

EULAR11-3152**PATIENTS WITH RHEUMATOID ARTHRITIS FREQUENTLY FLARE DURING THE COURSE OF DISEASE**V. P. Bykerk^{1,*}, N. Shadick¹, M. Frits¹, C. Iannaconne¹, C. Bingham III², M. Weinblatt¹, D. H. Solomon¹¹Rheumatology, BRIGAM AND WOMEN'S HOSPITAL, Boston, ²Rheumatology, John Hopkins University, Baltimore, United States**I confirm that my abstract complies with the rules and contains original data:** Yes**My abstract has been or will be presented at a scientific meeting during a 12 months period prior to EULAR 2011:** No**Are you applying for a Travel Bursary?:** No**Background:** A disease flare -- worsening of disease activity -- in rheumatoid arthritis (RA) can be severe enough to warrant a change of therapy. Little is known about how frequently flares occur in RA or how patients manage flares.**Objectives:** To describe the frequency and duration of self-reported flares and management of flares in a prospective cohort of patients with RA.**Methods:** Data were collected in a prospective, observational, single- academic center cohort of RA patients treated according to preference of their rheumatologist. Patients were questioned every 6 months to determine if they'd had a flare of their disease over the previous 6 months, the frequency and duration of flares, and how medications changed during flares.**Results:** 738 RA patients followed for 3 years who had reported on flare at least once were included for this analysis. In the cohort 84% were female, 93% Caucasian and 73% were RF or CCP positive. The mean age (SD) was 56.3(12.9) yrs and mean disease duration (SD) was 14.1(11.9) years. 74% reported flares at baseline, 59% at 6 months and approximately 56% reported flares every 6 months thereafter. 34% of flares were reported to last at least 2 weeks, 13% lasted at least 1 week, 16% lasted 4-6 days and 37% lasted ≤ 3 days. Patients frequently reported starting new medications as a response to flares. Patients reporting flares that lasted less than two weeks were more likely than those with longer flares to start narcotics or analgesics but those reporting longer flares were more likely to start or increase biologics and DMARDs**(Table)****Table: Proportion (%) of Patients Starting Medication According to Duration of Self Reported Flares**

Flare Duration	Analgesics	Narcotics	Prednisone	NSAIDs	Non Biologic DMARDs	Biologic DMARDs
≥2 weeks	3.7	3.7	32.6	17.1	30.1	25.5
<2 weeks	17.1	8.0	25.1	18.5	14.4	17.4
p-value*	<.0001	0.01	0.02	NS	<.0001	0.006

*calculated using Chi Square; NS not significant; DMARDs Disease Modifying Anti Rheumatic Drugs

Conclusions: Patients with RA frequently report flares of their disease that require changes in medication. In an era where the goal of therapy is remission or low disease activity this needs to be taken into consideration in assessing long-term patient outcomes.**Disclosure of Interest:** None Declared