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Conclusion:
used by 80% and judged to be very helpful.

alcohol per week was acceptable and 52.6% thought the limit was 4

situations. There was 90–100% accurate response to questions
and over. Competence: this was tested with MCQs on clinical

over time. The time it took to become confident in the role was variable
had changed a lot and 50% reported that this had changed somewhat

somewhat confident. 42% reported that their education of patients

training. Confidence: 60% of respondents described themselves as

less than helpful. 62% expressed that they would have liked more

those who had training, 46% described it as very helpful and 54% as

prior to starting this role. 73.4% had some training and 12.7% a lot. For

nurse specialists and 25% monitoring nurses. 62% had been

spread the link to colleagues.

the survey was sent to possible participants with encouragement to

response questions about their role; training; confidence and we used multiple

methods: A cross sectional study retrospective case note review of 45

patients with SLE, Sjögren’s or APS, was undertaken in addition to a

patient survey of awareness of pregnancy risks associated with CTDs.

Results: Sixty episodes of conception were recorded in 27/45 women

(60%) with 44 live births (73.3%). Adverse pregnancy outcomes were

recorded in 15 women (53.5%) which included disease flare up in 3
cases (11.1%), high blood pressure and pre-eclampsia in 2 cases each

(7.4%), 11 episodes of miscarriages (18.3), termination of pregnancy in 5

pregnancies (8.3%), premature delivery in 4 pregnancies (6.6%) and

intra-uterine growth retardation in 3 pregnancies (5%). There was a

high rate of pregnancy complications in the LN (n = 5/7) (71.4%) and

APS (n = 6/10) (60%) subgroups. Fetal heart block was recorded in
two fetuses born to mothers with anti-Ro/SSA and anti-La/SSB
antibodies (n = 14). One third of women had preconception counselling
recorded and 22% had consultant-led obstetric antenatal care. A
postal patient survey was returned by 8/45 (17.8%) women and
demonstrated poor patient awareness of the pregnancy risks
associated with CTDs (87.5%) and medications (75%).

Disclosure statement: The authors have declared no conflicts of
interest.

O2. PATIENT AWARENESS OF RISKS AND CLINICAL
OUTCOMES ASSOCIATED WITH CONNECTIVE TISSUE
DISEASES IN PREGNANCY: A CROSS SECTIONAL STUDY

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Background: Patients with CTD are considered to have a high risk of adverse pregnancy outcomes. Risks may be related to disease activity, medications and/or autoantibody profiles. Current guidelines suggest careful pre-conceptual planning and MDT management for these high-risk pregnancies. Current data have indicated that poor pregnancy planning and lack of patient awareness may have serious implications on pregnancy outcomes. The aim of this study was to assess pregnancy outcomes and patients’ awareness of disease-related risks in a secondary care setting of patients with CTDs.

Methods: A cross sectional study retrospective case note review of 45 patients with SLE, Sjögren’s or APS, was undertaken in addition to a patient survey of awareness of pregnancy risks associated with CTDs.

Results: Sixty episodes of conception were recorded in 27/45 women (60%) with 44 live births (73.3%). Adverse pregnancy outcomes were recorded in 15 women (53.5%) which included disease flare up in 3 cases (11.1%), high blood pressure and pre-eclampsia in 2 cases each (7.4%), 11 episodes of miscarriages (18.3), termination of pregnancy in 5 pregnancies (8.3%), premature delivery in 4 pregnancies (6.6%) and intra-uterine growth retardation in 3 pregnancies (5%). There was a high rate of pregnancy complications in the LN (n = 5/7) (71.4%) and APS (n = 6/10) (60%) subgroups. Fetal heart block was recorded in two fetuses born to mothers with anti-Ro/SSA and anti-La/SSB antibodies (n = 14). One third of women had preconception counselling recorded and 22% had consultant-led obstetric antenatal care. A postal patient survey was returned by 8/45 (17.8%) women and demonstrated poor patient awareness of the pregnancy risks associated with CTDs (87.5%) and medications (75%).

Disclosure statement: The authors have declared no conflicts of interest.