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Background:
Patient education is an integral part in the management of arthritis. Arthritis Educational Needs Assessment Tool (The ENAT) was designed to identify individual educational needs of patients with arthritis.

Aim:
The aim of this study was to evaluate gender differences of educational needs among patients with ankylosing spondylitis (AS) and psoriatic arthritis (PsA) by use of the ENAT.

Methods:
ENAT is a self-completed questionnaire comprising of 39 items grouped into 7 domains (managing pain, movement, feelings, arthritis process, treatments, self-help measures and support systems). Patients score the items by ticking 5-point Likert scales ranging from “not at all important” = 1 to “extremely important” = 5.

This study utilized a quantitative design and recruited a convenience sample of 218 patients attending the rheumatology outpatient clinic of a large teaching hospital in Leeds. Patients completed the ENAT unaided at the time of their clinic visit whilst waiting for their consultation.

The data was analysed descriptively and Kruskal-Wallis test was used to determine significant differences where appropriate.

Sample Demographics:
Diagnosis and gender characteristics of the sample are tabulated in Table 1. Their mean age was 44.49 (SD = 12.57) and the median disease duration was 14 years.

Table 1. Cross tabulation of gender and diagnosis

<table>
<thead>
<tr>
<th></th>
<th>Male (%)</th>
<th>Female (%)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>AS</td>
<td>78 (66.7)</td>
<td>39 (33.3)</td>
<td>117</td>
</tr>
<tr>
<td>PsA</td>
<td>43 (47.9)</td>
<td>49 (52.1)</td>
<td>94</td>
</tr>
<tr>
<td>Unspecified</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>123 (58.3)</td>
<td>88 (41.7)</td>
<td>218</td>
</tr>
</tbody>
</table>

Results
Both AS and PsA patients reported their educational needs as “very important” (median = 4) on management of pain, feelings, arthritis process, treatment and for self-help, and “fairly important” (median = 3) for movement and for support.

Patients with PsA wanted more information on movement (median = 4) than those with AS (median = 3).

Table 2. Medians of educational needs

<table>
<thead>
<tr>
<th>Domain</th>
<th>AS Median</th>
<th>PsA Median</th>
</tr>
</thead>
<tbody>
<tr>
<td>Managing pain</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Movement</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Managing feelings</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Arthritis process</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Treatment</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Self-help</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Support</td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>

Overall, the female patients indicated significantly more educational needs than their male counterparts on all domains except on “support”.

Fig 1. Overall gender differences of educational needs

In the AS cohort, female patients had significantly higher educational needs than their male counterparts on pain control, movement and arthritis process (p = 0.018, 0.057 and 0.002 respectively).

In the PsA cohort, they had significantly more educational needs than male patients on movement (p = 0.012) and management of feelings (p = 0.012)

Fig 2. Gender differences of educational needs

Conclusion:
ENAT appears to effectively describe educational needs of patients with AS and PsA. Based on these findings, female patients with AS and PsA have more educational needs than their male counterparts.

These findings support the need for individualized assessment of patients’ educational needs.

References

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