamiento son más altos en comparación con el grupo no tratado, que muestra una mejora en lacalidad de vida a través de tratamiento de drogas.

PALABRAS CLAVE: calidad de vida, La artritis reumatoide, el tratamiento farmacológico.

AVALIAÇÃO DA QUALIDADE DE VIDA PELO TRATAMENTO DE PACIENTES PORTADORES DE ARTRITE REUMATÓIDE ATENDIDOS EM UMA CLÍNICA PARTICULAR NO MUNICÍPIO DE MARINGÁ – PARANÁ

RESUMO

A artrite reumatóide (AR) é uma doença articular que compromete 1% da população brasileira, aumentando consideravelmente em mulheres a partir dos 55 anos, influenciando diretamente a qualidade de vida dos indivíduos. O objetivo deste trabalho foi avaliar a associação das terapias medicamentosa e não-medicamentosa na qualidade de vida de portadores de AR. Trata-se de um estudo observacional, transversal realizado em uma clínica particular de reumatologia do município de Maringá, Paraná. Os dados foram coletados a partir da entrevista de 15 pacientes que já estavam em tratamento, e de 5 pacientes com sintomatologia de AR, mas que ainda não se encontravam em tratamento, por meio de questionário (WHOQOL-brev). Os questionários foram aplicados entre Abril e Junho de 2013 e os dados foram organizados e analisados no programa Microsoft Excel e SPSS 1.8. Os resultados indicaram que, o grupo em tratamento apresentou somatório de 250 na qualidade de vida geral em comparação ao grupo não-tratado que foi de 222,5. Os melhores escores foram encontrados nos domínios psicológico e relações sociais do grupo tratado (80 e 75 respectivamente) e os resultados mais baixos foram encontrados nos domínios físico e meio-ambiente do grupo não-tratado (40 e 50 respectivamente). O domínio físico que engloba aspectos como dor, mobilidade, energia, fadiga e mobilidade para o trabalho, gerou significativo impacto na qualidade de vida destes indivíduos. Portanto, o índice geral de qualidade de vida apresentados pelo grupo em tratamento são maiores em relação ao grupo não-tratado, evidenciando a ação e o efeito da medicação que o primeiro grupo administra.

PALAVRAS-CHAVE: Qualidade de vida, artrite reumatóide, tratamento medicamentoso.