

# CIORA Project Showcase

By Janet Pope, MD, MPH, FRCPC



**A**t the most recent CRA Annual Scientific Meeting in February, Drs. Barry Koehler, Inés Colmegna, and Regina Taylor-Gjevre presented their CIORA grant reports. In this issue's CIORA column, we'd like to share the three CIORA projects that were highlighted in Montreal. The projects were showcased to provide attendees an opportunity to hear about successful CIORA grants by both community and academic rheumatologists.

## Self-assessment Triage in Inflammatory Arthritis: A Pilot Study

**Presented by Dr. Barry Koehler**

The study performed a comparison of a patient-completed questionnaire vs. a patient-completed tender joint count vs. the two combined, to evaluate whether patients with inflammatory arthritis can be identified from waiting lists. The study group feels that the use of preliminary studies, biostatistical advice before and during the study, and regular communication throughout the study were responsible for obtaining CIORA approval and for successful patient enrollment and data collection. A total of 202 evaluable subjects were enrolled and results are in the process of analysis.

## What Do People Living with Rheumatoid Arthritis and Their Health-care Providers Consider Barriers or Facilitators for Influenza Vaccine Uptake?

**Presented by Dr. Inés Colmegna**

Influenza vaccine is effective. It prevents illnesses, reduces medical visits and hospitalizations, and decreases death rates due to influenza. The goals for influenza vaccine coverage suggested by the Public Health Agency of Canada are 80% for adults older than age 65 years and for those younger than 65 years living with high-risk conditions. However, a CIORA-funded cross-sectional study at McGill University Health Care Center found a 48.5% rate of vaccination coverage in rheumatoid arthritis (RA). Although this is above the reported rate (37%) for Canadian adults ≤ 65 years of age living with chronic medical conditions, there is a clear need and an opportunity to improve vaccination coverage among rheumatic patients.

At the national level, the advice of a health-care provider to people with chronic medical conditions was associated with vaccine uptake. However, 48% of patients

with chronic conditions reported that their reason for not getting the influenza vaccine was that it was “not needed or recommended.” Similarly, in our study, the MD recommendation was the strongest independent predictor of influenza vaccination among RA patients. This highlights our unique role as rheumatologists in improving vaccine uptake.

What are the barriers and facilitators to optimizing influenza vaccine uptake among RA patients? This is the central question that we addressed through qualitative research (focus groups) with the support of CIORA. Perceived barriers and facilitators of vaccine acceptance were similar in RA patients and their health-care providers. Main barriers included lack of knowledge, understanding, or misinformation regarding the need for the influenza vaccine. What interventions are effective in increasing vaccine acceptance in RA? This was the topic of a systematic review to inform the development of a targeted motivational communication intervention that we will test in the upcoming influenza season.

In summary, thanks to the generous support of CIORA we have defined the existence of a gap in influenza vaccine uptake among RA patients; identified reasons that patients and providers endorse related to that problem, and reviewed the limited existing evidence on interventions to enhance vaccine acceptance. Furthermore, we have developed a novel intervention based on motivational communication that will be tested in the 2019-2020 influenza season. From describing the magnitude of the problem, to proposing approaches to reduce its burden on RA patients, this has been an amazing learning opportunity.

## Addressing Rural and Remote Access Disparities for Patients with Inflammatory Arthritis through Telehealth/Videoconferencing and Innovative Inter-professional Care Models

**Presented by Dr. Regina Taylor-Gjevre**

In Saskatchewan, there is a relatively high proportion of the provincial population who reside in isolated smaller communities. We undertook a study to evaluate whether rheumatoid arthritis patients followed longitudinally for nine months, using videoconferencing and inter-professional support, have comparable disease control to those followed in traditional in-person clinics.

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# What is the CRA Doing For You?



By Kevin Baijnauth, Communications Coordinator, CRA

With another successful Annual Scientific Meeting recently behind us, some members may not know that in addition to an outstanding learning and networking opportunity, this meeting presents a great opportunity for many of the Canadian Rheumatology Association (CRA) committee members to meet in person and discuss their work plans and goals for the year.

We have highlighted just a few initiatives for CRA members to look out for!

### Podcast Project

In development by the Communications Committee, a CRA-endorsed podcast is being produced that will be chalk full of content of interest to our members. Stay tuned for more information in the coming months!

### Competency-based Medical Education (CBME)

CBME is coming – and the Education Committee is looking to inform and educate CRA members about how to implement it into rheumatology training programs.

### Curate, Create and Collaborate

The HR Committee has established a work plan for 2018-2020 which follows a framework of “Curate, Create and Collaborate.” Some of their initiatives include a scoping review of workforce-related research, launching a 2020 Stand Up and Be Counted Survey, and exploring interprofessional collaboration opportunities, to name a few.

### Guidelines

One of the Guidelines Committee's priorities is to support active groups in the completion of Rheumatoid Arthritis (RA) guidelines and the development of Spondyloarthritis (SpA) guidelines. The Quality Care Committee will also be working with the Guidelines Committee to ensure equity considerations are integrated into the RA and SpA guidelines.

### Upcoming Position Statements

The Therapeutics Committee is looking to develop and communicate a position statement on stem-cell therapy, as well as disseminate the Biosimilars Position Statement to membership and industry partners.

### And more!

All CRA operational committees are hard at work on their respective work plans for 2019; the above-noted activities highlight only a few of these initiatives. For more information and updates, please visit the News & Updates section on the CRA website at [www.rheum.ca](http://www.rheum.ca).

*Kevin Baijnauth  
Communications Coordinator,  
Canadian Rheumatology Association (CRA)*

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Of 85 participants, 54 were randomized to the videoconferencing care model and 31 to the traditional clinic. There were no significant between-group differences in DAS28-CRP, RADAI, mHAQ or EQ5D scores at baseline or over the study period. Satisfaction rates were high in both groups.

At study completion, we found no difference in effectiveness between inter-professional videoconferencing care and a traditional rheumatology clinic. High drop-out rates reinforced the need for consideration of patients' needs and preferences. While use of videoconferencing/tele-

health technologies may be a distinct advantage for some, there may be a loss of travel-related auxiliary benefits for others. The report on this study is currently published in the *Journal of Musculoskeletal Care*.

*Janet Pope, MD, MPH, FRCPC  
Professor of Medicine, Division Head, Division of Rheumatology,  
Department of Medicine, St. Joseph's Health Care,  
Western University  
London, Ontario*