Abstract

Objectives: To assess the impact of rheumatoid arthritis (RA) on self-reported health-related quality of life (HRQoL), health status, absenteeism, employment status, and presenteeism in urban China.

Methods: Data are from the internet-based 2009 National Health and Wellness Survey (NHWS) survey of urban China. The NHWS is a syndicated, annual, internet-based, cross-sectional survey of the adult population in urban China. The impact of RA is assessed on self-reported health-related quality of life, health status, employment status, and presenteeism. All models are estimated with unweighted data. In the case of employment status and presenteeism, binary logistic and multinomial logit models are estimated, with ordered logit models in the case of educational attainment. The impact of RA on self-reported health-related quality of life, absenteeism, and presenteeism is assessed in terms of standard deviation units, or a proportion of the mean of the outcome variable. The impact of RA in urban China is a substantial disease burden.

Limitations of the Analysis

The NHWS is an internet-based survey, meaning that proxy responses could be present due to the lack of internet penetration in some regions of the country. The survey is not representative of the entire urban Chinese population and the results cannot be generalized to the entire urban Chinese population. In addition, the NHWS relies upon respondents reporting that they have been diagnosed with arthritis. RA is highly under-recognized and under-reported in urban China.

Conclusions

The results presented here represent the first time a comprehensive, population-based assessment of the presence, burden, and impact of self-reported undiagnosed arthritis, health status, employment, and productivity in urban China have been attempted. The results presented suggest that RA is a significant disease burden in urban China and that future studies should consider the use of self-reported arthritis, the presence of comorbidities (Charlson co-morbidity index), and respondent health risk behaviors (BMI, alcohol use, smoking) as independent variables in future studies.

References


Figure 1. Quality of Life Between Patients with and without RA

Figure 2. Distribution of Lab Force

Figure 3. WPAI: Impact of Health Problems on Absenteeism in the Past Seven Days

Figure 4. WPAI: Impact of Health Problems on Presenteeism in the Past Seven Days

Table 1. Baseline Demographic Characteristics

Table 2. Summary of Results from Regression Analyses

Table 3. Summary of Results from Regression Analyses