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SURVEY OF DIETARY SUPPLEMENT USE AND VACCINATION STATUS AMONG RHEUMATOID ARTHRITIS PATIENTS DURING THE COVID-19 PANDEMIC

BACKGROUND AND OBJECTIVES

In recent years not just the novel therapeutic approaches, but the coronavirus pandemic has also affected the therapy management of patients with rheumatoid arthritis. Beside these changes, the immunization against COVID-19 has also been an issue and raised several questions from clinicians to patients. Therefore, our aim was to find out the possible changes that patients were experiencing and the potential factors influencing their therapy.

MATERIAL AND METHODS

Data was collected through structured personal interviews with a 33-item questionnaire licensed by the Regional Research Ethics Committee of the University of Pécs and review of the medical records from January until September in 2022. We used the data available in the ambulatory medical records and the itemized reporting interface of the National Health Insurance Fund. Drug interactions were analyzed using UpToDate Lexicomp database.

The effect of pandemic on our survey:

1. Longer time to authorization
2. Obtaining additional data protection license
3. Relative is coming for the medication / fill the prescription
4. 1-month vs. 3-month dosage as the dispensed one
5. Patients „running away” from hospitals because of the fear of getting infected

Ethical license number:
9007-PTE 2021.

Data protection license number:
KK/1225-2/204

2022. January 1. – 2022. December 31.

Patient interviews (15-25
minutes, 33 questions)

Interaction questionnaire
(10)

Motivation questionnaire
for supplementary
products (1)

Covid-19 questionnaire
(22)

UpToDate®

Lexicomp® Drug Interactions

58 Patients

35

Female

23

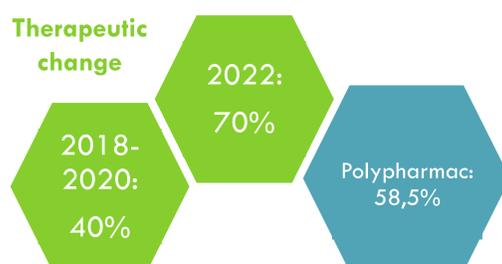
Male

Medication use review

Medical record (Outpatient)

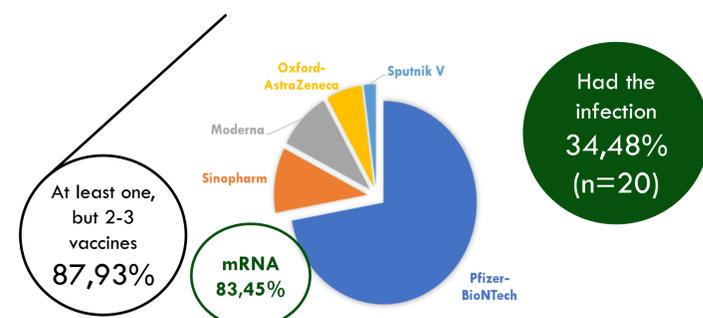
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Itemized (individual) reporting system (National
Health Insurance Fund)



RESULTS

35 female patients (average age: 63.53 years \pm 13.82) and 23 male patients (average age: 53.54 \pm 12.96) received biological or targeted therapy for an average of 7.17 years (\pm 4.12), while the average patient activity index DAS28 was 3.15 (\pm 1.17) and BASDAI was 5.29 (\pm 5.52). 87.93% (51/58) of the patients have used non-medication health products, mainly vitamin C or D. 34.48% of the patients were confirmed with coronavirus infection during the pandemic, while the vaccination rate was 87.89%. 83.45% of the patients received at least one mRNA vaccine. In our patient group, the influenza vaccination rate was 36.21%, while only 5.21% of the patients had been vaccinated against Pneumococcus in six months previous to our survey. The total number of serious (category X and D) interactions were 216, in 135 cases a vaccine and in 58 cases a monoclonal antibody or targeted therapy was included as interacting pair.



Combinations that should be used with precautions:

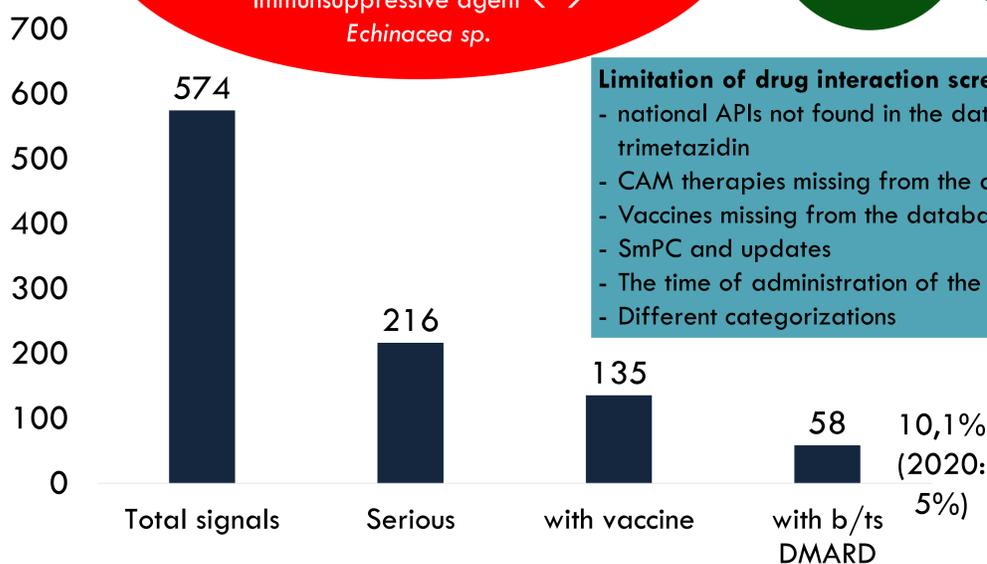
- NSAID \leftrightarrow vaccine
- Beta-blockers \leftrightarrow JAK-inhibitor
- Rituximab \leftrightarrow vaccine
- Immunosuppressive agent \leftrightarrow Echinacea sp.

Influenza vaccination rate: 36,21%

Pneumococcal vaccination rate: 5,21%

Limitation of drug interaction screening:

- national APIs not found in the database e.g.: trimetazidin
- CAM therapies missing from the databases
- Vaccines missing from the databases
- SmPC and updates
- The time of administration of the vaccine
- Different categorizations



CONCLUSION AND RELEVANCE

Despite the growing number of new therapeutic approaches and vaccines, the screening methods for analyzing potential drug interaction are lacking behind and the Summary of Product Characteristics are not suitable for comprehensive evaluations. The inclusion of these therapies and the optimization in vaccination status in the medication review process and the understanding of immunological mechanism potentially influencing the therapy of patients is warranted.

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