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A wide variety of dermatological manifestations in the antiphospholipid syndrome/ hughes syndrome

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Introduction: Antiphospholipid syndrome (APS) or Hughes Syndrome patients express skin manifestations with the presence of various levels of antiphospholipid antibodies (aPL). This syndrome is termed as primary (PAPS) when it occurs in the absence of underlying or associated diseases; Secondary APS (SAPS) is associated with autoimmune diseases such as systemic lupus erythematosus (SLE). Several studies have shown the frequency of dermatological manifestations with APS, including livedo reticularis, cutaneous ulcers, acrocyanosis, and other. Dermatological manifestations can be the initial clue in the diagnosis of this disease. So it is important to investigate patients who present with cutaneous manifestation related to venous or arterial thrombosis or microthrombosis.

Materials & Methods: Our study includes a total of 508 APS patients; 360 were PAPS patients (283 females and 77 males, mean age 44.0±12.9 years), 148 had APS associated with SLE/SAPS (133 females and 15 males, mean age 47.7±14.8 years). Among these groups, 15 patients with catastrophic APS, which are in international registry of patients with catastrophic APS, created in 2000 by the European Forum on Antiphospholipid Antibodies. aPL analysis included: LA and aCL (IgG/IgM), ß2GPI (IgG/IgM), by positive titers: low (10–30), medium (30–100), and high (>100PLU/ml). In all patients, we collected data considering frequently occured skin lesions.

Results: Our results showed prevalence of skin manifestations in SAPS group of patinenst regading to PAPS (Figure 1). Patients with skin manifestations overall had higher prevalence of thrombosis (Figure 2). All type of aPL had influence for skin manifestations in both group of patients, exspesiallly for SAPS (Figure 3, 4).

Conclusion: Dermatological manifestations can be very often the initial symptoms of severe manifestations of APS. Our study showed that patients with secondary APS had higher prevalence of skin lesions, and that some aPL types were risk factors for thrombotic manifestations in APS patients.

Biography

Ljudmila Stojanovich has received her PhD in Medicine, with the thesis "Neuropsychiatric manifestations in patients with Systemic Lupus Erythematosus" in 1999. She is the Scientific Director in the Bezhanijska Kosa, University Medical Center of Belgrade University, where she is currently a Full Research Professor. Her research focuses on Systemic Lupus Erythematosus, Antiphospholipid Syndrome, and Vaccination in patients with Autoimmune Rheumatic diseases. She is an author of three monographs and of about 250 articles. She is in Editorial Boards (LUPUS/London), the Reviewer in the "Current Contents" or "Science citation index", like Cellular and Molecular Neurobiology, and others. She was in Invited Speaker for many lectures in Congresses and Symposia. She is EULAR Honorary Member; the Chairman in the International Congress "Antiphospholipid syndrome (Hughes syndrome)", 2013, Co-Chairman and the Lector "LUPUS Academy Eastern European Roadshow of EULAR", 2016.

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Figure 1:Prevalence of skin manifestations analyzed in PAPS and SAPS group

Figure 2: Skin manifestations and thrombosis

Figure 3: Skin manifestations and aPL type PAPS group

Figure 4: Skin manifestations and aPL type SAPS group