

[FRI0541] A CROSS-SECTIONAL, INTERNATIONAL SURVEY ON NON-INVASIVE TECHNIQUES TO ASSESS THE MICROCIRCULATION IN PATIENTS WITH RAYNAUD'S PHENOMENON (SUNSHINE SURVEY)

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Background: Microcirculatory impairment in patients with Raynaud's phenomenon (RP) may be assessed by different techniques, but real-life data concerning their roles and current usage are not available.

Objectives: To obtain an overview of the specific techniques which may be used for the assessment of adult patients with RP in clinical and research settings: nailfold videocapillaroscopy (NVC), dermoscopy, stereomicroscopy, and digital USB microscopy, laser Doppler flowmetry, imaging, and anemometry/velocimetry, laser Speckle Contrast Analysis (LASCA), thermographic imaging, upper limb arterial Doppler ultrasound.

Methods: This survey was conducted online between October and December 2015 on behalf of EULAR study group on Microcirculation in Rheumatic Diseases (SG_MC/RD). Emails with a link to the survey were sent to physicians from the European Scleroderma Trials and Research group (EUSTAR) and SG_MC/RD mailing lists. Of those e-mailed, 418 were physicians looking after adult patients, and this group was considered in the following descriptive analysis.

Results: Of the 418 eligible physicians, 107 completed the survey, giving an overall response rate of 25.6%. Among the respondents 89 (83.2%) were rheumatologists, 74 (69.2%) European; 87 (81.3%) were practising for more than 10 years and 50% looked after between 31 and 60 patients per year with primary and/or secondary RP. The most routinely performed technique was NVC (63/107, 58.9%) both by rheumatologists and non-rheumatologists (54/89, 60.7% and 9/18, 50.0%). NVC was reported as the most available technique (93/107, 86.9%), and available in the place of work in 78/107 (72.9%) among both rheumatologists and non-rheumatologists. Nailfold capillaroscopy was the most frequently performed by the physician him/herself by using different types of equipment relating to availability: NVC 64/94 (68.0%), dermoscopy 38/63 (60.3%), stereomicroscopy 31/42 (73.8%), and digital USB microscopy 34/39 (87.1%). Most rheumatologists reported high levels of "appropriateness" for NVC in both clinical and research settings for global assessment (86/88, 97.7% clinical setting, 87/88, 98.9% research setting), and differential diagnosis of primary and secondary RP (clinical and research setting both 84/87 96.5%). In clinical setting NVC showed the highest percentage of appropriateness for monitoring primary RP (84/88, 95.4%), RP secondary to connective tissue diseases other than systemic sclerosis (82/87, 94.2%) and to systemic sclerosis (87/87, 100%). All techniques other than capillaroscopy reached a consensus lower than 2/3 of respondents based on their knowledge/experience. In research setting, all techniques were judged as potentially useful with a consensus more than 2/3 of respondents.

Conclusions: Of all the different techniques upon which opinion was sought, nailfold capillaroscopy was the one most used by physicians looking after adult patients in both clinical and research settings, the majority of whom use NVC in their everyday practice. The low proportion of clinicians using other techniques suggests that these are currently confined to specialist centres.

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