中文題目：風濕性關節炎與一般族群罹患腸胃道穿孔風險之比較：一個全國性研究

英文題目：Comparison of the risk for gastrointestinal perforation between patients with rheumatoid arthritis and general population: a nationwide cohort study

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Background: Patients with rheumatoid arthritis (RA) may have an increased risk for gastrointestinal perforation (GIP) due to medications or chronic inflammation. Whether patients with RA are at an increased risk for GIP when compared to the general population is a comparison that has yet to be explored in the literature. We conducted this study to fill this gap.

Methods: Using the Taiwan National Health Insurance Research Database, we recruited participants with RA and participants without RA (from the general population) matched at 1:1 ratio by age, sex, and index date between 2000 and 2013 for this nationwide population-based cohort study. Comparison of the risk for GIP between participants with RA and those without was performed by following up until 2014 using Cox proportional hazard regression analysis.

Results: 11666 participants with RA and identical number of participants without RAwere recruited for this study. The mean age (±SD) and female ratio were 55.3 (±15.2) years and 67.6% in both cohorts. Compared to participants without RA, participants with RA had more past histories with hypertension, diabetes, diseases of esophagus, stomach, and duodenum, hyperlipidemia, coronary artery disease, stroke, chronic obstructive pulmonary disease, renal disease, liver disease, alcohol abuse, and mental disorder, and lower monthly income. Participants with RA also had a trend of increased risk for GIP than participants without RA after adjusting for past histories and monthly income (adjusted hazard ratio [AHR]: 1.38; 95% confidence interval [CI]: 0.98–1.95). Stratified analyses showed that increased risk was found in the female population (AHR: 2.01; 95% CI: 1.25–3.22), but not in the male population (AHR: 0.85; 95% CI: 0.51–1.44). Kaplan–Meier analysis and the log-rank test also showed an increased risk in the participants with RA than in those without.

Conclusion: RA might increase the risk for GIP, especially true in the female population. More attention for the possibility of GIP should be paid to patients with RA.