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**DEPENDENCY BETWEEN QUALITY OF LIFE AND DISEASE DURATION IN  
PATIENTS WITH RHEUMATOID ARTHRITIS**

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**Introduction.** Rheumatoid arthritis (RA) is a chronic systemic disease of connective tissue with unknown etiology. It has complicated autoimmune pathogenesis, characterized by progressive erosive polyarthritis with destruction of the joint. RA is the most common disease among chronic inflammatory joint diseases and takes one of the central places among rheumatic disorders.

According to the World Health Organization, the average prevalence of RA for 2018 is 1% of the population. The disease manifests in people of working age, 30-40 years. On average women suffer 4 times more often. The life expectancy of patients with RA is 7-10 years shorter and the death rate 2.5 times higher than in the population. About 50% of RA patients lose their ability to work within 3-5 years from the onset of the disease, which is a significant medical and social problem.

**Purpose of the study:** to evaluate the quality of life in patients with different rheumatoid arthritis duration.

**Materials and methods.** 34 female patients with different disease duration were interviewed. All patients were divided into 3 groups: the first group included patients with disease duration from 1 to 3 years - 14 people, in the second group - with disease duration from 4 to 7 years - 11 people, in the third group - more than 8 years - 9 people.

There were also 3 age groups: 28-43 years - 11 people, 44-55 years - 15 people, 56-69 years - 8 people. A European EuroQol-5D questionnaire was used, which included 6 blocks for assessing of life quality: 1 - mobility, 2 - self care, 3 - daily activities, 4 - pain and discomfort, 5 - anxiety and depression, 6 - health scale on which patients rated their condition from 0 to 100 now, when they felt the best and the worst. For greater homogeneity of the patients, only patients who underwent the same supportive therapy were included in the study.

**Results.** The study found a link between poor quality of life and duration of the disease in women and no correlation between age and poor quality of life. In the first duration group (1-3 years of RA), mobility problems were in 78% of patients, problems with self-care - in 9%, disruption of daily activities- in 46%, pain and discomfort - in 87%, mental disorders - 10%.

In the group with disease duration of 4 to 7 years, 79% of patients had mobility problems, problems with self-care - 8%, disruption of daily activities- 58%, pain and discomfort - 80% and mental disorders - 7%.

In the group with duration of more than 8 years, impaired mobility had 75% of patients, problems with self-care - 8%, disruption of daily activities - 70%, pain and discomfort - 84%, mental disorders - 5%.

100% of reported patients admitted state deterioration compared to the best feeling and improvement over the worst after treatment - which is in favor of the effectiveness of supportive therapy.

**Conclusion.** An assessment of the quality of life in patients with rheumatoid arthritis is necessary to adjust supportive therapy and prevent complications, improve the social, psychological and physical adaptation of patients, and determine further tactics for managing patients with rheumatoid arthritis.