A SIMPLE METHOD TO EVIDENCE SUBCLINICAL INCREASED RISK OF CARDIOVASCULAR DISEASE IN LUPUS

Background Subclinical atherosclerosis is a major cause of morbidity and mortality in patients with systemic lupus erythematosus.1,2

Objective The goal of this study is to assess the subclinical atherosclerosis in patients suffering the above mentioned disease, by measuring the ankle-brachial index.

Method We have studied 97 female patients diagnosed with systemic lupus erythematosus, and a control group of other 64 female patients, not having the disease. For both groups we recorded the demographics, the medical history. We also performed several laboratory tests and the ankle-brachial index measurement.

Results The mean value of ankle-brachial index on patients with systemic lupus erythematosus was statistically lower compared to control group (0.91±0.29 vs 1.14±0.17, p=0.0001). The univariate analysis of specific risk factors, showed that only the length of disease (r=-0.201, p=0.049), and the age of disease diagnosis (r=-0.354, p=0.0001) is statistically correlated with the ankle-brachial index. The multivariate analysis revealed that, among the specific risk factors, only the disease duration (B=-0.647, p=0.001), the age at diagnosis (B=0.326, p=0.002) and the presence of antcardiolipin antibodies (B=-0.338, p=0.003) are statistically correlated with ankle-brachial index.

Conclusions In our study, the determined value of ankle-brachial index on patients with systemic lupus erythematosus, was statistically lower than on the control group, thus revealing the presence of subclinical atherosclerosis.

REFERENCES