

A BRIEF OF

THE RHEUMATOID ARTHRITIS SITUATION

IN COLOMBIA 2021



Abbreviations

RA:	Rheumatoid arthritis
DM:	Diabetes mellitus
HBP:	High blood pressure
CRP:	C Reactive Protein
SD:	Standard deviation
ESR:	Erythrocyte sedimentation rate
CI:	Confidence interval
IQR:	Interquartile range
DAS28:	Disease Activity Score-28
HAQ:	Health Assessment Questionnaire
DMARD:	Disease-modifying anti-rheumatic drugs
bDMARD:	Biological disease-modifying anti-rheumatic drugs
sDMARD:	Synthetic disease-modifying anti-rheumatic drugs

Period: July 1st, 2020 to June 30st, 2021

During the period there were

3,614 new cases of RA.

It represents a decrease of

17,35% compared to 2020.



The highest proportion of these cases lived in the Central region, followed by the Pacific and Bogotá, C.D.

The mean age of incident RA cases was **53,08** (DE ±14,67)



59.51% of the new cases were affiliated to the third party insurance, followed by subsidized insurance (36.77%).

The most frequent **comorbidities** at the time of **diagnosis** were



HBP (21,80%)



DM (6,78%)



osteoporosis (4,98%)



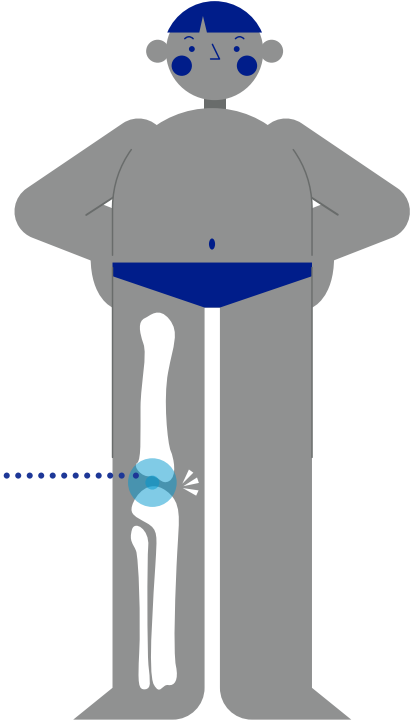
The mean time of disease progression at diagnosis in incident cases was 45.70 weeks (SD ± 24.65).



An elevated ESR was identified in 42.67% of incident cases, elevated CRP in 34.23%, positive RF in 58.05% and anti-CCP in 48.40%.

Abstract

Chapter 1. Characterization of rheumatoid arthritis incident cases



RA: rheumatoid arthritis
DM: diabetes mellitus
HBP: high blood pressure
CRP: C Reactive Protein
SD: standard deviation
ESR: erythrocyte sedimentation rate



Period: July 1st, 2020 to June 30st, 2021

99,858 prevalent cases of RA were identified, representing an

increase of 10,79% compared to 2019 (n=90,135)



The Central region, Bogotá C.D, and the Pacific informed the highest number of prevalent cases.

The mean age of the prevalent cases of RA was **53,13** (DE ± 13,38).



68.20% of the prevalent cases were affiliated to the third party insurance, followed by subsidized insurance (24.71%).



The female: male ratio was 5.25 to 1.

The most frequent comorbidities in prevalent cases were



HBP (33,38%)



Osteoporosis (19,30%)



DM (12,04%)



Sjögren's syndrome (9,98%)



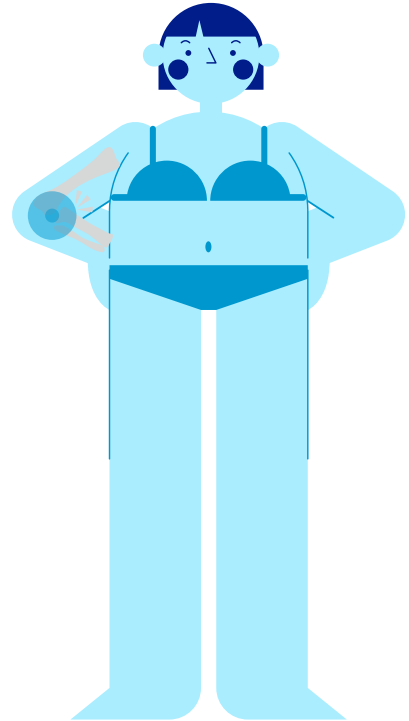
The mean time of disease progression in prevalent cases was 8.83 years (SD ± 8.47).



Over 40% of prevalent cases had overweight grade I or II obesity.

Abstract


Chapter 2. Characterization of prevalent cases of people with rheumatoid arthritis




RA: rheumatoid arthritis
DM: diabetes mellitus
HBP: high blood pressure
SD: standard deviation


Period: July 1st, 2020 to June 30st, 2021

The **national** age-standardized **incidence** of RA was **9.66** per 100,000 people

 The incidence was higher in the Pacific, Bogotá, C.D, and the Central regions, exceeding the national estimate.

