

REFERRAL PATTERN AND PRIMARY CARE PHYSICIANS' PERSPECTIVE TO IDENTIFY PATIENTS WITH SUSPECTED RHEUMATOID ARTHRITIS: ROOM FOR IMPROVEMENT

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BACKGROUND

- Primary care physicians (PCPs) play a crucial role in early recognition and referral of patients with rheumatoid arthritis (RA) to improve management and patient outcomes.
- However, the non-specific symptoms early in the disease and the long waiting list to access rheumatology clinics may be a challenge.
- There is limited information on perceived barriers by PCPs and areas of improvement for early referral.

OBJECTIVES

- To evaluate referral patterns in an early arthritis clinic (EAC) with direct access for PCPs
- To explore variables that may influence an adequate referral and PCP's perspective and needs to identify areas of improvement.

METHODS

- An EAC (REUCARE) was started in our academic center in Jan 2022 with direct access for patients with suspected RA.
- Referral criteria were strictly clinical and based on previous EAC, literature review and approved by a PCP committee: >2 SJC, duration of symptoms <2 years and no previous diagnosis by a rheumatologist explaining the symptoms.
- 180 PCPs from 11 centers have direct access to REUCARE
- Data collected: distance hospital- primary care center, number of PCP per center, and zip codes as a surrogate for patient income.

RESULTS

- From January to October 2022, 140 patients were referred, 66.4% female, mean age of 54.2 (15.3) years.
- A total of 38 (27%) patients fulfilled the predefined referral criteria: RA (15.8%), psoriatic arthritis (7.9%) and undifferentiated arthritis (76.3%).
- Patients with adequate referral were younger (50.4 vs 55.6, p=0.03), but have similar income and were referred from a PCP center with similar characteristics (size and distance from the EAC-HGUGM).
- Survey response 10%: 67% of PCPs aware of the importance of early diagnosis but not very confident making the initial diagnostic (61% "somehow" and 35% "not confident"). 77% indicated using additional resources to improve RA knowledge
- All participants would be interested in additional training or resources as e-consult (87%), updated mini guidelines (78%) and face-to face meetings with rheum (56.5%).

