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ASSESSMENT OF QUALITY OF LIFE IN PATIENTS WITH RHEUMATOID ARTHRITIS IN PUNE CITY: AN OBSERVATIONAL STUDY

Medicine

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ABSTRACT

Background: The quality of life (QOL) is crucial for patients especially for those suffering from chronic diseases like autoimmune diseases, chronic inflammatory diseases etc. There has been significant impact of these types of diseases on quality of life of patients. The present study was undertaken to assess the quality of life of patients of Rheumatoid Arthritis in one of the hospitals in Pune City.

Methodology: This was an Observational Cross Sectional study, conducted at one of the randomly selected tertiary care hospitals in Pune City. Twenty five known cases of rheumatoid arthritis patients attending the rheumatology clinic at identified hospital were included as study participants.

Results: After calculating QOL domains scores, Role functioning/physical domain had the highest mean score for QOL 28.78 with SD of 12.521. General health perception and bodily pain domains remained the lowest score of 19.54 with SD of 11.364.

Conclusion: Rheumatoid Arthritis has an influential impact on the health-related quality of life of patients. The QOL in RA patients was high about role limitations due to physical problems, role limitation/emotional and it was poor in bodily pain as well as in general health perceptions.

KEYWORDS

Patients, Quality of life, Rheumatoid arthritis

Introduction

World Health Organization (WHO) defines health as a "state of complete physical, mental, and social well-being and not merely an absence of disease and infirmity.[1] The quality of life (QOL) is crucial for patients especially for those suffering from chronic diseases like autoimmune diseases, chronic inflammatory diseases etc. There has been significant impact of these types of diseases on quality of life of patients.

One of the most accepted definition given by WHO for QOL is "the individual perceptions of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns."[2]

Rheumatoid arthritis (RA) is an autoimmune disease that causes chronic inflammation of the joints. It is multisystem inflammatory disease which can lead to functional disability as well as psychological symptoms.[3] This may have a negative influence on daily activities with overall impact on quality of life of patients.[4] Rheumatoid arthritis affects all age groups, but is more common among 40 to 60 years of age group. [5] The prevalence of RA is 0.5 to 1% European and North American countries with lowest rate (0.2-0.3) of disease is in Asia.[5]

The present study was undertaken to assess the quality of life of patients of Rheumatoid Arthritis in one of the hospitals in Pune City.

Methodology

This was an Observational Cross Sectional study, conducted at one of the randomly selected tertiary care hospitals in Pune City. Twenty five known cases of rheumatoid arthritis patients attending the rheumatology clinic at identified hospital were included as study participants. Informed consent was obtained from study participants after explaining the purpose of study. A self-administered questionnaire consisting of 40 questions on QOL was given to participants and responses were collected. Face to face interview technique was used to collect information from illiterate participants. Entire data was entered into Microsoft Office Excel Sheet and analysed by using SPSS 22 version.

Results and Discussion

Of 25 study participants, 16 (64%) were males and remaining 9 (36%) participants were females. Four (16%) participants were illiterate. Sixteen (64%) participants were educated up to primary level and rest of 5 (20%) were graduate. All study participants were in age group of 46- 58 years of age. Around 68% of participants had disease duration between 5-10 years and 32 % more than 10 years. About source of treatment, 64% of them had received treatment from both allopathy and Ayurveda for RA and 24% of them had taken only allopathy treatment.

Table 1: Demographic Profile of Study Participants (n-25)

Variables		No of participants (%)
Gender	Males	16 (64%)
	Females	09(36%)
Marital status	Married	20(80%)
	Single	02(8%)
	Widowed	03 (12%)
Job	Employed	16(64%)
	Business	08(32%)
	Unemployed	01(4%)
Income	< 200000per annum	18(72%)
	>200000 per annum	07 (28%)
Family type	Nuclear	14(56%)
	Joint	11(44%)

QOL assessment does not depend only on treatment aspects but also on other factors like socio-demographic elements, values, expectations, needs, attitudes and methods of valuing a disease situation and adaptation process of a patient to a new, changing situation 6, 7 Therefore holistic approach is needed considering all these health parameters.

After calculating QOL domains scores, Role functioning/physical domain had the highest mean score for QOL 28.78 with SD of 12.521. General health perception and bodily pain domains remained the lowest score of 19.54 with SD of 11.364. There is a statistically significant association between patients with low income and those with good income for (physical functioning, role functioning/physical, role functioning/emotional, social functioning, pain). Statistical significant association was also observed between mean QOL domains, physical functioning (P=0.011), marital status (P=0.021). Pain (P=0.004), role functioning/physical (P=0.001), role functioning/emotional (P=0.002), energy/fatigue & emotional well-being (P=0.011),

Conclusion

Rheumatoid Arthritis has an influential impact on the health-related quality of life of patients. The QOL in RA patients was high about role limitations due to physical problems, role limitation/emotional and it was poor in bodily pain as well as in general health perceptions.

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