

Conférence laurentienne de rhumatologie

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Abstract #: 8

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Marital status and age of systemic lupus erythematosus diagnosis

Objective(s): Chronic rheumatic diseases can challenge social and family relationships. There is little published on how age at systemic lupus erythematosus (SLE) onset might mediate these effects. Our objective was to compare marital status frequencies in SLE patients with their general population counterparts, and to examine for subgroup differences, based on age of SLE diagnosis.

Method(s): We performed a cross-sectional assessment of a cohort of SLE patients followed at our centre with yearly updates on health and demographics including marital status. 382 patients with SLE (349 females and 33 males) were included. We determined how many of the patients were married or living common-law at the time of the last study visit (in 2016/2017). SLE patients were then divided into separate groups: SLE diagnosis before 18, between 18-30, between 31-44 and after 45 years of age. We then compared data from SLE patients to the age-specific marital statistics of the Quebec population (Statistics Canada), stratifying by sex.

Result(s): Of 382 SLE patients, 202 (52.9%) were married or living common-law, which was 9% lower than the age and sex specific Quebec general population rates (95% CI 2-16%). One-third of women diagnosed with SLE before age 18 were married or living common-law, which was 28% lower than the age-and-sex specific Quebec general population counterparts (95% CI 6-46%). Half of women diagnosed between age 18-30 were married or living common law, which was 14% less than the age-and-sex specific Quebec general population rates (95% CI 4-25%). Two-thirds of women diagnosed between age 31-44 and 49% of women diagnosed after age 45 were married or living common-law, which was similar to the age-and-sex specific Quebec general population rates. In men with SLE, we saw no clear differences versus the general population, likely due to power issues.

Conclusion(s): Women diagnosed with SLE before age 30 were significantly less likely to be married or living common-law, than similarly aged women in the Quebec general population. This association was not seen in women diagnosed after age 30. We were unable to establish differences between SLE men and their general population counterparts. Our findings may reflect negative effects of young-onset SLE (e.g. on confidence or body image) but equally may be affected by race/ethnicity distribution, which may differ in SLE versus the general population, or other factors (e.g. pursuing education or career goals which were postponed at SLE onset). In future analyses, we will explore these issues.
