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Original article

Assessing the magnitude of osteoarthritis disadvantage on people's lives: the MOVES study



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ABSTRACT

Introduction: Osteoarthritis (OA) is one of the ten most disabling diseases in developed countries and one of the leading causes of pain and disability over the world. Early diagnosis increases the likelihood of preventing disease progression.

Objectives: To estimate the prevalence of self-reported osteoarthritis and quality of life in Portuguese adults with 45 or more years old.

Methods: Observational, cross-sectional study, implemented in households by face-to-face interview.

Results: 1039 subjects with mean age of 62 years and 54.2% female were included. The prevalence of self-reported osteoarthritis was 9.9%. Knees and hands were the most frequent site of disease. The prevalence of OA was higher in women and in participants without professional activity. Presence of OA was higher in participants with comorbidities. Most subjects have done some treatment at some point in time for this disease: 94.5% had drug therapy, 49.5% physiotherapy, and 19.8% physical activity. Pain was associated with height, with some disease locations specifically neck, lower spine and shoulders, SF12 scores of quality of life, and measurements of impact in daily living, severity of disease and disability. The impact of OA in daily living was greater in subjects that had been on sick leave or stopped working due to OA, had worse physical and mental health, and with more severe of disease. **Conclusion:** This study confirmed that osteoarthritis is a very relevant disease with a high potential impact on quality of life, function and work ability and because of its prevalence with a very high growing social impact.

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Avaliação da magnitude da desvantagem da osteoartrite na vida das pessoas: estudo MOVES

R E S U M O

Palavras-chave:

Osteoartrite

Qualidade de vida

Auto-relato

Introdução: A osteoartrite (OA) é uma das dez doenças mais incapacitantes nos países desenvolvidos e uma das principais causas de dor e incapacitação no mundo. O diagnóstico precoce aumenta a probabilidade de prevenção da progressão da doença.

Objetivos: Estimar a prevalência de osteoartrite auto-referida e a qualidade de vida em adultos portugueses com 45 ou mais anos de idade.

Métodos: Estudo observacional, transversal, implementado em domicílios por entrevista interpessoal.

Resultados: Foram incluídos no estudo 1039 indivíduos com idade média de 62 anos, sendo 54,2% do gênero feminino. A prevalência de osteoartrite auto-referida foi de 9,9%. Os joelhos e as mãos foram o local mais freqüente da doença. A prevalência de OA foi maior em mulheres e em participantes sem atividade profissional. A presença de OA foi maior em participantes com comorbidades. A maioria dos indivíduos já tinham passado por algum tratamento em alguma ocasião de suas vidas para esta doença: 94,5% tiveram tratamento farmacológico, 49,5% fisioterapia, e 19,8% atividade física. A dor estava associada com a estatura, com alguns locais da doença, especificamente pescoço, coluna lombar e ombros, pontuação do SF12 para qualidade de vida, e medidas de impacto no cotidiano dos participantes, gravidade da doença e incapacitação. O impacto da OA no dia-a-dia foi maior em indivíduos que tinham gozado licença por doença ou que pararam de trabalhar por causa da OA, apresentavam-se com pior saúde física e mental, e exibiam maior gravidade da doença.

Conclusão: Este estudo confirmou que a osteoartrite é uma doença muito relevante, com impacto potencial elevado na qualidade de vida, no funcionamento e na capacidade para o trabalho e, por causa de sua prevalência, exerce um impacto social muito elevado e crescente.

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Introduction

Osteoarthritis (OA) is the most important rheumatic disease, which affects all the components of joints, mainly the articular cartilage.¹ OA is one of the ten most disabling diseases in developed countries,¹ and is thought to be the most prevalent chronic joint disease.² It is, by far, the most common form of arthritis and one of the leading causes of pain and disability worldwide.^{1,3}

Pain is the main symptom of patients with OA,⁴ with significant impact on functional ability, causing severe disability in activities of daily living, and being associated with considerable loss in productivity and decreased quality of life.⁴⁻⁷ Considered an age-related disease, it is most likely to affect joints that have been continually stressed throughout the years, including knees, hips, small hand joints, and lower spine region.^{1,4,8}

Worldwide, it has been estimated that 9.6% of men and 18.0% of women aged over 60 years have symptomatic osteoarthritis.¹ The main risk factors associated to OA are age, gender (more frequent in women), obesity, metabolic or endocrine diseases, trauma or joint overload, and also genetic factors.⁸⁻¹⁰ However, the importance of individual risk factors varies, and even differs, between joint sites.⁸ Many lifestyle risk factors, however, are reversible or avoidable which has important implications for its prevention. Early diagnosis

increases the likelihood of preventing disease progression to situations of greater disability.

Because patients frequently disregard pain and symptoms, OA tends to progress almost silently. Patients should know their disease and have a prevention plan, avoiding mechanisms that may intensify progression of disease and using pharmacological treatments that may prevent the structural degradation of the joint.

The MOVES study aimed to estimate the prevalence of self-reported osteoarthritis and its impact on the quality of life, in Portuguese adults with 45 or more years old. In this study, we attempted to compare subjects with and without self-reported OA in some of the parameters that may contribute to a worse quality of life and loss of functionality.

Methods

This observational cross-sectional study took place in 17 municipalities of mainland Portugal between September 27th and October 26th, 2011. To ensure representativity of the population, the sample was stratified by region (Norte, Centro, Lisboa, Alentejo and Algarve, age and gender, according to estimates of National Statistics Institute (Demographic Statistics 2008). The study was implemented in households, with street selection by random procedure. Questionnaires were administered by face-to-face interview, by specifically trained

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