



MEETING ABSTRACT

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P01-019 – Anti-CCP antibodies are not associated with FMF

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Introduction

Familial Mediterranean fever (FMF) is an autosomal recessive disease that is prevalent among eastern Mediterranean populations, mainly non-Ashkenazi Jews, Armenians, Turks, and Arabs. Arthritis seen in FMF patients is generally acute monoarthritis which predominantly affecting the lower limbs, and it occurs during attack periods and also is a common clinical manifestation in patients with FMF alike Rheumatoid arthritis (RA). *Anti-cyclic citrullinated peptide (anti-CCP) antibodies* testing is useful in the diagnosis of Rheumatoid arthritis with high specificity. The citrulline residues are essential part of the antigenic determinants recognized by the RA antibodies.

Objectives

The aim of the study was to show the presence of anti-cyclic citrullinated peptide (anti-CCP) antibodies in child individuals diagnosed with Familial Mediterranean Fever (FMF).

Methods

The study group was comprised of one hundred and twenty six patients diagnosed with FMF (female/male (n):66/60); and fifty healthy control (female/male(n):25/25). Clinical and laboratory assessments of the FMF patients were performed during attack-free periods. Erythrocyte sedimentation rate (ESR), serum C-reactive protein (CRP), fibrinogen and anti-CCP antibody levels were measured.

Results

Anti-CCP results were negative in healthy controls and also in all FMF patients. There was not a significant difference in anti-CCP between the patient and the control

groups. The patient individuals were divided into four groups according to genetic mutation analysis. The groups has been comprised as M694V/M694V(n=26), M694V/Other(n=38), Other/Other(n=46), Negative (n=16). No significant difference detected between four mutation groups and anti-CCP levels. Our study has shown moderate positive correlations between age ($r_s = 0.271$; $p = 0.0020$), duration of illness ($r_s = 0.331$; $p < 0.0001$), colchicinetherapy ($r_s = 0.259$; $p = 0.004$) and anti-CCP levels. Also poor positive correlations between fibrinogen and anti ccp levels was detected ($r_s = 0.192$; $p = 0.0330$). Anti-CCP levels has not shown significance between patients with or without arthritis($p=0.148$).

Conclusion

In conclusion, no published data in children establish anti-CCP values in patients with FMF compared with healthy controls. Our data show that anti-CCP antibodies are not associated with FMF. Anti-CCP does not have a priority for identifying FMF arthritis from the other inflammatory arthritis.

Disclosure of interest

None declared.

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