The **national** age-standardized **prevalence** was **0,45** per 100 inhabitants

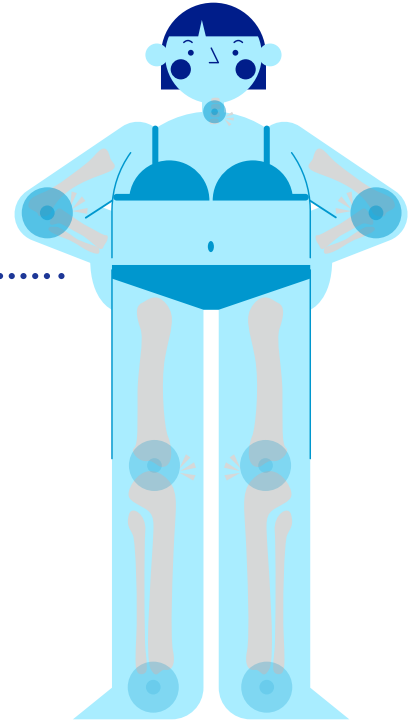
 The regions with the highest prevalence were Bogotá, C.D, and the Pacific, with 0.43 and 0.30 cases per 100 people, respectively

 Age standardized mortality increased in people with RA in 2021 compared to 2020 (8.52 and 4.18 per 100,000 inhabitants, respectively).

Among **women**, the incidence **was higher** than the national estimate (**14.67** per 100,000 women).

Abstract

Chapter 3. Morbidity and mortality of people with rheumatoid arthritis



RA: rheumatoid arthritis



Period: July 1st, 2020 to June 30st, 2021

In the current period,

52,06 %

of people with RA received medical services from a rheumatologist



The subsidized insurance had higher percentage of cases being monitored by rheumatology (63.62%) compared to the third party insurance (48.22%).



50% of the patients assessed had a DAS-28 under 2.30 (RIC: 1.60 - 3.20) indicating remission of the disease.



There were 321 hospitalizations for RA complications or related cardiovascular events, representing a decrease of 37% compared to the previous period.



The hospitalization rate was higher in the age group 80 and older with 7.3 per 100,000 people.

3,48 %

(n= 3.473)
of RA cases

required at least one joint

replacement

after diagnosis

and the most frequently were



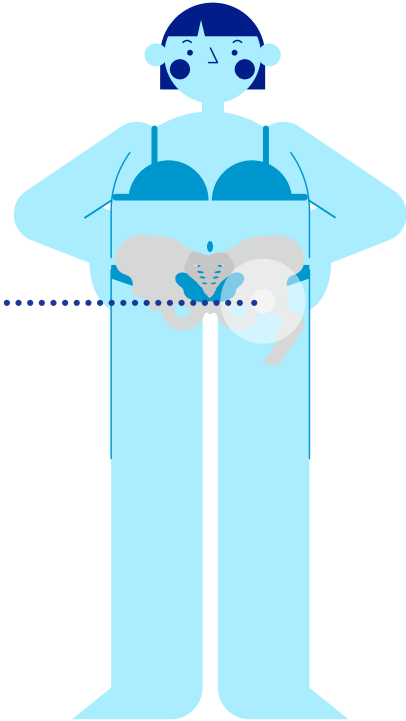
knee



hip

Abstract

Chapter 4. Management of rheumatoid arthritis



RA: rheumatoid arthritis

DAS28: Disease Activity Score-28

HAQ: Health Assessment Questionnaire

IQR: interquartile range



40.04% of the new cases and 30.10% of the prevalent cases had a normal functional status, measured by HAQ.

Period: July 1st, 2020 to June 30st, 2021

7.00% of incident cases and 5% of prevalent cases, required **combined analgesic therapy**

15,94 % of the patients receiving **glucocorticoids** required doses **≥ 10 mg/day** for more than a month



The most frequently prescribed medications at the start of treatment in the incident and prevalent cases were corticosteroids, followed by non-opioid analgesics and NSAIDs.



The use of bDMARD was infrequent in the incident cases. When required the most used drugs were rituximab and abatacept.



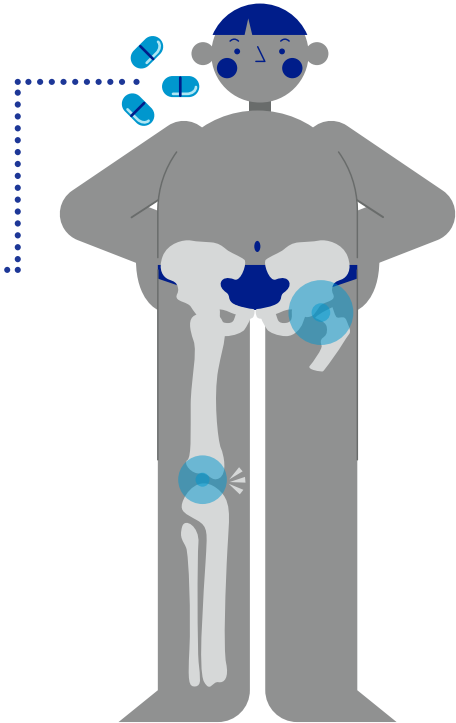
Methotrexate was the drug most frequently prescribed for the incident cases (75.62%), followed by chloroquine (23.05%). Both drugs were also the most frequent combination, followed by leflunomide-methotrexate.



