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# Cardiovascular disease in rheumatoid arthritis, does the presence of anti-peptide citrullinated antibodies have any association?

**R Hernández, S A Rodriguez, J Uceda, C V Almeida** and **J L Marenco**
Valme Hospital, Spain

**Background:** Rheumatoid arthritis (RA) is a systemic autoimmune disease of unknown and multi-factorial etiology, whose prevalence is around 1% of the adult population. It most commonly affects women between the 4th and 6th decade. Patients with RA have an increased cardiovascular morbidity and mortality (CV) being the main cause of death. "Systematic Coronary Risk Evaluation (SCORE)" allow us to estimate the risk of death from cardiovascular disease as 10 years.

Objectives: To evaluate whether the presence of anti -peptide citrullinated (ACPA) antibodies is associated with increased frequency of cardiovascular disease (CVD) in patients with rheumatoid arthritis (RA) or with greater SCORE.

**Methods:** observational, analytical case-control study nested in a cohort of patients diagnosed with AR follow-up in the Valme hospital area. Cases were considered the patients who have developed a myocardial infarction or cerebro-vascular or ischemic heart disease and controls RA patients without CVD. They all determined ACPA levels, the classic cardiovascular.

**Results:** A total of 260 patients were included from a database of 327 patients with AR. In 67 of these, we couldn't get the main variables of the study and were excluded. When analyzing separately the association between the presence of ACPA + and classic cardiovascular risk factors, we found no statistically significant differences between ACPA (+) vs. ACPA (-) to the DMHTA, dyslipidemia, obesity and smoking.

**Conclusions:** In our sample, unlike other published studies, we found no differences in the occurrence of cardiovascular events, or the SCORE in patients ACPA (+) vs. ACPA (-). While subgroups of patients with ACPA + have a greater tendency to be treated with biological therapy. This lack of differences could also be explained by the early implantation of both primary and secondary prevention of cardiovascular disease in patients with RA.

raquel.hernandez.rhs@gmail.com

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