

Arthritis Patient Perspectives on Virtual Care for People Living with Arthritis During the COVID-19 Pandemic and for the Future



Maya Joshi¹, Anita Chan¹, Adriana Lima², Kelly Lendvoy¹, Eric C. Sayre², Cheryl L. Koehn¹
 1. Arthritis Consumer Experts; 2. Arthritis Research Canada

Background

- Virtual Care (VC) is the delivery of health care services and information by electronic methods (video, email, phone, text).
- VC has become increasingly common since March 2020, the start of the COVID-19 pandemic.
- VC may support arthritis patients in seeing their healthcare providers in a timely and convenient way. However, little is known about arthritis patients' views and preferences on VC.

Purpose

- An online Survey was conducted to understand arthritis patients' perspectives and experiences using VC and if they would like to see virtual care options expanded in the future. The Survey also aimed to identify inequities regarding access to VC services.

Methods

- 23-question online Survey in English and French disseminated via social media and arthritis patient community networks from Jan 20-Feb 9, 2021.
- Respondents with a physician-diagnosed arthritis answered questions on their experiences with in-person and VC services pre-Covid and during COVID, their preferences and satisfaction with those services, and the importance of VC availability in the future.
- Data were analyzed in aggregate (including incomplete survey responses). McNemar's test of agreement between time points was performed to compare pre-COVID to during COVID to (anticipated) post-COVID. Chi-square tests (exact tests where possible) were used to test for associations.

Respondent Demographics (n=253)

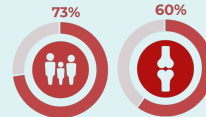
Female	79%
Self-identifying as Black, Indigenous or person of colour (BIPOC)	5.1%
Rheumatoid arthritis	47%
Osteoarthritis	19%
Lupus	13%
Living with disease for less than 10 years	50%
Living in large urban center	66%

Findings

VC Use Pre & During COVID-19

- 59% of respondents were already accessing some form of VC pre-pandemic.
- Since March 2020, 88% have used VC, representing a 50% total increase from before the pandemic (p value <0.001).

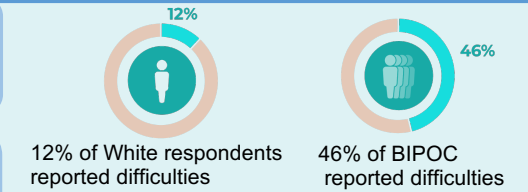
Since March 2020, 73% have used VC to see their family physician, 60% to see their rheumatologist.



Challenges Accessing VC

32% were unable to receive arthritis specific VC at a time they felt they needed it since March 2020.

16% reported facing difficulties using VC. The most common difficulty was not feeling comfortable or not understanding how to use VC technology, followed by issues accessing the internet.



12% of White respondents reported difficulties

46% of BIPOC reported difficulties

BIPOC respondents were over 3x more likely to report difficulties using VC (p value <0.01).

Satisfaction Using VC



85%

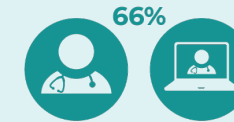
85% were satisfied sharing health concerns and getting advice through VC

BIPOC were less likely to be very satisfied with their VC experiences (p value 0.01)

The most common reason for liking VC was *not needing to travel to appointments*, while the most common reason for liking in-person was *joint examinations*

Perspectives on VC Post-Pandemic

66% of the respondents want both in-person and VC options for the future



66%

"I would really like a mix of care: in-person for more urgent things and when I want my doctor to see a swollen joint or something, and then virtual care for stuff I need that doesn't really warrant a visit, like a prescription refill, blood test requisition etc." - Open-ended comment from Survey respondent

Conclusions

Survey respondents living with arthritis have generally been satisfied with their VC experiences and would like to continue to have access to VC services in the future, to augment care between in-person visits. BIPOC respondents are facing VC inequities, which must be addressed moving forward. The overall underrepresentation of BIPOC respondents in the Survey suggests their lack of inclusion in arthritis patient organization networks.