

**E27 CIMPACO: AN AUDIT OF THE ACCURACY OF PATIENT SELF-REPORTED DIAGNOSES AMONGST A COHORT OF RHEUMATOLOGY PATIENTS IN IRELAND**

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**Background:** Musculoskeletal diseases account for the bulk of disability and are the commonest diagnoses globally today. Validated data on the Irish population are scarce, and there is a lack of validated national epidemiological and economical information. European studies show reported diseases in Ireland to be similar to some other countries but the rates of self-reported and validated data are limited and differ dramatically between studies. A pan-EU study shows Irish people report having rheumatoid arthritis more frequently than osteoporosis and/or osteoarthritis, in younger and older adults. As part of a larger research programme to understand the epidemiology, costs and impact of arthritis and osteoporosis in Ireland, we have completed questionnaires on > 100 patients with several forms of arthritis, fibromyalgia and osteoporosis. Patients attending an outpatient specialty clinic need to understand and know their diagnosis and treatment to effectively manage their care. We performed an audit of data validity evaluating the accuracy of patient self-reported diagnoses with those recorded in the medical record.

**Methods:** This study has been approved by the I.R.B. for National University of Ireland, Galway and the Saolta University Hospitals I.R.B. boards. Patients attending rheumatology outpatients in Merlin Park or Sligo-Manorhamilton were offered the opportunity to fill out an 18-page questionnaire on the impact, cost and economic burden of arthritis and/or osteoporosis using established published international

metrics. Patients who agreed to participate filled out written informed consent and filled out paper questionnaires in clinic or at home. All results have been entered into a database. Patients with five forms of arthritis, fibromyalgia and osteoporosis were questioned. In order to validate the accuracy of self-reporting, patients self-reported diagnoses and medications were compared to those recorded in their medical record by members of the rheumatology team. In this audit, we present the results of the accuracy of self-reported diagnoses for the first 274 patients.

**Results:** 274 participant questionnaires were reviewed. Diagnostic agreement was generally good: 2/3 or higher except for the lowest ankylosing spondylitis at 24% and gout at 44%. The highest recorded was the fibromyalgia cohort at 88%.

**Conclusion:** The accuracy of patients' self-reported diagnoses attending a rheumatology outpatient clinic was generally good with the exception of gout and ankylosing spondylitis. These data should help projections for self-reported diagnoses at a national level.

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