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Clinical advances of anti-TIF1γ autoantibody in a Hungarian myositis cohort

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The idiopathic inflammatory myopathies (IIM) are systemic autoimmune disease, which is caused by an immune-mediated inflammation and characterised with proximal muscle weakness. Myositis-specific auto-antibodies (MSAs) are associated with the disease and can be detected in patients' sera. These MSAs determine subgroups which are different in symptoms, severity, prognosis and genetic background. During the recent development in knowledge about auto-antibodies the roles of MSAs in diagnosis and prognosis have changed. Anti-TIF1y autoantibody is presented as a tumor-specific MSA led to a 155-kDa/140-kDa protein complex and also showed an association with serious juvenile and adult DM. The association of malignant diseases with myositis is also well known. Risk for tumor in dermatomyositis (DM) is 3-fold, and 1.3-fold in (PM). Based on these data, searching malignancy is one of the most important steps after myositis diagnosis. During this research our aim was to determine the clinical characteristics associated with the presence of anti-TIF1y antibodies and to define the serological subgroup in cancer-associated (CAM) myositis, particularly the tumor specificity and of the mentioned antibody. Patients were cared by the Division of Clinical Immunology, Institute of Internal Medicine and University of Debrecen. We examined 202 patients with IIM. Inclusion criteria was the presence of finished antibody testing, 12 cases showed positivity in anti-TIF1y. One of these patients had CAM. We examined the differences between the anti-TIF1y positive (n=12) and negative CAM (n=51) groups concerning symptoms, lab values, cancer type. The anti-TIF1y antibody positivity has been presented in 5.9% of our patients and associated with severe skin symptoms. Although earlier studies claimed that CAM patients are similarly characterized by severe skin symptoms, in our cohort respectively prevalence of Gottron's sign and Heliotrop rash were significantly higher in anti-TIF1y positive cases. This research could not prove the tumor-specificity of anti anti-TIF1y antibody, but our results confirm that the presence of this antibody separate a subgroup of myositis different in clinical symptoms and severity.

Biography

I completed my MD degree at University of Debrecen, Hungary in 2011 and I work as a PhD student and trainee in Internal Medicine at Division Of Clinical Immunology, Department Of Internal Medicine, University of Debrecen. Now I also work in clinical practice and I'm doing my research project examining epidemiological characteristics, clinical features, outcomes, laboratory findings including pathogenesis, outcome assessment, or treatment responses in Idiopathic Inflammatory Myopathies. During the past 3 years approximately 10 publications were submitted to Hungarian and international journals. I also work in collaboration with international study gropus in Myositis research (EuMyonet and IMACS).

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