AN EVALUATION OF QUALITY OF LIFE IN AMBULATORY DISCORDANCE OF PATIENT AND PHYSICIAN HEALTH STATUS CONCERNS IN SYSTEMIC LUPUS ERYTHEMATOSUS

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Background and aims In the context of systemic lupus erythematosus (SLE), patient and physician discordance related to disease control and historical treatments is under-recognized. We aimed to quantify the burden of patient and physician discordance using the Medical Outcomes Study 36-Item Short-Form Health Survey (SF-36) and the Patient Health Questionnaire (PHQ-9).

Methods Patients with SLE were recruited from a tertiary care rheumatology clinic. SF-36 and PHQ-9 questionnaires were completed by patients and their treating physicians. Agreement between patient and physician responses was assessed using percentage agreement and Lin’s concordance correlation coefficient.

Results 275 patients and 56 physicians participated. The percentage of concordant responses was 88.3% (76.2% for SF-36 and 97.7% for PHQ-9). Lin’s concordance correlation coefficient was 0.95 (0.98 for SF-36 and 0.90 for PHQ-9).

Conclusions Patient and physician discordance is common in SLE, impacting multiple aspects of disease control and care. Further studies are needed to identify factors contributing to discordance and develop strategies to improve patient-physician communication.