



POSTER PRESENTATION

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Systemic sclerosis: focus on lipid profile implications in pro-thrombotic disorder

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Introduction

Three key features are representative for systemic sclerosis (SSc), including (i) prevalent vascular lesions and endothelial dysfunction, (ii) fibrosis and (iii) immune abnormalities with consequent occlusive vascular complications. Insufficiently data is actually provided about lipid profile and possible implication in vascular disorder in SSc.

Aims

To investigate potential involvement of lipid abnormalities in onset and progression of vascular occlusive complication in SSc.

Patients and methods

53 consecutive SSc and 50 matched healthy controls were enrolled in this study; assessments included (i) lipid profile (total cholesterol TC, low- and high-density lipoprotein cholesterol LDL-C, HDL-C, triglycerides TG, atherogenic index, lipoprotein A LpA), and (ii) high-sensitive C reactive protein (Hs-CRP).

Lipid levels of risk were determined in accordance with NCEP and AHA/ACC; statistical analysis was done in SPSS-17, $p < 0.05$.

Results

Significantly lower HDL-C and TC ($p < 0.05$), higher risk HDL, LpA and Hs-CRP levels were identified in SSc (44.7% vs. 8.2%; 33.9% vs 4.1%; 42% vs. 9.8, $p < 0.05$). Anti-SCL70 antibodies positivity was associated with lower HDL-C ($p < 0.05$), while pulmonary hypertension but no other clinical feature was associated with low HDL-C ($p < 0.05$).

Conclusions

Adverse lipid pattern, especially low HDL-C, is commonly reported in SSc, particularly anti-SCL70-positive forms; the significance for early accelerated atherosclerosis and the identification of patients predisposed to commonly develop thrombotic complications remain to be validated by future studies.

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