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AbstractBook

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LIPID PROFILE OF PATIENTS WITH RHEUMATOID ARTHRITIS RECEIVING INTERLEUKIN-6 INHIBITORS

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Objective: To evaluate changes in lipid profile in RA patients receiving inhibitors of IL-6 (iIL-6) with methotrexate (MT).

Methods: The study enrolled 15 patients with RA receiving MT in a dose of 15 mg or more per week for at least a year and tocilizumab as an infusion according to the standard scheme. Lipid profile, DAS28-CRP(4) were assessed before and after 24 weeks of combined therapy. Exclusion criterion was the presence of concomitant disease, which could affect lipid metabolism.

Results: The mean age of RA patients was 52.4±7.8 y with a disease duration of 6.2±3 y. All patients were positive for rheumatoid factor, had DAS28-CRP(4)>5.2, advanced and late clinical stages. Elevated levels of total cholesterol (TC) were registered in 80% of cases. The mean value of the TC was 6.45±1.7 mmol/l. Increase of triglycerides level was registered in 40% of cases, LDL - in 80%, and decrease of HDL - in 60%. Most patients had type II hyperlipidemia with a high degree of atherogenicity: IIa - 8 persons (53.3%), IIb - 4 persons (26.7%). Correlation analysis showed a direct correlation of TC with age, menopause, and excess body weight. The duration of RA was directly correlated with TC, LDL; disease activity had a negative effect on HDL. By week 24 all patients had positive dynamics of clinical and laboratory manifestations of the disease: ESR (from 42.8 to 8.6 mm/h), CRP (from 12.4 to 2.1 mg/l), DAS28-CRP(4) indices (from 6.2 to 2.9). By week 24 of the combined therapy, hypercholesterolemia was already detectable in 93.3% of patients; mean TC level increased from 6.45 to 6.96 mmol/L.

Conclusion: iIL-6 improves the effectiveness of treatment in RA patients, reduces the activity of the inflammatory process. High frequency of hypercholesterolemia is revealed in patients, whose degree increases by the 24th week of combined therapy, which requires timely correction of lipid profile in RA patients with hypercholesterolemia by means of statins.

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DYNAMICS OF PAIN SYNDROME IN PATIENTS WITH RHEUMATOID ARTHRITIS RECEIVING INTERLEUKIN-6 INHIBITOR

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Objective: To assess pain syndrome dynamics in rheumatoid arthritis (RA) patients receiving IL-6 inhibitor (iIL-6) in combination with methotrexate (MT) in clinical practice using clinical and laboratory indexes as well as quality of life indexes.

Methods: The study enrolled 15 patients diagnosed with RA. Among them there were 11 women, 4 men. The mean age was 56.6±7.4 y, duration of disease was not less than 12 months. All patients had DAS28-CRP(4)=6.4±0.46. All the patients received MT at a dose of 15 mg/week for at least a year. Tocilizumab (TCZ) was administered in the form of infusions at a dose of 8 mg/kg according to the standard regimen. DAS28-CRP(4), CDAI, SDAI, quality of life by HAQ-DI and SF-36 questionnaires, pain perception and disease activity by patient and doctor on VAS before combined therapy and after 24 weeks were assessed.

Results: By week 24 of the combined MT and TCZ treatment all patients registered a 50% improvement in ACR criteria scores. Positive dynamics of clinical and laboratory manifestations of the disease were observed: reduction of ESR (from 44.4 to 7.6 mm/h), CRP (from 21.4 to 0.96 mg/L), DAS28-CRP(4) (from 6.4 to 3.4), CDAI (from 45.8 to 14.72) and SDAI (from 47.94 to 14.82). There was a significant improvement in the form of pain intensity reduction: decrease of pain intensity (from 54.4 mm to 8.4 mm) and disease activity according to patient (from 58.4 mm to 8.2 mm) and physician (from 59.6 mm to 14 mm) on the VAS. There was also an improvement of quality of life on the HAQ-DI (from 1.176 to 0.652) and SF-36 questionnaires (physical component from 32.04 to 43.74, mental component from 51.7 to 56.42).

Conclusion: iIL-6 increases potential of the combined therapy with MT in RA, which is manifested in marked positive dynamics of parameters, reflecting severity of pain syndrome, activity of inflammatory process, achievement of improvement according to ACR20/50/70 criteria.