Figure 1. Main reason for referral to rheumatology care when suspected RA

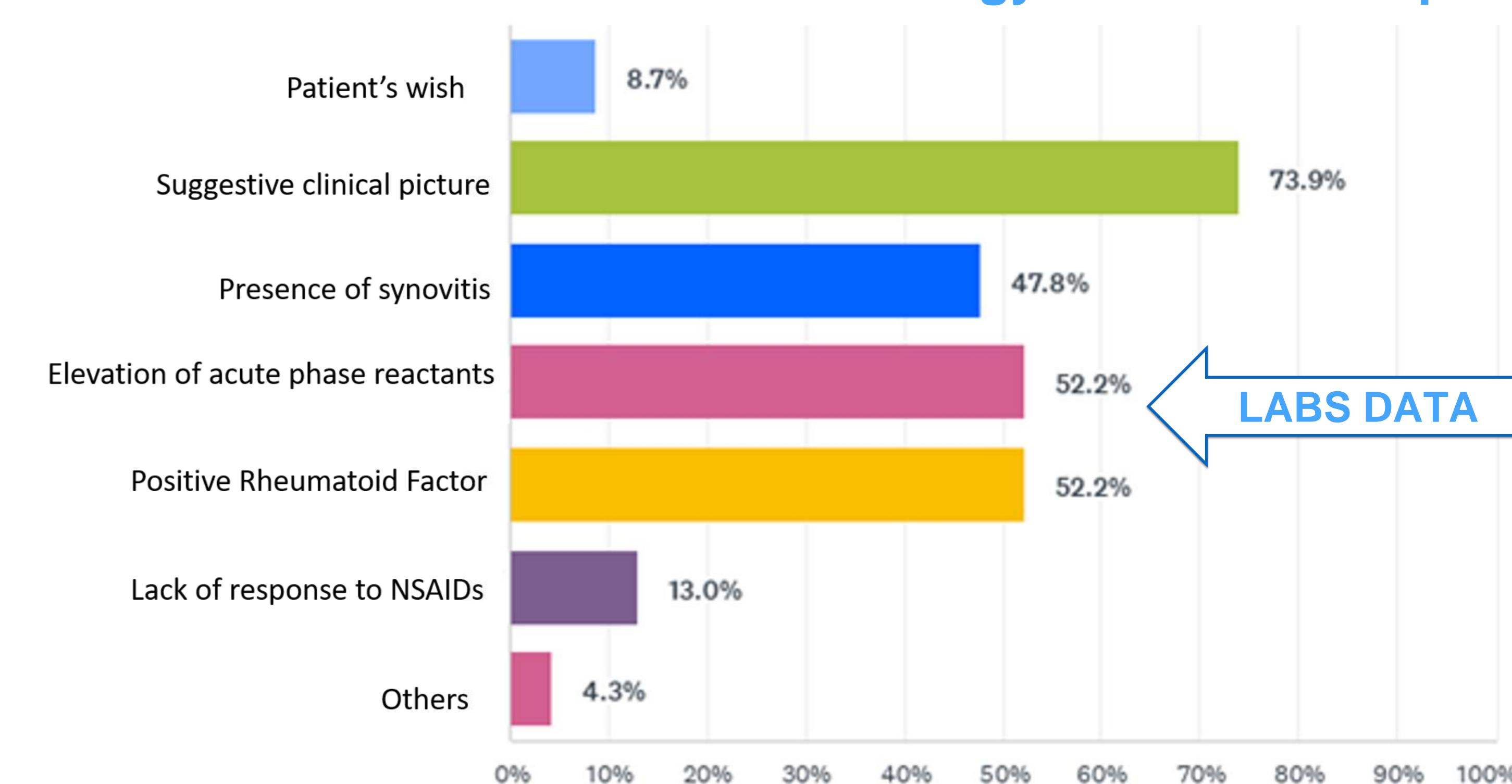
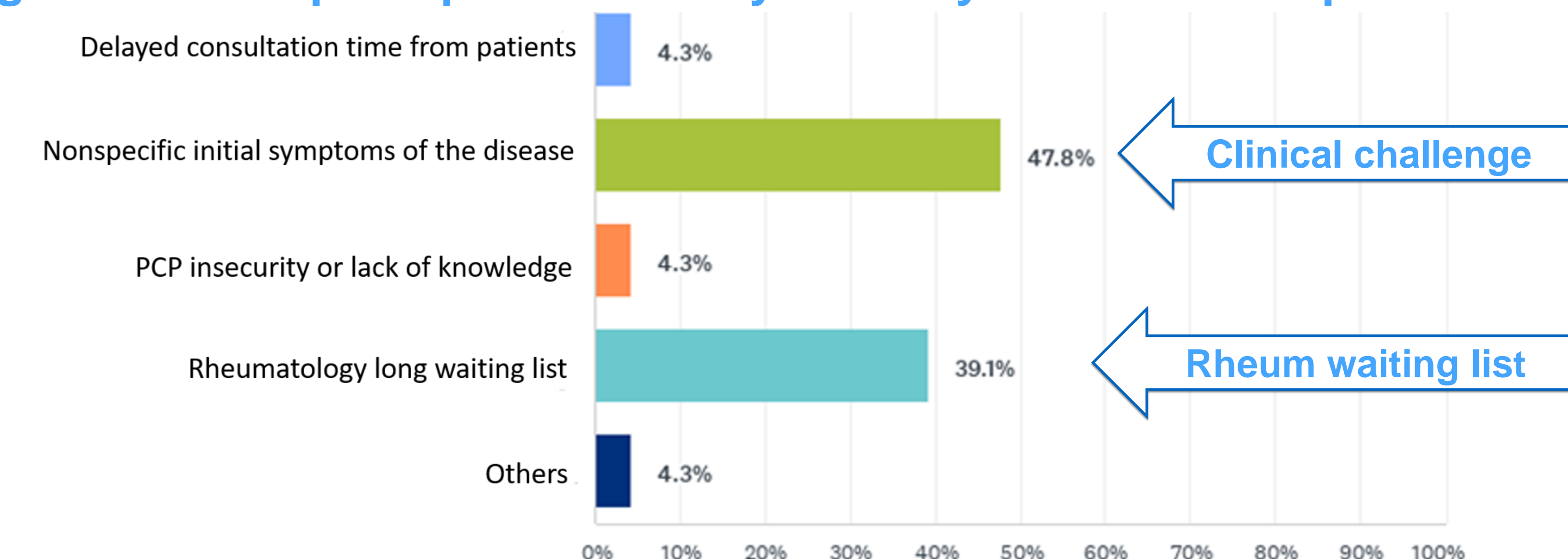


Figure 2. PCPs perception for delay for early referral for RA patients



CONCLUSIONS

- Only 27% of patients referred to the EAC were adequately referred.
- Most PCPs are aware of the importance of early diagnosis of RA, but feel uncomfortable making the initial diagnosis and need to enhance clinical skill to discriminate RA.
- Younger age was the only variable associated with adequate referral.
- Resources to improve referral as e-consult and specific guidelines, are in need as part of this program.