

Objective

To investigate the influence of depressive symptoms on disease activity and remission, 6 months after starting a new therapy.

- 1,228 patients starting a new systematic antirheumatic therapy
- Exposure: baseline depressive symptoms (Well-Being Index score (WHO-5)) at start of therapy
- Outcome: ASDAS low disease activity (LDA) or inactive disease (ID)
- Analysis: directed acyclic graph (DAG) -> logistic regression

Key findings

Depressive symptoms independently influence patients' chance to achieve remission.

Screening for depression is important to improve outcomes.

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Table 1: Baseline characteristics

Parameter	None/mild (N=829)	Moderate/severe (N=339)
Age	44.1 yrs	44.2 yrs
Women	44%	46%
School, ≥ 10 years	84%	75%
Obese (BMI ≥ 30)	24%	31%
≥ 3 Comorbidities	18%	24%
Known Depression	5%	13%
Fibromyalgia	1.7%	3.5%
Symptom duration	7.0 yrs	6.3 yrs
CRP ≥ 5 mg/l	51%	58%
ASDAS (CRP)	2.6	3.4
Disease activity	5.3	6.0
BASDAI	4.1	6.0
BASFI	3.2	5.3
Patient Pain	5.1	7.0

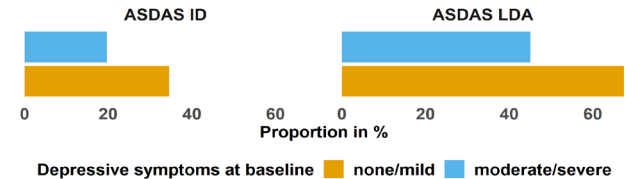


Figure 1: Proportion of patients reaching LDA and ID by baseline depressive symptoms

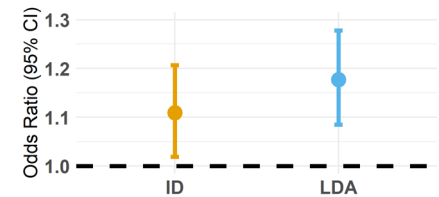


Figure 2: Effect of baseline depressive symptoms on remission after 6 months

Thank you to all participating rheumatologists!