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Disease flare up after SARS-COV -2 Vaccination among patients with rheumatic and musculoskeletal diseases in a Rheumatology Specialized Care Center- Sri Lanka.

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Background

During the recent past, there has been growing research interest on covid-19 vaccines and its impact on the disease dynamics of rheumatic and musculoskeletal diseases (RMDs). The intersection of Covid 19 and autoimmunity has led to the theoretical possibility of flare up of the autoimmune diseases with Covid vaccines. This study was conducted to evaluate the occurrence and the nature of flare-ups following the Covid vaccination on patients with RMDs.

Methods

This cross-sectional analytical study was conducted at Ragama Rheumatology and Rehabilitation Hospital, Sri Lanka involving 248 clinic patients using a structured questionnaire.

Results

The mean age of the study population was 52.69 and 75.4% were females. 12 patients (4.7%) reported flare symptoms following 1st dose of vaccination. Of them, 67% were females and 41.7% were within 40-45 years age group. 75% of patients have experienced the onset of the flare symptoms following 1 week of the vaccination and in 41.7% symptoms have lasted more than 8 weeks. 66.7% who got this flare have received Sinopharm, while 25% received Covieshield. In this flare 58.3% got polyarthritis,16.7% monoarthritis, 8.3% oligoarthritis and 16.7% generalized rash.

By contrast, 42 (16.9%) patients who received the 2nd dose of the vaccine got flare symptoms. 90.5% of this population were females and 38.1% were within 50-59 years age group. 42% have got flare following 1st week of the vaccination and in 57% symptoms have lasted more than 8 weeks. 5 patients who got flare symptoms following the first dose reported having flare after the 2nd dose too. None of the flare symptoms following 1st or 2nd doses of the vaccinations needed hospitalizations. Interestingly gender(p=0.012), use of methotrexate(p=0.043) and the presence of flare to the first dose(p=0.02) were found to be significantly co-rrelated with the occurrence of flare symptoms following 2nd dose of vaccination.

Conclusion

This study reveals a considerable incidence of non-severe RMD flare-ups following Covid vaccination, mainly with the 2^{nd} dose. Further studying on the effects of repeated and periodic

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Covid vaccination among patients with R acceptance in this group of patients.	RMDs is timely	to reassure and to	improve the vaccine