Conclusions It was established the relationship of antiphospholipid syndrome with the process of atherosclerosis.

The presence of atherosclerotic plaques is not associated with traditional risk factors.

Not establish a connexion between antiphospholipid antibodies and IMT.

Proven connexion between aCL and carotid plaques.

Not establish correlation between aPL and Ca score.

Persons with APS have a higher incidence of Calcium score versus healthy controls.

Background and aims In antiphospholipid syndrome (APS), antibodies reactive to CL-bet2-GPI are known to be the important pathogenic factor, but the mechanism of the interaction between the antibodies and cells, and the reason why APS is highly associated with SLE are not fully elucidated.

Methods Since we obtained a monoclonal antibody WB-6 which shows reactivity to CL-beta2-GPI and induces a pro-thrombotic state in normal mice by tissue factor expression, we tried to clarify how this antibody interacts with live cells.

Results In the current study, we found unexpectedly that WB-6 reacted with DNA by direct-binding ELISA which was confirmed by inhibition ELISA. The result of epitope mapping on the domain 1 of beta2-GPI suggested that WB-6 binds to the arginine- and lysine-rich peptides close to the N-terminal of beta2-GPI, not directly but indirectly via DNA. Incubation of endothelial cell lines or monocytic THP-1 cells with WB-6 revealed that WB-6 enter into the live cells. Because pre-treatment of the cells with DNase 1 significantly reduced the internalisation, this phenomenon is likely to be resulted from interaction of WB-6 and cell surface DNA.

Conclusions These results suggest that some anti-DNA antibodies show dual reactivity with CL-beta2-GPI via DNA, and this may contribute to the high percentage of association with SLE and Ca score. Not establish correlation between aPL and Ca score.

Long-term prognosis and predicting factors of Chinese patients with antiphospholipid syndrome

Background and aims The aims of the present study were to assess and identify the prognostic factors of the long-term outcomes and mortality of antiphospholipid syndrome (APS) in Chinese patients.

Methods Records of 160 patients with APS admitted to Peking Union Medical College Hospital in Beijing between 2005 and 2015 were investigated. Demographic characteristics, cumulative clinical and laboratory features, autoantibody profiles were retrieved from the database. Survival rates were studied by Kaplan-Meier method, and COX proportional hazard model was adopted to perform the analysis of predicting factors for mortality.

Results The entire cohort consisted of 110 (68.8%) female and 50 (31.3%) male patients. Mean (SD) age was 36.5 ± 14.9 years. In total, 50.6% of the patients had primary APS, 45.9% had APS associated with SLE. The most prevalent immunological features at baseline were LA (71.3%), aCL (55.0%), and β2GPI (49.4%). No significant statistical