

component (31.6 vs 36.4) and a higher score of mental component (39.0 vs 36.5) compared with patients without lung involvement. Correlation analysis between QoL in patients with lung disease showed a negative, moderate correlation between the PCS and the disease activity SLAM ($r = -0.69$, $p < 0.05$) and SLEDAI ($r = -0.56$, $p < 0.05$), while the MCS had a weak negative correlation with SLEDAI ($r = -0.33$, $p < 0.05$) and did not correlate with SLAM. In patients without lung disease, was identified a weak negative relationship between SLAM and PCS ($r = 0.40$, $p < 0.05$). Simultaneously, was established an inverse correlation between the PCS and the organ damage index (SLICC DI) in both groups ($r = -0.52$, $p < 0.05$) and in patients without lung injury also with MCS ($r = -0.38$, $p < 0.05$).

Conclusion: In patients with SLE was found a diminished QoL. In the group with pulmonary involvement was established a reduced physical component score, which correlated inversely with disease activity. In patients without pulmonary involvement, the QoL was reduced also, with an inverse moderate correlation with SLICC DI and a less significant correlation with disease activity.

Keywords: Systemic lupus erythematosus, Quality of Life

37. CORRELATION BETWEEN PAIN, FUNCTIONAL DISABILITY AND DISEASE ACTIVITY IN PSORIATIC ARTHRITIS PATIENTS WITH AXIAL INVOLVEMENT

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Summary: Psoriatic arthritis is an inflammatory arthritis that is associated with psoriasis. Early objectification joint pathology and conditioning treatment, slows progression of the disease and its unfavorable prognosis. Clinicians pay great attention to psoriatic arthritis, which is motivated by certain tendencies within global growth over the past three decades between 0.3 - 1% in population in general. The aim of this research was to assessment the correlation between pain intensity, functional disability and disease activity in psoriatic arthritis (PsA) patients with axial involvement. There were examined 47 patients suffering from psoriatic arthritis, with average age of 43.8 ± 1.6 years.

Material and Methods: The study included a cohort of patients selected according to the ASAS criteria for PsA. The pain intensity was assessed by Visual Analog Scale (VAS) for pain. The disease activity was estimated using the Bath Ankylosing Spondylitis Disease Activity Index (BASDAI), and the functional disability was evaluated by Bath Ankylosing Spondylitis Functional Index (BASFI)

Results: We studied 47 patients, 44.1% females with mean age of \pm SD 43.8 ± 1.6 years, and disease duration of \pm SD 11.0 ± 1.2 years. The pain intensity by VAS and functional disability by BASFI was 6.7 ± 2.4 and respectively 5.4 ± 1.2 points. The disease activity was estimated at 5.7 ± 0.8 points, being appreciated as moderate-severe.

		BASDAI	BASFI	VAS
BASDAI	Correlation Coefficient		0,844	0,807
	Significance Level p		< 0,0001	< 0,0001
BASFI	Correlation Coefficient	0,844		0,650
	Significance Level p	< 0,0001		< 0,0001
VAS	Correlation Coefficient	0,807	0,650	
	Significance Level p	< 0,0001	< 0,0001	

Was established a strong significance positive correlation between VAS and BASDAI ($p < 0.0001$), BASDAI and BASFI ($p < 0.0001$). The VAS and BASFI had a moderate positive interdependence, as shown in the table.

Conclusion: The Pain Intensity and Functional Disability Index have a high significance positive correlation with the disease activity while between VAS and BASFI was revealed a moderate positive correlation in psoriatic arthritis patients with axial involvement.

Key words: axial disease, disease activity, functional disability