



The Korean College of Rheumatology: 40 Years of Public Health Influence

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Forty years ago, rheumatology was invisible in Korea. Neither patients nor doctors knew what disease rheumatology was dealing with and how rheumatology can be of benefit to the medical community and the society. Since its establishment in 1981, the Korean College of Rheumatology (KCR) endeavored to promote the visibility of rheumatology in our society through various public health activities.

First, the KCR invested in establishing the Rheumatology Research Foundation in 2012. Through this foundation, the KCR provides funds for public health research projects to understand the epidemiology of arthritis and other rheumatic diseases, and the risk factors for these diseases that pertain to our society. These research projects have clarified the incidence, prevalence, and burden of major rheumatic diseases, including rheumatoid arthritis (RA), systemic lupus erythematosus, and ankylosing spondylitis (AS), in Korea [1]. In addition, research on the usefulness of patient education programs and the development of quality indicators for the treatment of RA to improve patient-centered care has been performed with support from the Research Foundation [2-4]. To keep pace with changes in the current medical environment, research on the preventive effect of the COVID-19 vaccine and the development of an appropriate diagnostic-related group model is underway.

Second, the KCR established the Korean College of Rheumatology Biologics and targeted therapy (KOBIO) registry and supported the establishment of health registries of major rheumatic diseases to understand the health burden of the Korean population with rheumatic diseases. The KOBIO is a nationwide observational cohort established in December 2012, which aims to investigate the safety of biologics and targeted therapies in patients with RA, AS, and psoriatic arthritis. Since its establishment, 47 institutes nationwide have participated in the KOBIO registry and more than 5,700 patients are enrolled as of October 2021 [5]. Moreover, many publications have been derived from the KOBIO [6-18]. Data from these registries have brought up many important public health issues and provided bases for many policies to combat arthritis and other rheumatic conditions. With this powerful tool for public health research, we can quickly respond to emerging public health-related issues and provide interventions that can improve the quality of life of patients with rheumatic diseases.

Third, the KCR has established the Health Policy Committee to promote public health and public policy efforts to make rheumatology care more effective and more accessible for patients. To ensure a high standard of care for patients receiving RA treatment, the committee developed quality indicators for

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RA treatment based on extensive literature reviews and surveys on National Health Insurance Service data and hospital records. The quality indicators have been endorsed by the KCR and are in the process of being included in the official items of hospital evaluation by regulatory authorities. The KCR has also developed clinical practice guidelines for relevant physicians to provide optimal management for patients with rheumatic diseases. For example, guidelines for the use of biological disease-modifying antirheumatic drugs for inflammatory arthritis [19], the prevention and treatment of glucocorticoid-induced osteoporosis [20], and vaccinating patients with autoimmune inflammatory rheumatic diseases [21] have been developed and published. Recently, the KCR established a committee for clinical practice guidelines to encourage and manage the development of clinical guidelines. Currently, projects are underway for gout, axial spondyloarthritis, osteoarthritis, and RA. During the COVID-19 pandemic, the KCR urgently released recommendations for self-care of patients with rheumatic diseases [22], management of patients with systemic rheumatic diseases [23], and COVID-19 vaccination in patients with autoimmune inflammatory rheumatic diseases [24]. In addition, the KCR is continuing medical expense support projects for low-income people and efforts to expand national insurance coverage for patients with rheumatic diseases.

Fourth, the KCR has supported various national and international initiatives, campaigns, and patient groups to raise awareness of arthritis and other rheumatic conditions. Since 2003, the KCR has held a national campaign, referred to as the GoldRing campaign, to promote awareness of RA. The GoldRing cam-

paign hosts various public relation and educational activities nationwide during the month of October every year to commemorate World Arthritis Day on October 12 every year. As an expansion of the GoldRing campaign, the KCR hosted a healing camp for patients with AS in November 2019, which received fervent response from patients and their families, and attracted great public attention (Figure 1). The KCR also designated Ankylosing Spondylitis Patient Day on the first Friday of November every year to support patients living with AS and promote social awareness of the disease. The importance of early diagnosis and management has been emphasized in the campaign, as significant morbidity and disability can develop if AS diagnosis is delayed. It can be said, “Through these efforts, the diagnostic delay of AS, which was over 3 years, has been significantly reduced.” As social network sites have become effective tools for communication in recent years, the KCR has started an official blog (<https://blog.naver.com/rheumainfo>) and a YouTube channel (<https://www.youtube.com/channel/UCXv7QqNLKk-gXNscOYMvSbTA>) to provide creditable information regarding rheumatic diseases from rheumatology specialists. In addition, the KCR is providing disease-related information about 16 major rheumatic diseases to the public through its website. These communication efforts through social network sites and its website have contributed significantly to public awareness and are continuously expanding audiences. The KCR holds regular meetings with RA, AS, and SLE patient groups to understand and promote the interests of patients.

During its 40 years of public health effort, the KCR has grown significantly and has become “visible.” The KCR has brought together patients and families, its members, and many other partners in its journey to combat rheumatic diseases, and the efforts can be considered “well done.” However, the burden of rheumatic diseases is catching up quickly to growth and development. The KCR will continue to move forward in the years to come, until it reaches its goal of providing a “cure” for patients with rheumatic diseases. Until then, it will continue to take “care.”

FUNDING

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CONFLICT OF INTEREST

No potential conflict of interest relevant to this article was re-



Figure 1. A photo of the Korean College of Rheumatology Healing Camp with ankylosing spondylitis patients held on November 20~21, 2019, at Dam Yang, South Jeolla province, Korea.

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AUTHOR CONTRIBUTIONS

All authors, J.L., Y.K.S., M.S.L., and H.J.B. contributed to conception and design of the manuscript, drafting and revising the manuscript critically for important intellectual content.

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