In the prevalent cases, methotrexate (51.28%), leflunomide (36.60%) and chloroquine (13.90%) were the most frequently prescribed sDMARD. Methotrexate-leflunomide was the combination most commonly used.

Abstract

Chapter 5. Pharmacological treatment in people with RA



RA: rheumatoid arthritis
DMARD: disease-modifying anti-rheumatic drugs
bDMARD: biological disease-modifying anti-rheumatic drugs
sDMARD: synthetic disease-modifying anti-rheumatic drugs







The most used bDMARD in prevalent cases were etanercept, abatacept, rituximab, tocilizumab, and certolizumab. Bogotá C.D, Antioquia and Valle del Cauca were the departments that most frequently used these medications.

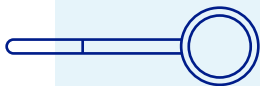


Period: July 1st, 2020 to June 30st, 2021



All types of insurance achieve a coverage with **DMARD** higher than **70%** in incident cases.

-  Opportunity trends regarding time to specialist care, the diagnosis and treatment had a subtle decrease compared to the previous period, without achieving the goal of fulfillment.
-  TB screening before to starting bDMARDs or specific target synthetics had low compliance in all regions of Colombia.
-  All regions had poor compliance in the performance of acute-phase reactants and radiological assessment at the time of diagnosis.
-  The regions with the higher proportion of cases that had radiographic assesment during diagnosis were the Caribbean (40.23%) and Pacific (40.12%) regions.

The concomitant use of **methotrexate** and folic acid, **coverage of > 90%**

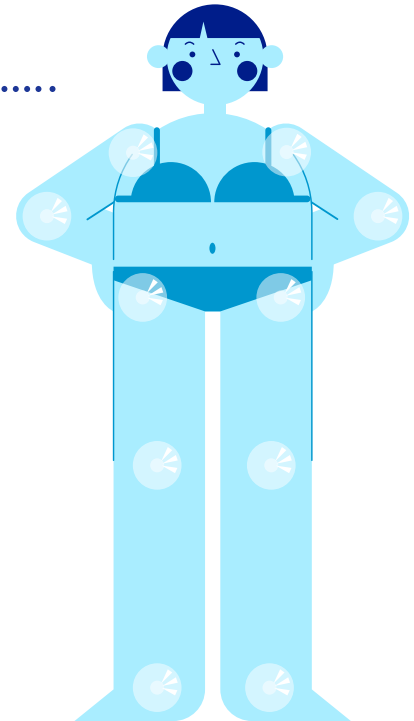


has been maintained for 3 periods.

-  Compared to the previous period, there was a mild increase in the proportion of incident and prevalent cases that accessed to occupational or physical therapy. However, it is stil far from the national target (70%).
-  The proportion of cases in remission and with low activity increased compared to the previous period. However, both indicators are still below the target.

Abstract

Chapter 6. Risk management indicators






DMARD: disease-modifying anti-rheumatic drugs
TB: tuberculosis

Period: July 1st, 2020 to June 30st, 2021

The incidence of RA in the period 2021

decreased by

17,53 % compared to the previous period

-  In all regions of Colombia, except the Amazon/Orinoco, the incidence of RA decreased compared to the previous period.
-  The number of incident cases drastically decreased from March to June 2020, when the isolation measures started in Colombia.
-  After June 2020 the number of new cases diagnosed gradually increased near to the pre-pandemic trend.

More than

30 %





did not have **DAS-28**



of the **incident**

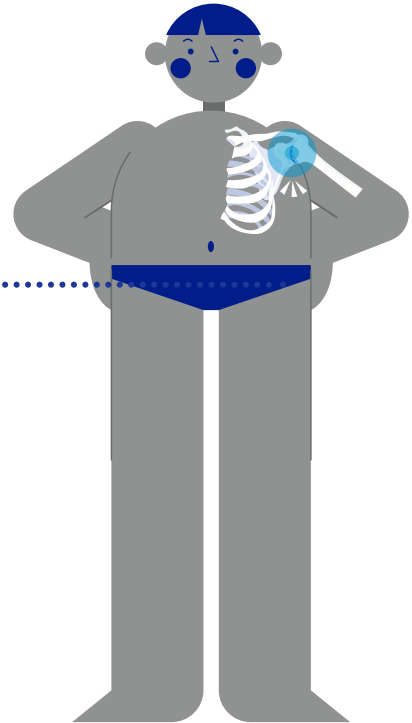
and 60% of the prevalent patients

assessment in the last six months.

-  Among the assessed patients, there was a mild decrease in the proportion of patients in remission with an increase in the number of patients with moderate and high activity. However this varies between regions.
-  Clinical assessment with DAS-28 decreased from March 2020 and remained low throughout the calendar year. In contrast, HAQ monitoring fell at the beginning of the sanitary emergency but increased towards the end of the report (June 2021).

Abstract

Chapter 7. Effect of the COVID-19 sanitary emergency in AR management



RA: rheumatoid arthritis



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