Background/Purpose Anti-carbamylated protein antibodies (anti-CarP) were detected in a large cohort of patients with Systemic Lupus Erythematosus (SLE) in correlation with erosive arthritis but not with disease activity indexes. In animal models, T-cells may be activated by carbamylation epitopes playing a role in the development of arthritis. The imbalance between circulating regulatory (Treg) and CD28- effector T-cells was described in active SLE patients, explaining its involvement in disease’s pathogenesis. Actually, no data are available about the possible correlation with these T-cell subpopulations and anti-CarP levels in SLE.

Methods Eight SLE patients with a median (10th-90th percentile) SLEDAI-2K = 0 (0–4), anti-DsDNA levels=34.1 (15.6–427.4) UI/ml (nv<7), SDI=1 (0–1.3) were enrolled. Serum anti-CarP levels were evaluated using a home-made ELISA (nv<340 AU/ml) and peripheral blood T cell immunophenotyping was done using Flow Cytometry (Beckman Coulter). Treg were defined as CD4+CD127lowCD25high T-cells.

Results Enrolled patients showed levels of anti-CarP=189.38 (93.5–341.1) AU/ml, Treg=2.2 (% of CD4+) and CD4+CD28-=30.3 (17.2–35.6) % of CD4+. Analyzing possible correlations among different T-cell subtypes and anti-CarP levels, a significant inverse correlation was found between these autoantibodies and CD4+CD28- T cells (r=-0.8, p<0.01; Spearman rank correlation). No correlations were found between autoantibodies and other T-cell subpopulations or disease activity/damage indexes.

Conclusions In a small cohort of patients with serologically active SLE, anti-CarP autoantibodies were found as negatively correlated to circulating CD4+CD28- T-cells, which were described in association with disease damage, independently of age, gender, disease duration and activity. This suggest a potential role of anti-CarP as marker of SLE with a minor extent of T-cell activation and, consequently, with a possibly better prognosis.